

Patient Name : Mrs.GUPTA RITIKA	Collected : 08/Apr/2023 08:28AM
Age/Gender : 34 Y 3 M 30 D/F	Received : 08/Apr/2023 11:40AM
UHID/MR No : CMAR.0000309252	Reported : 08/Apr/2023 04:37PM
Visit ID : CMAROPV657523	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8756384001.	

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY GOLD PLUS - FEMALE - TMT - PAN INDIA - FY2324

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

HEMOGRAM , WHOLE BLOOD-EDTA

HAEMOGLOBIN	13.6	g/dL	12-15	Spectrophotometer
PCV	42.90	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.95	Million/cu.mm	3.8-4.8	Electrical Impedance
MCV	87	fL	83-101	Calculated
MCH	27.6	pg	27-32	Calculated
MCHC	31.8	g/dL	31.5-34.5	Calculated
R.D.W	15.7	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	8,900	cells/cu.mm	4000-10000	Electrical Impedance

DIFFERENTIAL LEUCOCYTIC COUNT (DLC)

NEUTROPHILS	55.5	%	40-80	Electrical Impedance
LYMPHOCYTES	32.8	%	20-40	Electrical Impedance
EOSINOPHILS	6.4	%	1-6	Electrical Impedance
MONOCYTES	5.1	%	2-10	Electrical Impedance
BASOPHILS	0.2	%	<1-2	Electrical Impedance

ABSOLUTE LEUCOCYTE COUNT

NEUTROPHILS	4939.5	Cells/cu.mm	2000-7000	Electrical Impedance
LYMPHOCYTES	2919.2	Cells/cu.mm	1000-3000	Electrical Impedance
EOSINOPHILS	569.6	Cells/cu.mm	20-500	Electrical Impedance
MONOCYTES	453.9	Cells/cu.mm	200-1000	Electrical Impedance
BASOPHILS	17.8	Cells/cu.mm	0-100	Electrical Impedance

PLATELET COUNT	358000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	32	mm at the end of 1 hour	0-20	Modified Westegren method

PERIPHERAL SMEAR

RBCs: are normocytic normochromic

WBCs: are normal in total number with mild increase in eosinophils.

PLATELETS: appear adequate in number.

Patient Name : Mrs.GUPTA RITIKA	Collected : 08/Apr/2023 08:28AM
Age/Gender : 34 Y 3 M 30 D/F	Received : 08/Apr/2023 11:40AM
UHID/MR No : CMAR.0000309252	Reported : 08/Apr/2023 04:37PM
Visit ID : CMAROPV657523	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8756384001.	

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY GOLD PLUS - FEMALE - TMT - PAN INDIA - FY2324

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

HEMOPARASITES: negative

IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE WITH MILD EOSINOPHILIA.



SIN No:BED230088428

Patient Name : Mrs.GUPTA RITIKA	Collected : 08/Apr/2023 08:28AM
Age/Gender : 34 Y 3 M 30 D/F	Received : 08/Apr/2023 11:40AM
UHID/MR No : CMAR.0000309252	Reported : 08/Apr/2023 05:37PM
Visit ID : CMAROPV657523	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8756384001.	

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY GOLD PLUS - FEMALE - TMT - PAN INDIA - FY2324

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

BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD-EDTA

BLOOD GROUP TYPE	B			Microplate Hemagglutination
Rh TYPE	Positive			Microplate Hemagglutination



SIN No:BED230088428

Patient Name : Mrs.GUPTA RITIKA	Collected : 08/Apr/2023 08:28AM
Age/Gender : 34 Y 3 M 30 D/F	Received : 08/Apr/2023 11:57AM
UHID/MR No : CMAR.0000309252	Reported : 08/Apr/2023 04:15PM
Visit ID : CMAROPV657523	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8756384001.	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY GOLD PLUS - FEMALE - TMT - PAN INDIA - FY2324

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

GLUCOSE, FASTING , NAF PLASMA	104	mg/dL	70-100	HEXOKINASE
--------------------------------------	------------	-------	--------	------------

Comment:

As per American Diabetes Guidelines

Fasting Glucose Values in mg/d L	Interpretation
<100 mg/dL	Normal
100-125 mg/dL	Prediabetes
≥126 mg/dL	Diabetes

GLUCOSE, POST PRANDIAL (PP), 2 HOURS , NAF PLASMA	123	mg/dL	70-140	HEXOKINASE
--	-----	-------	--------	------------

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.GUPTA RITIKA	Collected : 08/Apr/2023 08:28AM
Age/Gender : 34 Y 3 M 30 D/F	Received : 08/Apr/2023 11:57AM
UHID/MR No : CMAR.0000309252	Reported : 08/Apr/2023 04:15PM
Visit ID : CMAROPV657523	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8756384001.	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY GOLD PLUS - FEMALE - TMT - PAN INDIA - FY2324

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

HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD-EDTA	5.6	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD-EDTA	114	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



Patient Name : Mrs.GUPTA RITIKA	Collected : 08/Apr/2023 08:28AM
Age/Gender : 34 Y 3 M 30 D/F	Received : 08/Apr/2023 11:14AM
UHID/MR No : CMAR.0000309252	Reported : 08/Apr/2023 01:08PM
Visit ID : CMAROPV657523	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8756384001.	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY GOLD PLUS - FEMALE - TMT - PAN INDIA - FY2324

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

LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	287	mg/dL	<200	CHO-POD
TRIGLYCERIDES	137	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	79	mg/dL	40-60	Enzymatic Immuno-inhibition
NON-HDL CHOLESTEROL	208	mg/dL	<130	Calculated
LDL CHOLESTEROL	180.4	mg/dL	<100	Calculated
VLDL CHOLESTEROL	27.4	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.63		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.



SIN No:SE04344005

Patient Name : Mrs.GUPTA RITIKA	Collected : 08/Apr/2023 08:28AM
Age/Gender : 34 Y 3 M 30 D/F	Received : 08/Apr/2023 11:14AM
UHID/MR No : CMAR.0000309252	Reported : 08/Apr/2023 01:08PM
Visit ID : CMAROPV657523	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8756384001.	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY GOLD PLUS - FEMALE - TMT - PAN INDIA - FY2324

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

LIVER FUNCTION TEST (LFT) , SERUM				
Test Name	Result	Unit	Bio. Ref. Range	Method
BILIRUBIN, TOTAL	0.40	mg/dL	0.3–1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.08	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.32	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	26	U/L	<35	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	25.0	U/L	<35	IFCC
ALKALINE PHOSPHATASE	67.00	U/L	30-120	IFCC
PROTEIN, TOTAL	7.13	g/dL	6.6-8.3	Biuret
ALBUMIN	4.11	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.02	g/dL	2.0-3.5	Calculated
A/G RATIO	1.36		0.9-2.0	Calculated



SIN No:SE04344005

Patient Name : Mrs.GUPTA RITIKA	Collected : 08/Apr/2023 08:28AM
Age/Gender : 34 Y 3 M 30 D/F	Received : 08/Apr/2023 11:14AM
UHID/MR No : CMAR.0000309252	Reported : 08/Apr/2023 01:08PM
Visit ID : CMAROPV657523	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8756384001.	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY GOLD PLUS - FEMALE - TMT - PAN INDIA - FY2324

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

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

CREATININE	0.54	mg/dL	0.72 – 1.18	JAFFE METHOD
UREA	21.40	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	10.0	mg/dL	8.0 - 23.0	Calculated
URIC ACID	4.12	mg/dL	2.6-6.0	Uricase PAP
CALCIUM	9.70	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	4.02	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	138	mmol/L	136–146	ISE (Indirect)
POTASSIUM	4.0	mmol/L	3.5–5.1	ISE (Indirect)
CHLORIDE	104	mmol/L	101–109	ISE (Indirect)



Patient Name : Mrs.GUPTA RITIKA	Collected : 08/Apr/2023 08:28AM
Age/Gender : 34 Y 3 M 30 D/F	Received : 08/Apr/2023 11:14AM
UHID/MR No : CMAR.0000309252	Reported : 08/Apr/2023 01:08PM
Visit ID : CMAROPV657523	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8756384001.	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY GOLD PLUS - FEMALE - TMT - PAN INDIA - FY2324

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

CALCIUM , SERUM	9.70	mg/dL	8.8-10.6	Arsenazo III
------------------------	------	-------	----------	--------------

Comments:-

Serum calcium measurements are done to monitor and diagnose disorders of skeletal system, parathyroid gland, kidney, muscular disorders, and abnormal vitamin D and protein levels.

ELECTROLYTES - SERUM , SERUM

SODIUM	138	mmol/L	136-146	ISE (Indirect)
POTASSIUM	4.0	mmol/L	3.5-5.1	ISE (Indirect)
CHLORIDE	104	mmol/L	101-109	ISE (Indirect)

GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	36.00	U/L	<38	IFCC
--	-------	-----	-----	------



Patient Name : Mrs.GUPTA RITIKA	Collected : 08/Apr/2023 08:28AM
Age/Gender : 34 Y 3 M 30 D/F	Received : 08/Apr/2023 11:14AM
UHID/MR No : CMAR.0000309252	Reported : 08/Apr/2023 12:01PM
Visit ID : CMAROPV657523	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8756384001.	

DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY GOLD PLUS - FEMALE - TMT - PAN INDIA - FY2324

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

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

TRI-iodothyronine (T3, TOTAL)	1.11	ng/mL	0.7-2.04	CLIA
Thyroxine (T4, TOTAL)	11.33	µg/dL	6.09-12.23	CLIA
Thyroid Stimulating Hormone (TSH)	0.885	µIU/mL	0.34-5.60	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



Patient Name : Mrs.GUPTA RITIKA	Collected : 08/Apr/2023 08:28AM
Age/Gender : 34 Y 3 M 30 D/F	Received : 08/Apr/2023 12:51PM
UHID/MR No : CMAR.0000309252	Reported : 08/Apr/2023 01:44PM
Visit ID : CMAROPV657523	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8756384001.	

DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY GOLD PLUS - FEMALE - TMT - PAN INDIA - FY2324

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

COMPLETE URINE EXAMINATION , URINE

PHYSICAL EXAMINATION

COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pH	5.5		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	1.025		1.002-1.030	Bromothymol Blue

BIOCHEMICAL EXAMINATION

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

CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY

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



SIN No:UR2094404

Patient Name : Mrs.GUPTA RITIKA	Collected : 08/Apr/2023 08:28AM
Age/Gender : 34 Y 3 M 30 D/F	Received : 08/Apr/2023 12:51PM
UHID/MR No : CMAR.0000309252	Reported : 08/Apr/2023 05:00PM
Visit ID : CMAROPV657523	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8756384001.	

DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY GOLD PLUS - FEMALE - TMT - PAN INDIA - FY2324

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

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

URINE GLUCOSE(FASTING)	NEGATIVE		NEGATIVE	Dipstick
------------------------	----------	--	----------	----------



SIN No:UPP014561,UF008282

Patient Name : Mrs.GUPTA RITIKA	Collected : 08/Apr/2023 01:54PM
Age/Gender : 34 Y 3 M 30 D/F	Received : 09/Apr/2023 10:14PM
UHID/MR No : CMAR.0000309252	Reported : 11/Apr/2023 12:38PM
Visit ID : CMAROPV657523	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8756384001.	

DEPARTMENT OF CYTOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY GOLD PLUS - FEMALE - TMT - PAN INDIA - FY2324


LBC PAP TEST- PAPSURE , LBC FLUID

	CYTOLOGY NO.	6761/23
I	SPECIMEN	
a	SPECIMEN ADEQUACY	ADEQUATE
b	SPECIMEN TYPE	LIQUID-BASED PREPARATION (LBC)
	SPECIMEN NATURE/SOURCE	CERVICAL SMEAR
c	ENDOCERVICAL-TRANSFORMATION ZONE	PRESENT WITH ENDOCERVICAL CELLS
d	COMMENTS	SATISFACTORY FOR EVALUATION
II	MICROSCOPY	Superficial and intermediate squamous epithelial cells with benign morphology Negative for intraepithelial lesion/malignancy.
III	RESULT	
a	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 ***


Result/s to Follow:
PERIPHERAL SMEAR



DR. K. RAMA KRISHNA REDDY
M.B.B.S, M.D
CONSULTANT PATHOLOGIST



DR. PRASHANTH. R
M.B.B.S, MD
Consultant Pathologist



Dr.Anita Shobha Flynn
M.B.B.S,MD(Pathology)
Consultant Pathologist

Page 13 of 13



SIN No:CS062405

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



LETTER OF APPROVAL / RECOMMENDATION

To,

The Coordinator,
Mediwheel (Arcofemi Healthcare Limited)
Helpline number: 011- 41195959

Dear Sir / Madam,

Sub: Annual Health Checkup for the employees of Bank of Baroda

This is to inform you that the following employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS	EMPLOYEE DETAILS
NAME	MS. GUPTA RITIKA
EC NO.	106040
DESIGNATION	DIGI CHAMP
PLACE OF WORK	BENGALORE, WHITEFIELD
BIRTHDATE	09-12-1988
PROPOSED DATE OF HEALTH CHECKUP	11-02-2023
BOOKING REFERENCE NO.	22M106040100040568E

This letter of approval / recommendation is valid if submitted along with copy of the Bank of Baroda employee id card. This approval is valid from **06-02-2023** till **31-03-2023** The list of medical tests to be conducted is provided in the annexure to this letter. Please note that the said health checkup is a **cashless facility** as per our tie up arrangement. We request you to attend to the health checkup requirement of our employee and accord your top priority and best resources in this regard. The EC Number and the booking reference number as given in the above table shall be mentioned in the invoice, invariably.

We solicit your co-operation in this regard.

Yours faithfully,

Sd/-

Chief General Manager
HRM Department
Bank of Baroda

(Note: This is a computer generated letter. No Signature required. For any clarification, please contact Mediwheel (Arcofemi Healthcare Limited))



Health Check up Booking Confirmed Request(bobE37419),Package Code-PKG10000317, Beneficiary Code-59517

1 message

Mediwheel <wellness@mediwheel.in>
To: gupta.ritika.912@gmail.com
Cc: customercare@mediwheel.in

Thu, 6 Apr, 2023 at 10:28 am



Mediwheel
...Your wellness partner



011-41195959

Email:wellness@mediwheel.in

Dear **MS. GUPTA RITIKA,**

Please find the confirmation for following request.

Booking Date : 03-04-2023

Package Name : Arcofemi MediWheel Full Body Health Annual Plus Check Female 2D ECHO (Metro)

Name of Diagnostic/Hospital : Apollo Clinic - MARATHAHALLI

Address of Diagnostic/Hospital : 673/A, Shriram Samruddhi Apartments, Varthur Road, Near Kundalahalli Signal, Whitefield, BEML Layout, Brookefield - 560066

Contact Details : (080) 43351444 - 45

City : Bangalore

State : Karnataka

Pincode : 560066

Appointment Date : 08-04-2023

Confirmation Status : Confirmed

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

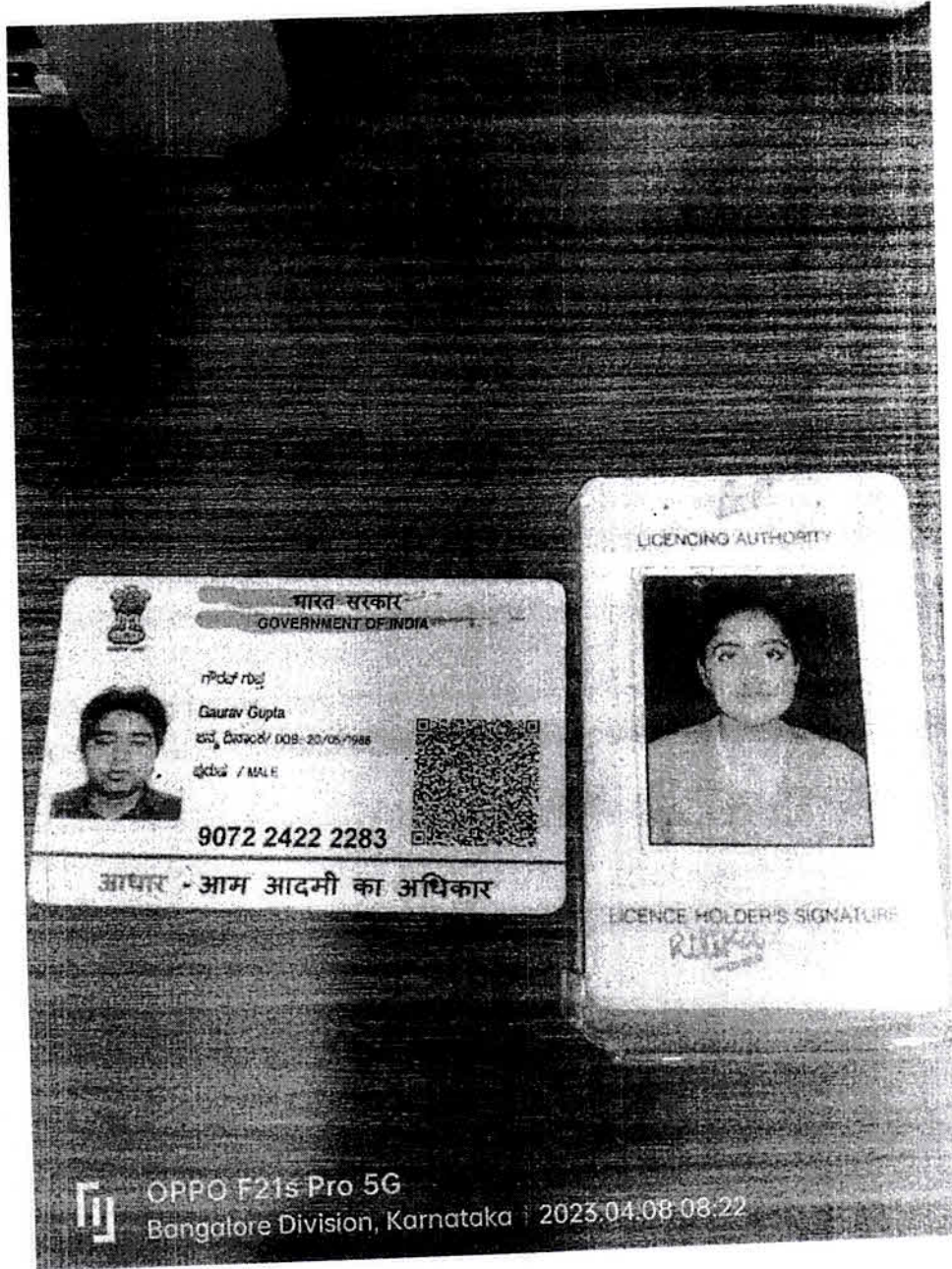
Comment : APPOINTMENT TIME 9:00AM

Instructions to undergo Health Check:

1. Please ensure you are on complete fasting for 10-To-12-Hours prior to check.
2. During fasting time do not take any kind of medication, alcohol, cigarettes, tobacco or any other liquids (except Water) in the morning.
3. Bring urine sample in a container if possible (containers are available at the Health Check centre).
4. Please bring all your medical prescriptions and previous health medical records with you.
5. Kindly inform the health check reception in case if you have a history of diabetes and cardiac problems.

For Women:

1. Pregnant Women or those suspecting are advised not to undergo any X-Ray test.
2. It is advisable not to undergo any Health Check during menstrual cycle.



Vent. rate 97 bpm
 PR interval 130 ms
 QRS duration 78 ms
 QT/QTc 324/411 ms
 P-R-T axes 81 86 -17

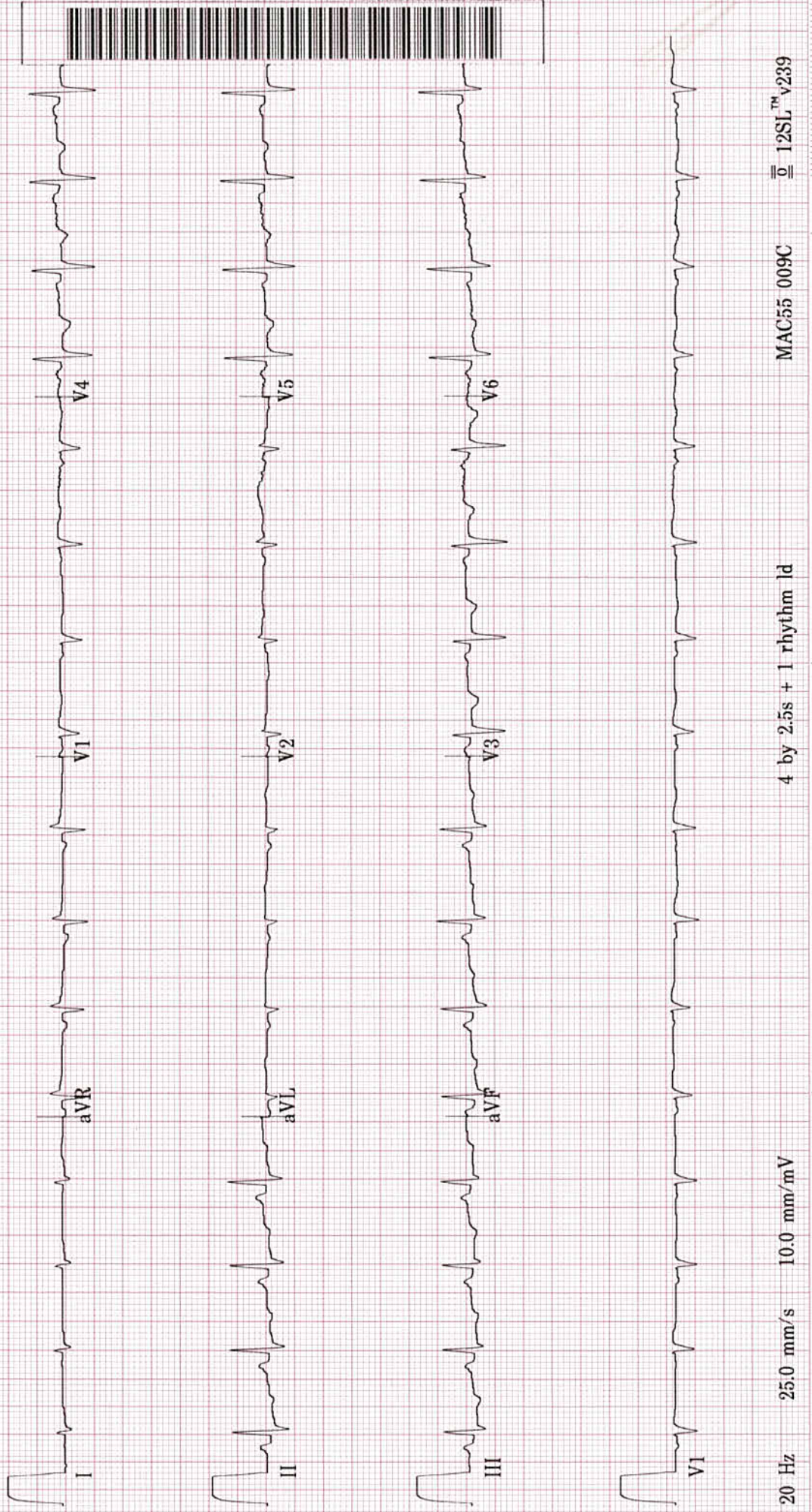
*** Poor data quality, interpretation may be adversely affected
 Normal sinus rhythm
 Septal infarct, age undetermined
 T wave abnormality, consider inferior ischemia
 T wave abnormality, consider anterolateral ischemia
 Abnormal ECG

Technician:

Test ind: SCREENING FOR IHD

Referred by: ARCOFEMI

Unconfirmed



RITIKA GUPTA
ID: 000309252
8-Apr-2023
12:46:53

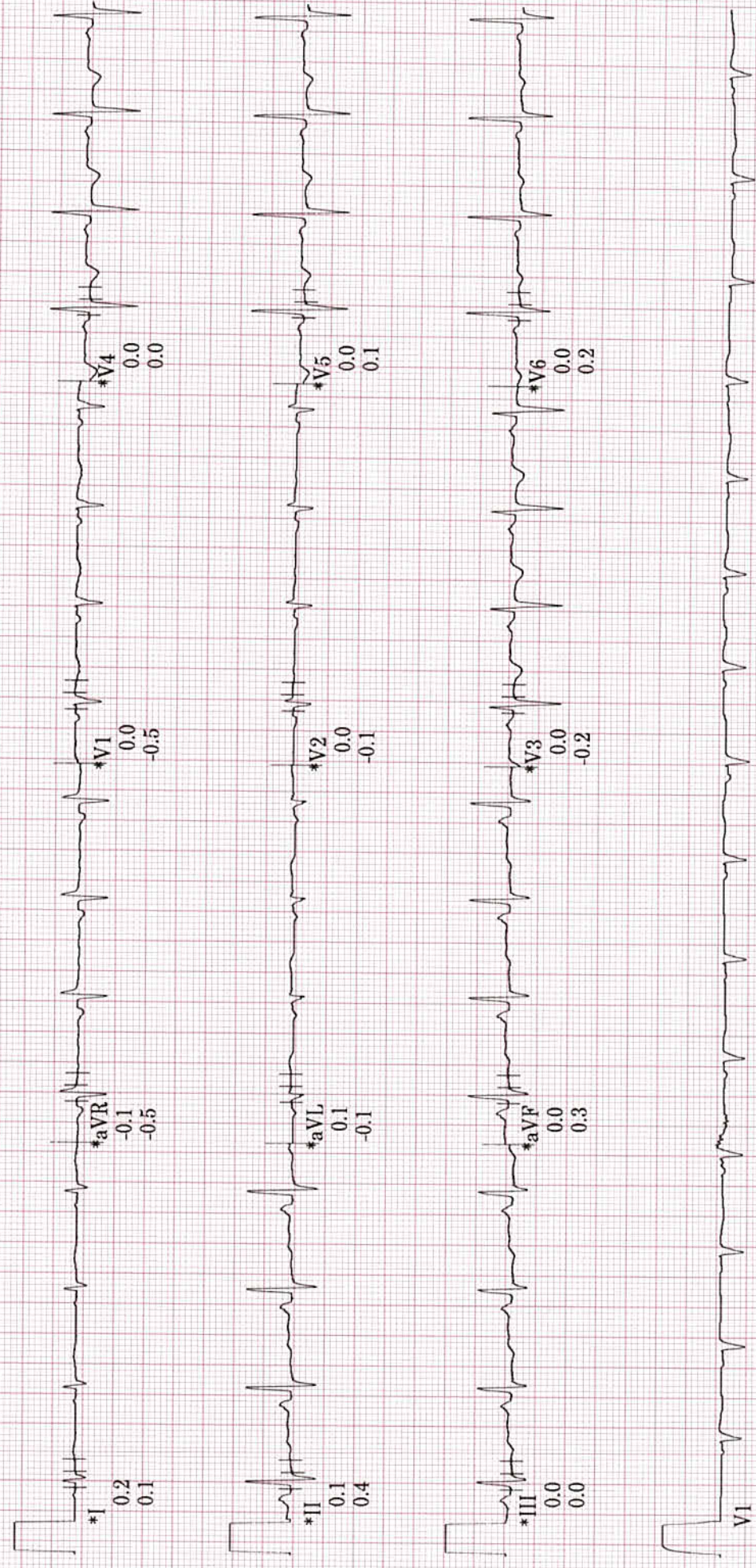
93bpm
BP: 100/60

PRETEST
SUPINE
0:54

BRUCE
***mph
***%

ST @ 10mm/mV
80ms postJ

Lead
ST(mm)
Slope(mV/s)



Raw Rhythm

20 Hz 25.0 mm/s 10.0 mm/mV A-H-S-50Hz HR 46

* Computer Synthesized Rhythm

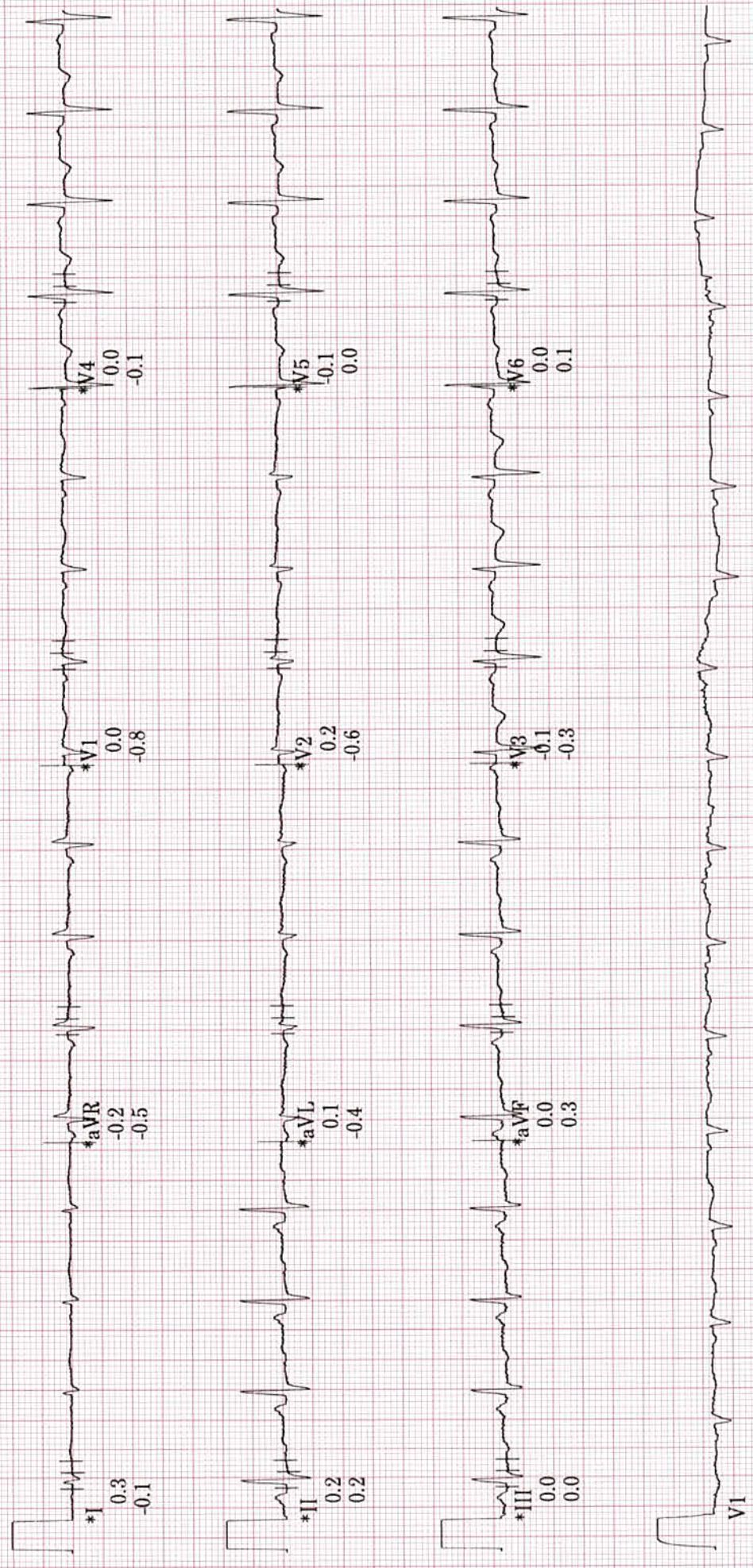
MAC55 009C

RITIKA GUPTA
ID: 000309252
8-Apr-2023
12:47:08

99bpm
BP: 100/60
ST @ 10mm/mV
80ms postJ

BRUCE
** *mph
** *%

Lead
ST(mm)
Slope(mV/s)



Raw Rhythm

20 Hz 25.0 mm/s 10.0 mm/mV A-H-S-50Hz HR 46

* Computer Synthesized Rhythm

MAC55 009C

RITIKA GUPTA
ID: 000309252
8-Apr-2023
12:47:21

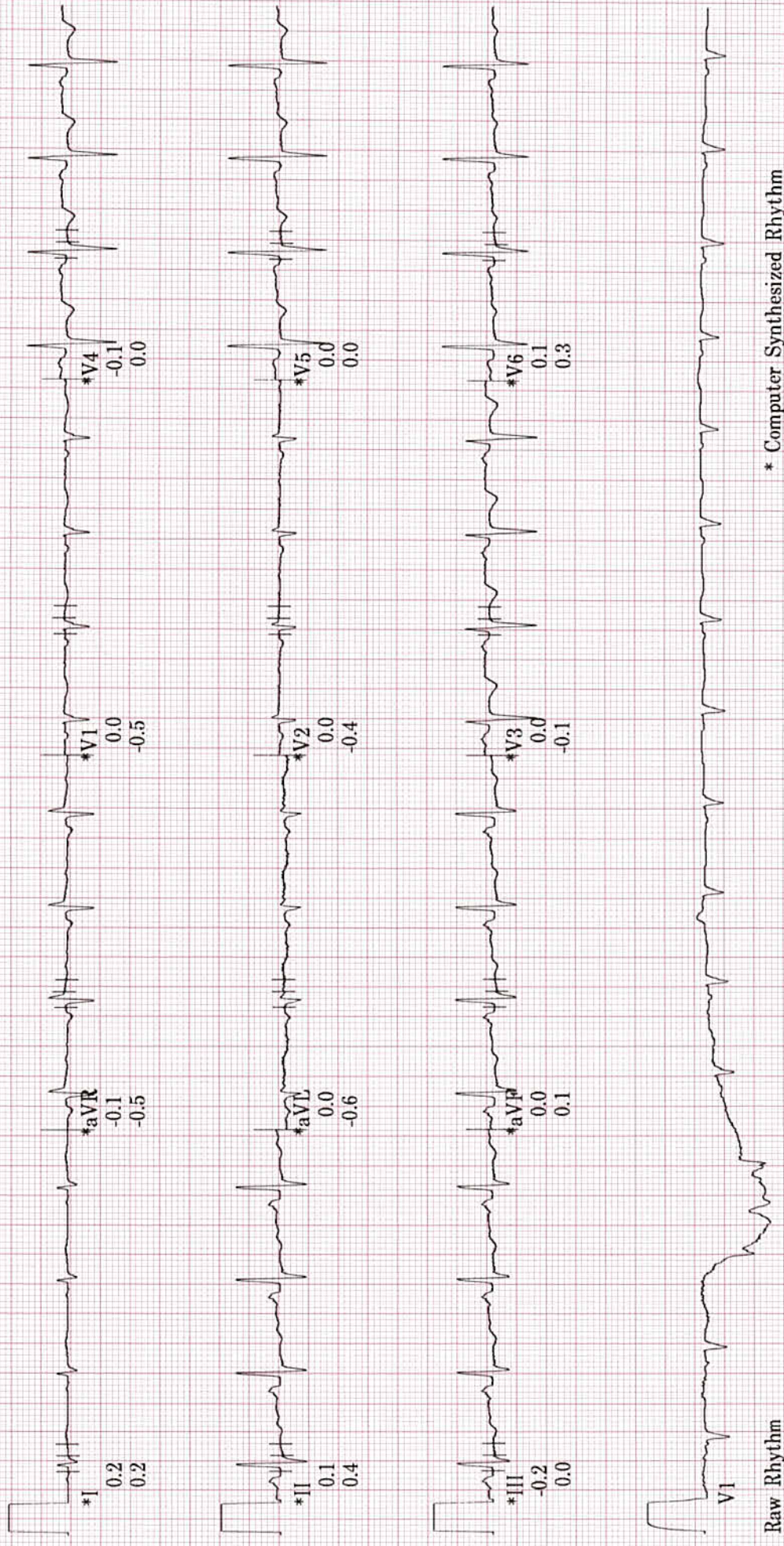
BRUCE
**.*mph
**.*%

PRETEST
HYPERVENT
1:22

96bpm
BP: 100/60

ST @ 10mm/mV
80ms postJ

Lead
ST(mm)
Slope(mV/s)



* Computer Synthesized Rhythm

A-H-S-50Hz HR 46

10.0 mm/mV

25.0 mm/s

Raw Rhythm

20 Hz

MAC55 009C

RITIKA GUPTA
ID: 000309252
8-Apr-2023
12:50:38

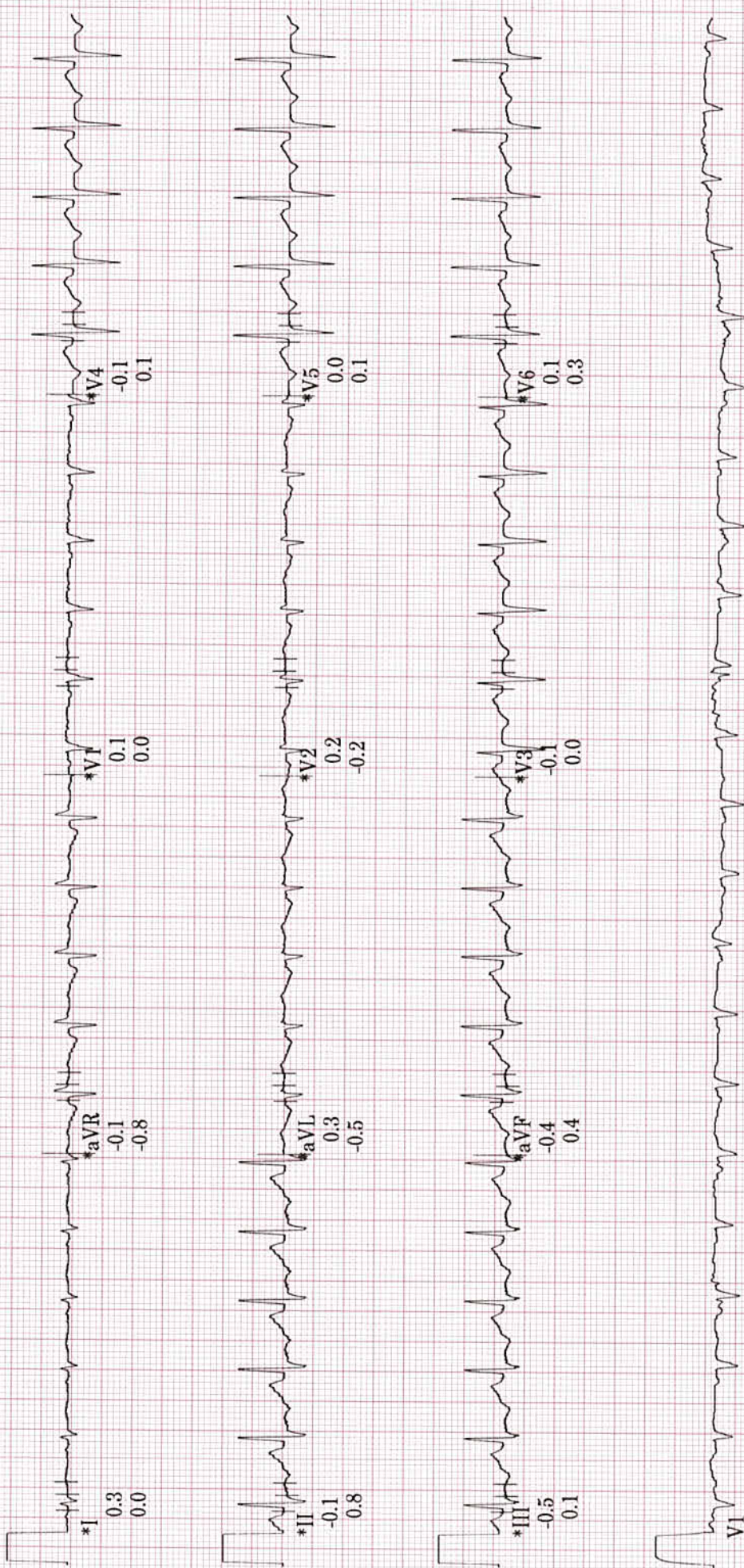
BRUCE
1.6mph
10.0%

EXERCISE
STAGE 1
2:50

132bpm
BP: 100/60

ST @ 10mm/mV
80ms postJ

Lead
ST(mm)
Slope(mV/s)



Raw Rhythm

20 Hz 25.0 mm/s 10.0 mm/mV A-H-S-50Hz HR 46

* Computer Synthesized Rhythm

MAC55 009C

RITIKA GUPTA
ID: 000309252
8-Apr-2023
12:53:37

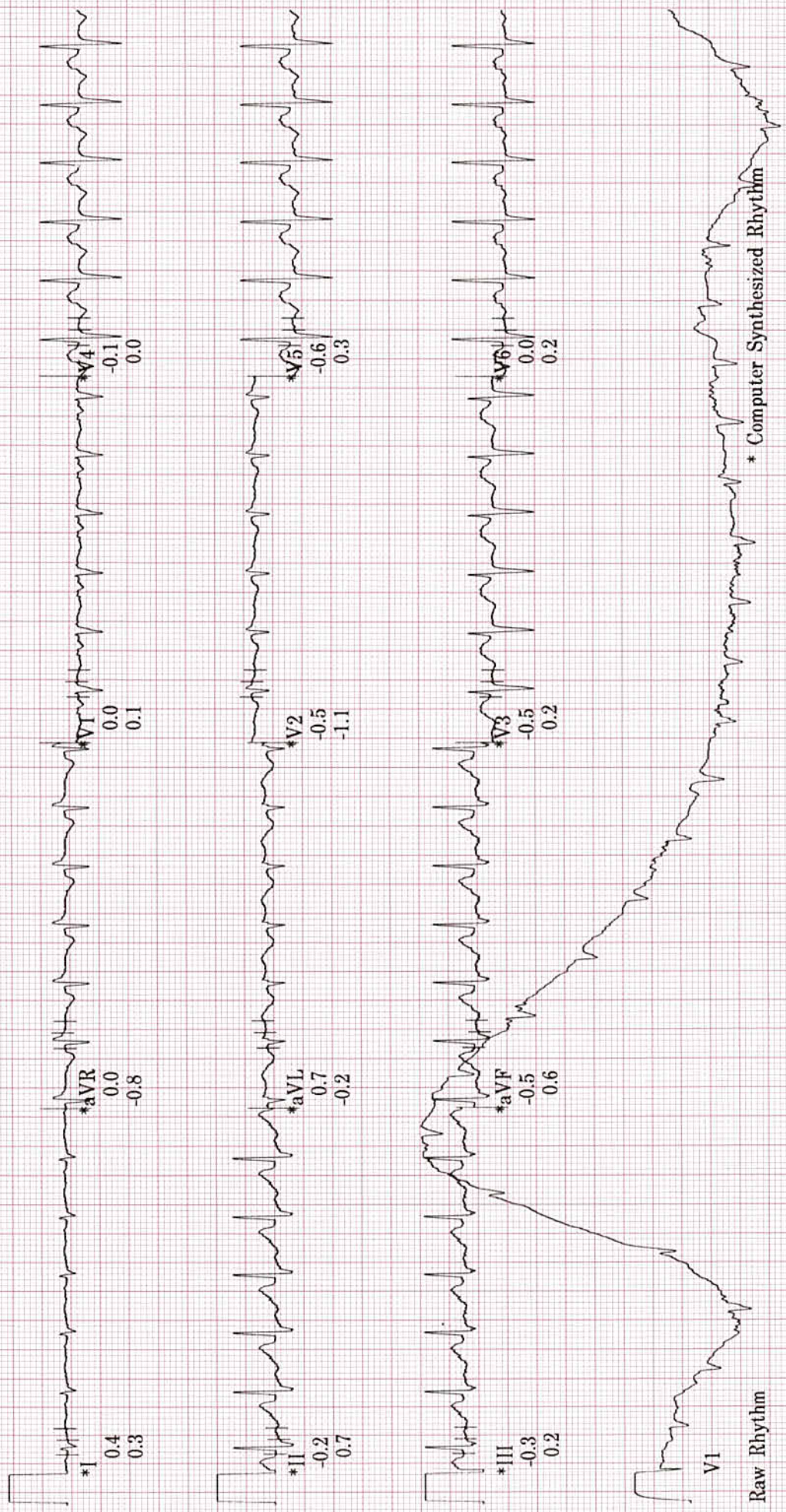
150bpm
BP: 110/70

EXERCISE
STAGE 2
5:50

BRUCE
2.5mph
12.0%

ST @ 10mm/mV
80ms postJ

Lead
ST(mm)
Slope(mV/s)



Raw Rhythm

20 Hz 25.0 mm/s 10.0 mm/mV A-H-S-50Hz HR 46

MAC55 009C

* Computer Synthesized Rhythm

RITIKA GUPTA
ID: 000309252
8-Apr-2023
12:55:49

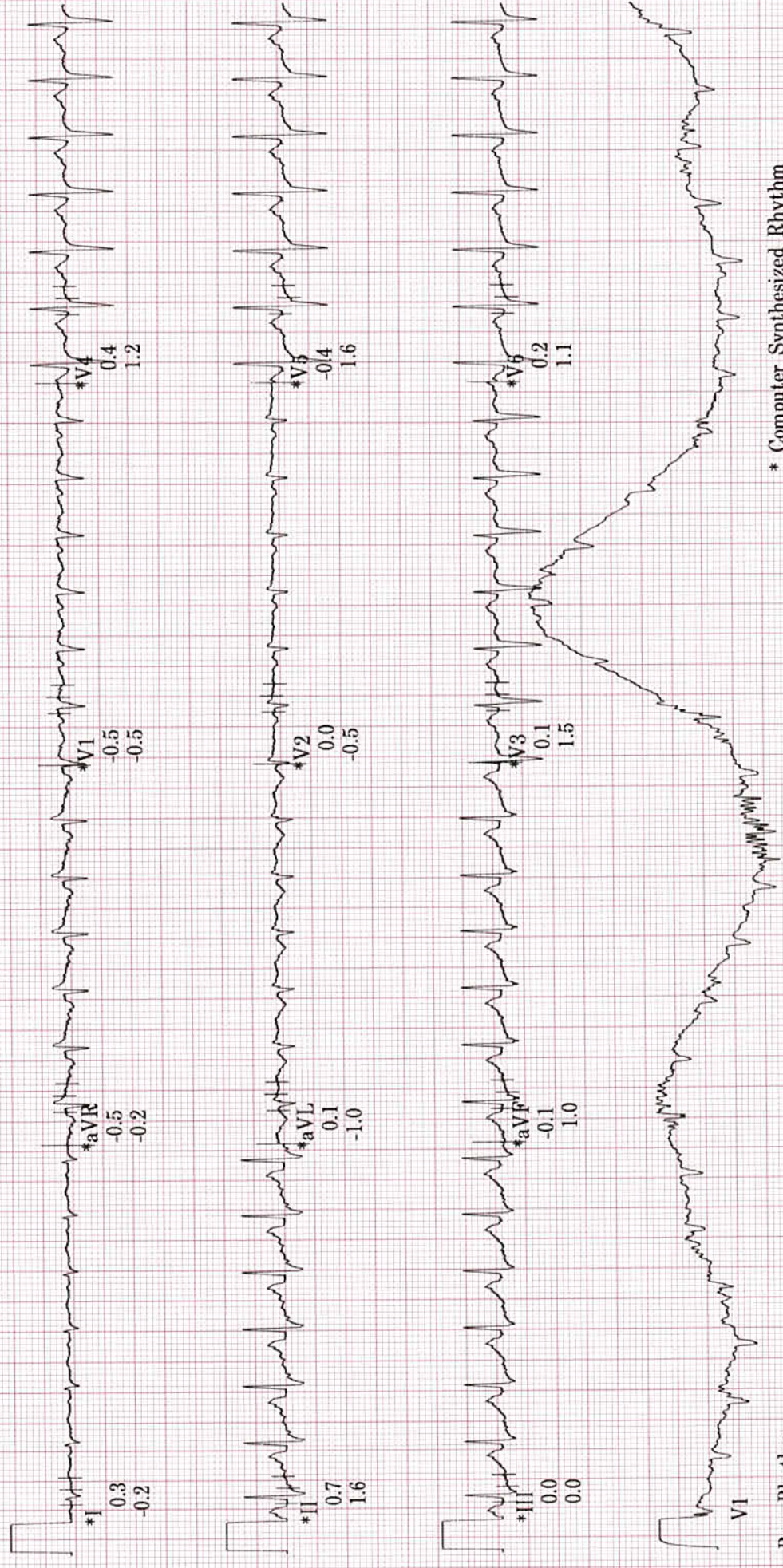
BRUCE
3.3mph
14.0%

EXERCISE
STAGE 3
8:00

160bpm
BP: 120/80

ST @ 10mm/mV
80ms postJ

Lead
ST(mm)
Slope(mV/s)



* Computer Synthesized Rhythm

A-H-S-50Hz HR 46

10.0 mm/mV

25.0 mm/s

20 Hz

MAC55 009C

0

RITIKA GUPTA
ID: 000309252
8-Apr-2023
12:56:49

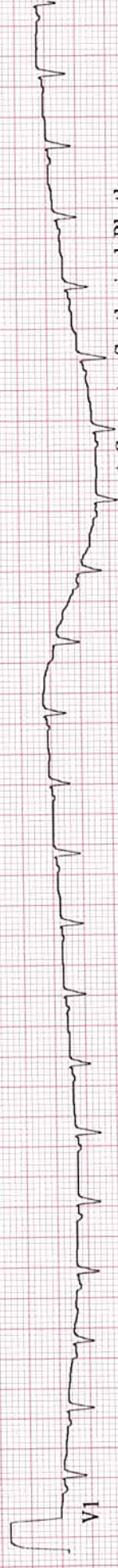
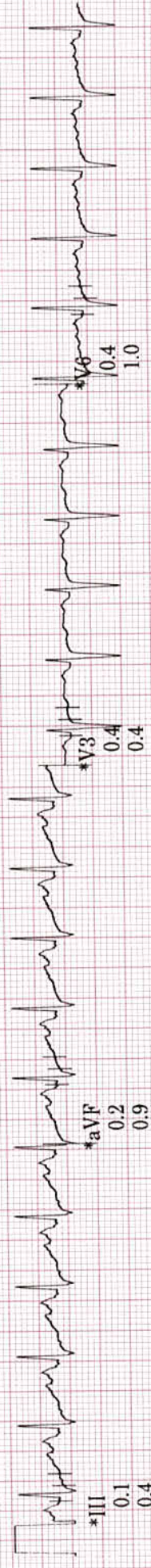
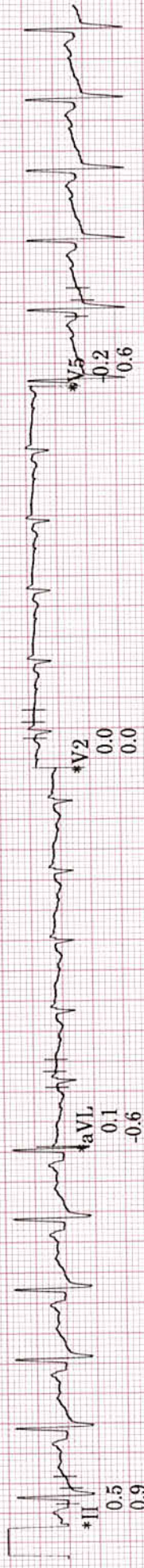
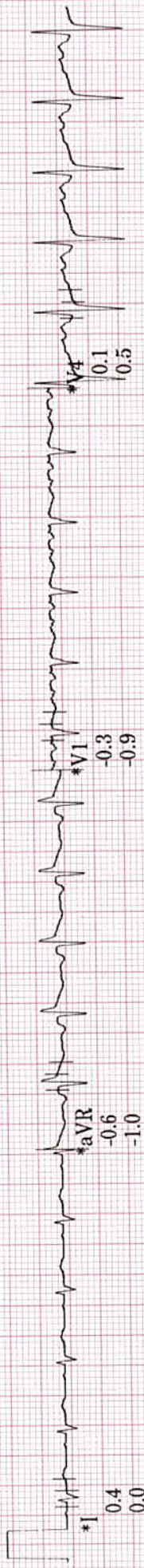
BRUCE
***mph
***%

RECOVERY
Post
1:00

130bpm
BP: 120/80

ST @ 10mm/mV
80ms postJ

Lead
ST(mm)
Slope(mV/s)



Raw Rhythm

20 Hz 25.0 mm/s 10.0 mm/mV

A-H-S-50Hz HR 46

* Computer Synthesized Rhythm

MAC55 009C

0

SELECTED MEDIANS REPORT

RITIKA GUPTA
ID: 000309252

34years
158cm

Asian
57kg

Female

Total Exercise time: 8:01
Max HR: 161bpm 86% of max predicted 186bpm
Max BP: 120/80
Maximum workload: 10.1METs

Reason for Termination: Max HR attained
Comments: GOOD EFFORT TOLERANCE
NORMAL BP AND HR RESPONSE
NO ANGINA / NO ARRHYTHMIAS
NO SIGNIFICANT ST-T CHANGES NOTED DURING THE STUDY
STRESS TEST IS NEGATIVE FOR INDUCIBLE ISCHEMIA

Referred by: ARCOFEMI
Test ind: SCREENING FOR IHD

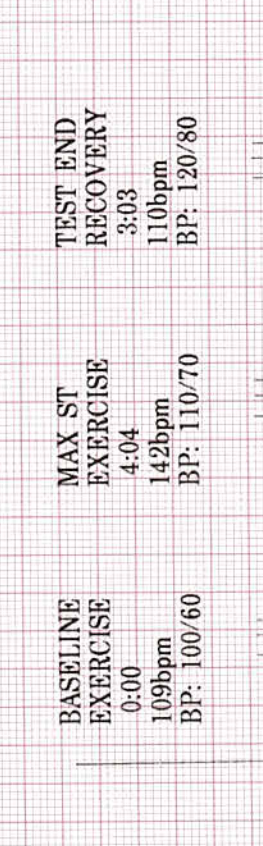
BRUCE
Max HR: 161bpm 86% of max predicted 186bpm
Max BP: 120/80
Maximum workload: 10.1METs

25.0 mm/s
10.0 mm/mV
100hz

BASELINE EXERCISE
0:00
109bpm
BP: 100/60

MAX ST EXERCISE
4:04
142bpm
BP: 110/70

TEST END RECOVERY
3:03
110bpm
BP: 120/80



Technician:

Unconfirmed

THE APOLLO CLINIC, WHITEFIELD, BANGALORE

MAC55 009C

Lead
ST(mm)
Slope(mV/s)

TABULAR SUMMARY REPORT

RITIKA GUPTA
ID: 000309252

34years
158cm

Asian
57kg

Female

25.0 mm/s
10.0 mm/mV
100hz

BRUCE
Max HR: 161bpm 86% of max predicted 186bpm
Max BP: 120/80
Maximum workload: 10.1METS
Reason for Termination: Max HR attained
Comments: GOOD EFFORT TOLERANCE
NORMAL BP AND HR RESPONSE
NO ANGINA / NO ARRHYTHMIAS
NO SIGNIFICANT ST-T CHANGES NOTED DURING THE STUDY
STRESS TEST IS NEGATIVE FOR INDUCIBLE ISCHEMIA

Total Exercise time: 8:01

Referred by: ARCOFEMI
Test ind: SCREENING FOR IHD

Phase Name	Stage Name	Time in Stage	Speed (mph)	Grade (%)	WorkLoad (METS)	HR (bpm)	BP (mmHg)	RPP (x100)
PRETEST	SUPINE	1:06	***	***	1.0	100	100/60	100
	STANDING	0:04	***	***	1.0	98	100/60	98
	HYPERTENT	0:38	0.8	0.0	1.1	109	100/60	109
EXERCISE	STAGE 1	3:00	1.6	10.0	4.4	131	100/60	131
	STAGE 2	3:00	2.5	12.0	7.0	150	110/70	165
	STAGE 3	2:01	3.4	14.0	10.1	161	120/80	193
RECOVERY	Post	3:03	***	***	1.0	110	120/80	132

Technician:

Unconfirmed
THE APOLLO CLINIC, WHITEFIELD, BANGALORE

MAC55 009C

Date : 08-04-2023
MR NO : CMAR.0000309252

Department : GENERAL
Doctor :

Name : Mrs. GUPTA RITIKA

Registration No :
Qualification :

Age/ Gender : 34 Y / Female

Consultation Timing: 08:22

Height : 158 cms	Weight : 57 kg	BMI :	Waist Circum :
Temp :	Pulse : 70 bpm	Resp :	B.P : 100/60 mmHg

General Examination / Allergies
History

Clinical Diagnosis & Management Plan

Follow up date:

Doctor Signature

Mrs. Gupta Ritika
34y/f

8/1/2023.

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

General Examination / Allergies
History

Clinical Diagnosis & Management Plan

No cb hearing related
issues

Ac of left } Normal
Ac of right }

B/c hearing sensitivity
within normal limits

[Signature]

Follow up date:

Doctor Signature

Female

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:

QRS : 80 ms
QT / QTcBaz : 376 / 394 ms
PR : 126 ms
P : 82 ms
RR / PP : 906 / 909 ms
P / QRS / T : 65 / 65 / 0 degrees

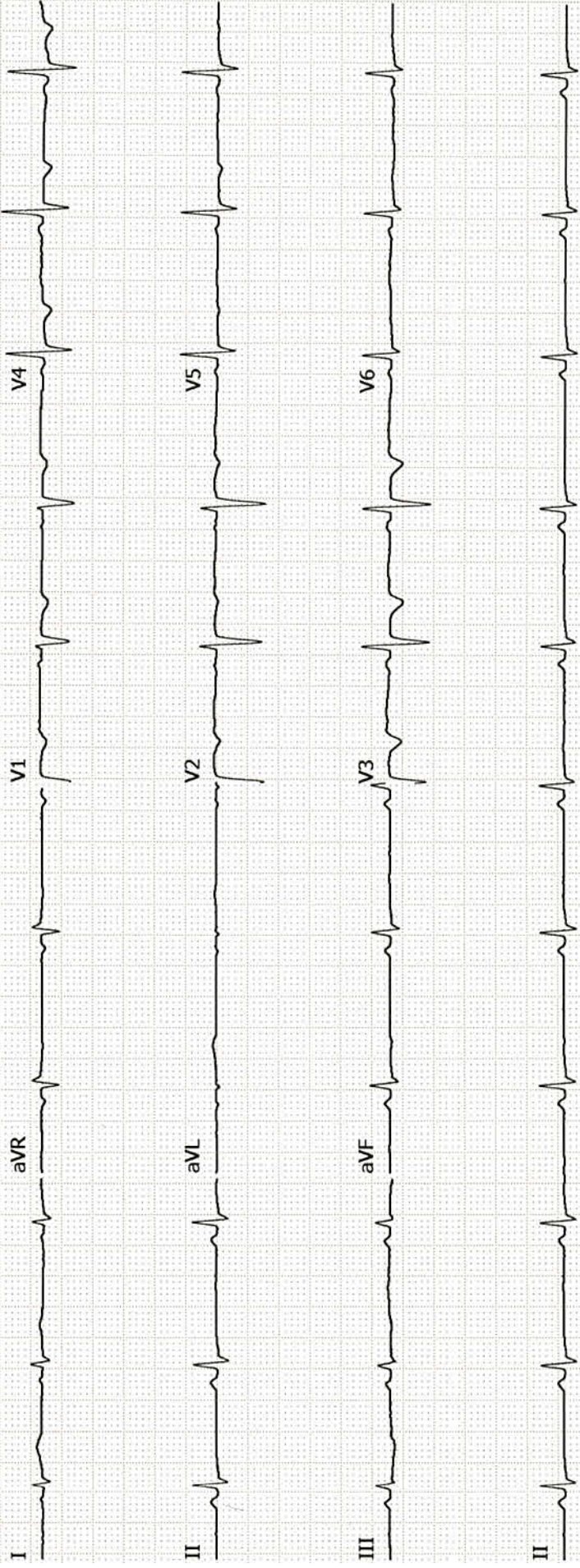
08.04.2023 9:11:41
APOLLO MEDICAL CENTRE
KUNDALAHALLI
BANGALORE

Room:

Location:
Order Number:
Visit:
Indication:
Medication 1:
Medication 2:
Medication 3:

66 bpm
-- / -- mmHg

Normal sinus rhythm with sinus arrhythmia
T wave abnormality, consider anterior ischemia
Abnormal ECG



Patient Name : Mrs.GUPTA RITIKA	Collected : 08/Apr/2023 08:28AM
Age/Gender : 34 Y 3 M 30 D/F	Received : 08/Apr/2023 11:40AM
UHID/MR No : CMAR.0000309252	Reported : 08/Apr/2023 04:37PM
Visit ID : CMAROPV657523	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8756384001.	

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY GOLD PLUS - FEMALE - TMT - PAN INDIA - FY2324

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

HEMOGRAM , WHOLE BLOOD-EDTA				
HAEMOGLOBIN	13.6	g/dL	12-15	Spectrophotometer
PCV	42.90	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.95	Million/cu.mm	3.8-4.8	Electrical Impedance
MCV	87	fL	83-101	Calculated
MCH	27.6	pg	27-32	Calculated
MCHC	31.8	g/dL	31.5-34.5	Calculated
R.D.W	15.7	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	8,900	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	55.5	%	40-80	Electrical Impedance
LYMPHOCYTES	32.8	%	20-40	Electrical Impedance
EOSINOPHILS	6.4	%	1-6	Electrical Impedance
MONOCYTES	5.1	%	2-10	Electrical Impedance
BASOPHILS	0.2	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	4939.5	Cells/cu.mm	2000-7000	Electrical Impedance
LYMPHOCYTES	2919.2	Cells/cu.mm	1000-3000	Electrical Impedance
EOSINOPHILS	569.6	Cells/cu.mm	20-500	Electrical Impedance
MONOCYTES	453.9	Cells/cu.mm	200-1000	Electrical Impedance
BASOPHILS	17.8	Cells/cu.mm	0-100	Electrical Impedance
PLATELET COUNT	358000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	32	mm at the end of 1 hour	0-20	Modified Westegren method
PERIPHERAL SMEAR				

RBCs: are normocytic normochromic

WBCs: are normal in total number with mild increase in eosinophils.

PLATELETS: appear adequate in number.

Patient Name : Mrs.GUPTA RITIKA Age/Gender : 34 Y 3 M 30 D/F UHID/MR No : CMAR.0000309252 Visit ID : CMAROPV657523 Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 8756384001.	Collected : 08/Apr/2023 08:28AM Received : 08/Apr/2023 11:40AM Reported : 08/Apr/2023 04:37PM Status : Final Report Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
--	--

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY GOLD PLUS - FEMALE - TMT - PAN INDIA - FY2324

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

HEMOPARASITES: negative

IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE WITH MILD EOSINOPHILIA.



Patient Name : Mrs.GUPTA RITIKA	Collected : 08/Apr/2023 08:28AM
Age/Gender : 34 Y 3 M 30 D/F	Received : 08/Apr/2023 11:40AM
UHID/MR No : CMAR.0000309252	Reported : 08/Apr/2023 05:37PM
Visit ID : CMAROPV657523	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8756384001.	

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY GOLD PLUS - FEMALE - TMT - PAN INDIA - FY2324

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

BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD-EDTA				
BLOOD GROUP TYPE	B			Microplate Hemagglutination
Rh TYPE	Positive			Microplate Hemagglutination



Patient Name : Mrs.GUPTA RITIKA	Collected : 08/Apr/2023 08:28AM
Age/Gender : 34 Y 3 M 30 D/F	Received : 08/Apr/2023 11:57AM
UHID/MR No : CMAR.0000309252	Reported : 08/Apr/2023 04:15PM
Visit ID : CMAROPV657523	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8756384001.	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY GOLD PLUS - FEMALE - TMT - PAN INDIA - FY2324

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

GLUCOSE, FASTING , NAF PLASMA	104	mg/dL	70-100	HEXOKINASE
-------------------------------	-----	-------	--------	------------

Comment:

As per American Diabetes Guidelines

Fasting Glucose Values in mg/d L	Interpretation
<100 mg/dL	Normal
100-125 mg/dL	Prediabetes
≥126 mg/dL	Diabetes

GLUCOSE, POST PRANDIAL (PP), 2 HOURS , NAF PLASMA	123	mg/dL	70-140	HEXOKINASE
---	-----	-------	--------	------------

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.GUPTA RITIKA	Collected : 08/Apr/2023 08:28AM
Age/Gender : 34 Y 3 M 30 D/F	Received : 08/Apr/2023 11:57AM
UHID/MR No : CMAR.0000309252	Reported : 08/Apr/2023 04:15PM
Visit ID : CMAROPV657523	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8756384001.	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY GOLD PLUS - FEMALE - TMT - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD-EDTA	5.6	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD-EDTA	114	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



Patient Name : Mrs.GUPTA RITIKA	Collected : 08/Apr/2023 08:28AM
Age/Gender : 34 Y 3 M 30 D/F	Received : 08/Apr/2023 11:14AM
UHID/MR No : CMAR.0000309252	Reported : 08/Apr/2023 01:08PM
Visit ID : CMAROPV657523	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8756384001.	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY GOLD PLUS - FEMALE - TMT - PAN INDIA - FY2324

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

LIPID PROFILE , SERUM

TOTAL CHOLESTEROL	287	mg/dL	<200	CHO-POD
TRIGLYCERIDES	137	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	79	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	208	mg/dL	<130	Calculated
LDL CHOLESTEROL	180.4	mg/dL	<100	Calculated
VLDL CHOLESTEROL	27.4	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.63		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.



Patient Name : Mrs.GUPTA RITIKA	Collected : 08/Apr/2023 08:28AM
Age/Gender : 34 Y 3 M 30 D/F	Received : 08/Apr/2023 11:14AM
UHID/MR No : CMAR.0000309252	Reported : 08/Apr/2023 01:08PM
Visit ID : CMAROPV657523	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8756384001.	

DEPARTMENT OF BIOCHEMISTRY				
ARCOFEMI - MEDIWHEEL - FULL BODY GOLD PLUS - FEMALE - TMT - PAN INDIA - FY2324				
Test Name	Result	Unit	Bio. Ref. Range	Method

LIVER FUNCTION TEST (LFT) , SERUM				
Test Name	Result	Unit	Bio. Ref. Range	Method
BILIRUBIN, TOTAL	0.40	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.08	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.32	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	26	U/L	<35	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	25.0	U/L	<35	IFCC
ALKALINE PHOSPHATASE	67.00	U/L	30-120	IFCC
PROTEIN, TOTAL	7.13	g/dL	6.6-8.3	Biuret
ALBUMIN	4.11	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.02	g/dL	2.0-3.5	Calculated
A/G RATIO	1.36		0.9-2.0	Calculated



Patient Name : Mrs.GUPTA RITIKA	Collected : 08/Apr/2023 08:28AM
Age/Gender : 34 Y 3 M 30 D/F	Received : 08/Apr/2023 11:14AM
UHID/MR No : CMAR.0000309252	Reported : 08/Apr/2023 01:08PM
Visit ID : CMAROPV657523	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8756384001.	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY GOLD PLUS - FEMALE - TMT - PAN INDIA - FY2324

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

RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT) , SERUM				
Test Name	Result	Unit	Bio. Ref. Range	Method
CREATININE	0.54	mg/dL	0.72 - 1.18	JAFFE METHOD
UREA	21.40	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	10.0	mg/dL	8.0 - 23.0	Calculated
URIC ACID	4.12	mg/dL	2.6-6.0	Uricase PAP
CALCIUM	9.70	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	4.02	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	138	mmol/L	136-146	ISE (Indirect)
POTASSIUM	4.0	mmol/L	3.5-5.1	ISE (Indirect)
CHLORIDE	104	mmol/L	101-109	ISE (Indirect)



Patient Name : Mrs.GUPTA RITIKA	Collected : 08/Apr/2023 08:28AM
Age/Gender : 34 Y 3 M 30 D/F	Received : 08/Apr/2023 11:14AM
UHID/MR No : CMAR.0000309252	Reported : 08/Apr/2023 01:08PM
Visit ID : CMAROPV657523	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8756384001.	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY GOLD PLUS - FEMALE - TMT - PAN INDIA - FY2324

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

CALCIUM , SERUM	9.70	mg/dL	8.8-10.6	Arsenazo III
------------------------	------	-------	----------	--------------

Comments:-
Serum calcium measurements are done to monitor and diagnose disorders of skeletal system, parathyroid gland, kidney, muscular disorders, and abnormal vitamin D and protein levels.

ELECTROLYTES - SERUM , SERUM				
Test Name	Result	Unit	Bio. Ref. Range	Method
SODIUM	138	mmol/L	136-146	ISE (Indirect)
POTASSIUM	4.0	mmol/L	3.5-5.1	ISE (Indirect)
CHLORIDE	104	mmol/L	101-109	ISE (Indirect)

GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	36.00	U/L	<38	IFCC
--	-------	-----	-----	------



Patient Name : Mrs.GUPTA RITIKA	Collected : 08/Apr/2023 08:28AM
Age/Gender : 34 Y 3 M 30 D/F	Received : 08/Apr/2023 11:14AM
UHID/MR No : CMAR.0000309252	Reported : 08/Apr/2023 12:01PM
Visit ID : CMAROPV657523	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8756384001.	

DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY GOLD PLUS - FEMALE - TMT - PAN INDIA - FY2324

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

THYROID PROFILE (TOTAL T3, TOTAL T4, TSH) , SERUM				
TRI-IODOTHYRONINE (T3, TOTAL)	1.11	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	11.33	µg/dL	6.09-12.23	CLIA
THYROID STIMULATING HORMONE (TSH)	0.885	µIU/mL	0.34-5.60	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



Patient Name : Mrs.GUPTA RITIKA	Collected : 08/Apr/2023 08:28AM
Age/Gender : 34 Y 3 M 30 D/F	Received : 08/Apr/2023 12:51PM
UHID/MR No : CMAR.0000309252	Reported : 08/Apr/2023 01:44PM
Visit ID : CMAROPV657523	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8756384001.	

DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY GOLD PLUS - FEMALE - TMT - PAN INDIA - FY2324

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

COMPLETE URINE EXAMINATION , URINE

PHYSICAL EXAMINATION

COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pH	5.5		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	1.025		1.002-1.030	Bromothymol Blue

BIOCHEMICAL EXAMINATION

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

CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY

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



Patient Name : Mrs.GUPTA RITIKA	Collected : 08/Apr/2023 08:28AM
Age/Gender : 34 Y 3 M 30 D/F	Received : 08/Apr/2023 12:51PM
UHID/MR No : CMAR.0000309252	Reported : 08/Apr/2023 05:00PM
Visit ID : CMAROPV657523	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8756384001.	

DEPARTMENT OF CLINICAL PATHOLOGY


ARCOFEMI - MEDIWHEEL - FULL BODY GOLD PLUS - FEMALE - TMT - 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:

PERIPHERAL SMEAR, LBC PAP TEST- PAPSURE



DR. PRASHANTH. R
M.B.B.S., MD
Consultant Pathologist



Dr. Anita Shobha Flynn
M.B.B.S/MD(Pathology)
Consultant Pathologist



Patient Name : Mrs. GUPTA RITIKA
UHID : CMAR.0000309252
Reported on : 08-04-2023 14:47
Adm/Consult Doctor :

Age : 34 Y F
OP Visit No : CMAROPV657523
Printed on : 08-04-2023 14:48
Ref Doctor : SELF

DEPARTMENT OF RADIOLOGY

SONO MAMMOGRAPHY - SCREENING

Right Breast:

Skin and subcutaneous echoes are normal.
Sub areolar echoes are normal.
Normal glandular echopattern is noted.
No focal/diffuse mass lesion is identified.
No ductal dilatation is seen.
Retro mammary fascia and pectoralis muscle echoes are normal.
There are no enlarged axillary lymph nodes.

Left Breast:

Skin and subcutaneous echoes are normal.
Sub areolar echoes are normal.
Normal glandular echopattern is noted.
No focal/diffuse mass lesion is identified.
No ductal dilatation is seen.
Retro mammary fascia and pectoralis muscle echoes are normal.
There are no enlarged axillary lymph nodes.

Impression:

NO SONOGRAPHICALLY DETECTABLE ABNORMALITY NOTED IN PRESENT SCAN.

Suggested clinical correlation and follow up.

Report disclaimer :

Patient Name : Mrs. GUPTA RITIKA
UHID : CMAR.0000309252
Reported on : 08-04-2023 12:34
Adm/Consult Doctor :

Age : 34 Y F
OP Visit No : CMAROPV657523
Printed on : 08-04-2023 12:40
Ref Doctor : SELF

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

LIVER: Appears normal in size, shape and echopattern. No focal parenchymal lesions identified. No evidence of intra/extrahepatic biliary tree dilatation noted. Portal vein appears to be of normal size.

GALLBLADDER: Partially distended. No definite calculi identified in this state of distension. No evidence of abnormal wall thickening noted.

SPLEEN: Appears normal in size and shows normal echopattern. No focal parenchymal lesions identified.

PANCREAS: Head and body appears normal. Rest obscured by bowel gas.

KIDNEYS: Both kidneys appear normal in size, shape and echopattern. Corticomedullary differentiation appears maintained. No evidence of calculi on right side. No hydronephrosis on either side.

Right kidney measures 9.1 cm and parenchymal thickness measures 1.6 cm.

Left kidney measures 10.7 cm and parenchymal thickness measures 1.9 cm. **Two hyperechoic foci noted, largest in interpole region measuring 7.9 mm.**

URINARY BLADDER: Distended and appears normal. No evidence of abnormal wall thickening noted.

UTERUS: appears normal in size, measuring 7.7 x 6.0 x 4.6 cm. **Few intramural fibroids noted, largest in anterior fundal region measuring 3.1 x 2.9 cm.** The endometrial lining appears intact. Endometrium measures 8.7 mm.

OVARIES: Both ovaries appear normal in size and echopattern.

Right ovary measures 3.6 x 1.8 cm.

Left ovary measures 3.5 x 2.0 cm.

No free fluid is seen.

Visualized bowel loops appears normal.

Patient Name : Mrs. GUPTA RITIKA
UHID : CMAR.0000309252
Reported on : 08-04-2023 12:34
Adm/Consult Doctor :

Age : 34 Y F
OP Visit No : CMAROPV657523
Printed on : 08-04-2023 12:40
Ref Doctor : SELF

**IMPRESSION:
LEFT RENAL NON-OBSTRUCTIVE CALCULI.
FIBROID UTERUS.**

Suggested clinical correlation and further evaluation if needed.

Report disclaimer :

1. Not all diseases/ pathologies can be detected in USG due to certain technical limitation , obesity, bowel gas , patient preparation and organ location .

2. USG scan being an investigation with technical limitation has to be correlated clinically; this report is not valid for medicolegal purpose

3. Printing mistakes should immediately be brought to notice for correction.

Printed on:08-04-2023 12:34

---End of the Report---



Dr. NAVEEN KUMAR K
MBBS, DMRD Radiology, (DNB)
Radiology

Date : 08-04-2023
MR NO : CMAR.0000309252

Department : GENERAL
Doctor :

Name : Mrs. GUPTA RITIKA

Registration No :
Qualification :

Age/ Gender : 34 Y / Female

Consultation Timing: 08:22

Height : 158 cms	Weight : 57 kg	BMI :	Waist Circum :
Temp :	Pulse : 70 bpm	Resp :	B.P : 100/60 mmHg

General Examination / Allergies
History

Clinical Diagnosis & Management Plan

Follow up date:

Doctor Signature

Mrs. Gupta Ritika
34y/f

8/1/2023.

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

General Examination / Allergies
History

Clinical Diagnosis & Management Plan

No cb hearing related
issues

Ac of left } Normal
Ac of right }

B/c hearing sensitivity
within normal limits

[Signature]

Follow up date:

Doctor Signature

Female

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:

QRS : 80 ms
QT / QTcBaz : 376 / 394 ms
PR : 126 ms
P : 82 ms
RR / PP : 906 / 909 ms
P / QRS / T : 65 / 65 / 0 degrees

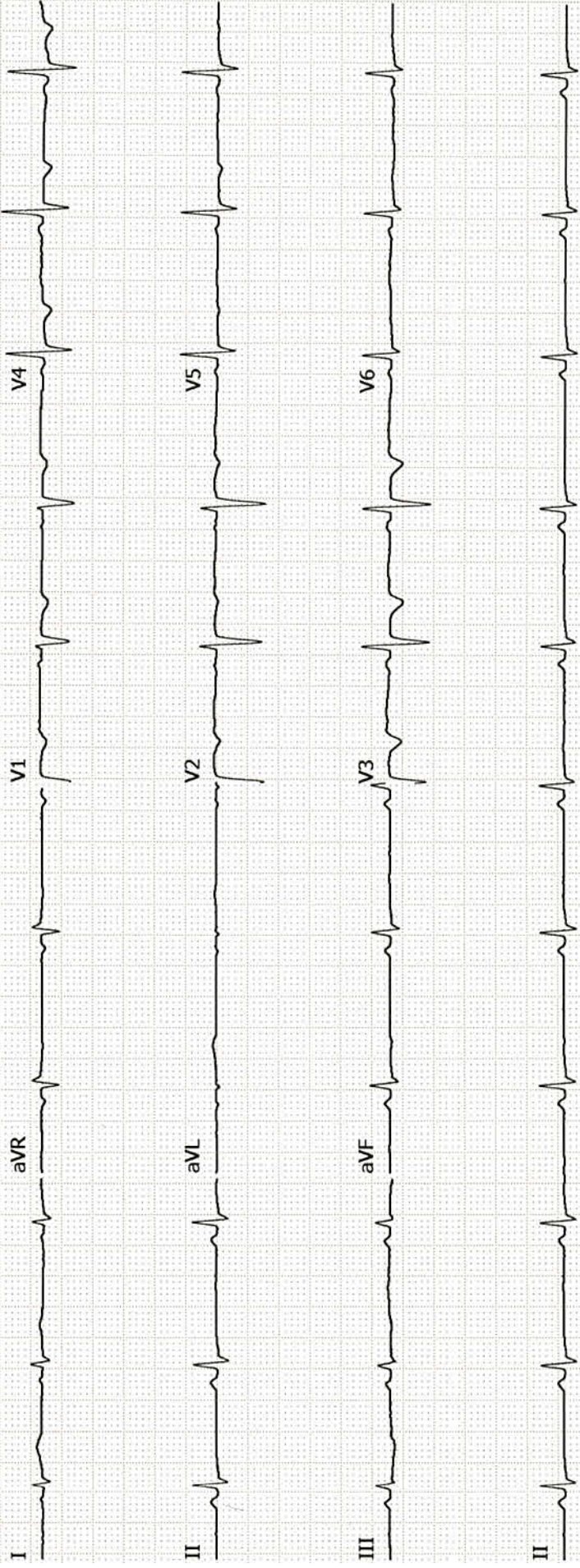
08.04.2023 9:11:41
APOLLO MEDICAL CENTRE
KUNDALAHALLI
BANGALORE

Room:

Location:
Order Number:
Visit:
Indication:
Medication 1:
Medication 2:
Medication 3:

66 bpm
-- / -- mmHg

Normal sinus rhythm with sinus arrhythmia
T wave abnormality, consider anterior ischemia
Abnormal ECG



Patient Name : Mrs.GUPTA RITIKA	Collected : 08/Apr/2023 08:28AM
Age/Gender : 34 Y 3 M 30 D/F	Received : 08/Apr/2023 11:40AM
UHID/MR No : CMAR.0000309252	Reported : 08/Apr/2023 04:37PM
Visit ID : CMAROPV657523	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8756384001.	

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY GOLD PLUS - FEMALE - TMT - PAN INDIA - FY2324

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

HEMOGRAM , WHOLE BLOOD-EDTA				
HAEMOGLOBIN	13.6	g/dL	12-15	Spectrophotometer
PCV	42.90	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.95	Million/cu.mm	3.8-4.8	Electrical Impedance
MCV	87	fL	83-101	Calculated
MCH	27.6	pg	27-32	Calculated
MCHC	31.8	g/dL	31.5-34.5	Calculated
R.D.W	15.7	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	8,900	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	55.5	%	40-80	Electrical Impedance
LYMPHOCYTES	32.8	%	20-40	Electrical Impedance
EOSINOPHILS	6.4	%	1-6	Electrical Impedance
MONOCYTES	5.1	%	2-10	Electrical Impedance
BASOPHILS	0.2	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	4939.5	Cells/cu.mm	2000-7000	Electrical Impedance
LYMPHOCYTES	2919.2	Cells/cu.mm	1000-3000	Electrical Impedance
EOSINOPHILS	569.6	Cells/cu.mm	20-500	Electrical Impedance
MONOCYTES	453.9	Cells/cu.mm	200-1000	Electrical Impedance
BASOPHILS	17.8	Cells/cu.mm	0-100	Electrical Impedance
PLATELET COUNT	358000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	32	mm at the end of 1 hour	0-20	Modified Westegren method
PERIPHERAL SMEAR				

RBCs: are normocytic normochromic

WBCs: are normal in total number with mild increase in eosinophils.

PLATELETS: appear adequate in number.

Patient Name : Mrs.GUPTA RITIKA Age/Gender : 34 Y 3 M 30 D/F UHID/MR No : CMAR.0000309252 Visit ID : CMAROPV657523 Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 8756384001.	Collected : 08/Apr/2023 08:28AM Received : 08/Apr/2023 11:40AM Reported : 08/Apr/2023 04:37PM Status : Final Report Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
--	--

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY GOLD PLUS - FEMALE - TMT - PAN INDIA - FY2324

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

HEMOPARASITES: negative

IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE WITH MILD EOSINOPHILIA.



Patient Name : Mrs.GUPTA RITIKA	Collected : 08/Apr/2023 08:28AM
Age/Gender : 34 Y 3 M 30 D/F	Received : 08/Apr/2023 11:40AM
UHID/MR No : CMAR.0000309252	Reported : 08/Apr/2023 05:37PM
Visit ID : CMAROPV657523	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8756384001.	

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY GOLD PLUS - FEMALE - TMT - PAN INDIA - FY2324

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

BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD-EDTA				
BLOOD GROUP TYPE	B			Microplate Hemagglutination
Rh TYPE	Positive			Microplate Hemagglutination



Patient Name : Mrs.GUPTA RITIKA	Collected : 08/Apr/2023 08:28AM
Age/Gender : 34 Y 3 M 30 D/F	Received : 08/Apr/2023 11:57AM
UHID/MR No : CMAR.0000309252	Reported : 08/Apr/2023 04:15PM
Visit ID : CMAROPV657523	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8756384001.	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY GOLD PLUS - FEMALE - TMT - PAN INDIA - FY2324

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

GLUCOSE, FASTING , NAF PLASMA	104	mg/dL	70-100	HEXOKINASE
-------------------------------	-----	-------	--------	------------

Comment:

As per American Diabetes Guidelines

Fasting Glucose Values in mg/d L	Interpretation
<100 mg/dL	Normal
100-125 mg/dL	Prediabetes
≥126 mg/dL	Diabetes

GLUCOSE, POST PRANDIAL (PP), 2 HOURS , NAF PLASMA	123	mg/dL	70-140	HEXOKINASE
---	-----	-------	--------	------------

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.GUPTA RITIKA	Collected : 08/Apr/2023 08:28AM
Age/Gender : 34 Y 3 M 30 D/F	Received : 08/Apr/2023 11:57AM
UHID/MR No : CMAR.0000309252	Reported : 08/Apr/2023 04:15PM
Visit ID : CMAROPV657523	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8756384001.	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY GOLD PLUS - FEMALE - TMT - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD-EDTA	5.6	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD-EDTA	114	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



Patient Name : Mrs.GUPTA RITIKA	Collected : 08/Apr/2023 08:28AM
Age/Gender : 34 Y 3 M 30 D/F	Received : 08/Apr/2023 11:14AM
UHID/MR No : CMAR.0000309252	Reported : 08/Apr/2023 01:08PM
Visit ID : CMAROPV657523	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8756384001.	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY GOLD PLUS - FEMALE - TMT - PAN INDIA - FY2324

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

LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	287	mg/dL	<200	CHO-POD
TRIGLYCERIDES	137	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	79	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	208	mg/dL	<130	Calculated
LDL CHOLESTEROL	180.4	mg/dL	<100	Calculated
VLDL CHOLESTEROL	27.4	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.63		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.



Patient Name : Mrs.GUPTA RITIKA	Collected : 08/Apr/2023 08:28AM
Age/Gender : 34 Y 3 M 30 D/F	Received : 08/Apr/2023 11:14AM
UHID/MR No : CMAR.0000309252	Reported : 08/Apr/2023 01:08PM
Visit ID : CMAROPV657523	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8756384001.	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY GOLD PLUS - FEMALE - TMT - PAN INDIA - FY2324

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

LIVER FUNCTION TEST (LFT) , SERUM				
Test Name	Result	Unit	Bio. Ref. Range	Method
BILIRUBIN, TOTAL	0.40	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.08	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.32	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	26	U/L	<35	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	25.0	U/L	<35	IFCC
ALKALINE PHOSPHATASE	67.00	U/L	30-120	IFCC
PROTEIN, TOTAL	7.13	g/dL	6.6-8.3	Biuret
ALBUMIN	4.11	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.02	g/dL	2.0-3.5	Calculated
A/G RATIO	1.36		0.9-2.0	Calculated



Patient Name : Mrs.GUPTA RITIKA	Collected : 08/Apr/2023 08:28AM
Age/Gender : 34 Y 3 M 30 D/F	Received : 08/Apr/2023 11:14AM
UHID/MR No : CMAR.0000309252	Reported : 08/Apr/2023 01:08PM
Visit ID : CMAROPV657523	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8756384001.	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY GOLD PLUS - FEMALE - TMT - PAN INDIA - FY2324

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

RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT) , SERUM				
Test Name	Result	Unit	Bio. Ref. Range	Method
CREATININE	0.54	mg/dL	0.72 - 1.18	JAFFE METHOD
UREA	21.40	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	10.0	mg/dL	8.0 - 23.0	Calculated
URIC ACID	4.12	mg/dL	2.6-6.0	Uricase PAP
CALCIUM	9.70	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	4.02	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	138	mmol/L	136-146	ISE (Indirect)
POTASSIUM	4.0	mmol/L	3.5-5.1	ISE (Indirect)
CHLORIDE	104	mmol/L	101-109	ISE (Indirect)



Patient Name : Mrs.GUPTA RITIKA	Collected : 08/Apr/2023 08:28AM
Age/Gender : 34 Y 3 M 30 D/F	Received : 08/Apr/2023 11:14AM
UHID/MR No : CMAR.0000309252	Reported : 08/Apr/2023 01:08PM
Visit ID : CMAROPV657523	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8756384001.	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY GOLD PLUS - FEMALE - TMT - PAN INDIA - FY2324

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

CALCIUM , SERUM	9.70	mg/dL	8.8-10.6	Arsenazo III
------------------------	------	-------	----------	--------------

Comments:-
Serum calcium measurements are done to monitor and diagnose disorders of skeletal system, parathyroid gland, kidney, muscular disorders, and abnormal vitamin D and protein levels.

ELECTROLYTES - SERUM , SERUM				
Test Name	Result	Unit	Bio. Ref. Range	Method
SODIUM	138	mmol/L	136-146	ISE (Indirect)
POTASSIUM	4.0	mmol/L	3.5-5.1	ISE (Indirect)
CHLORIDE	104	mmol/L	101-109	ISE (Indirect)

GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	36.00	U/L	<38	IFCC
--	-------	-----	-----	------



Patient Name : Mrs.GUPTA RITIKA	Collected : 08/Apr/2023 08:28AM
Age/Gender : 34 Y 3 M 30 D/F	Received : 08/Apr/2023 11:14AM
UHID/MR No : CMAR.0000309252	Reported : 08/Apr/2023 12:01PM
Visit ID : CMAROPV657523	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8756384001.	

DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY GOLD PLUS - FEMALE - TMT - PAN INDIA - FY2324

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

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

Test Name	Result	Unit	Bio. Ref. Range	Method
TRI-IODOTHYRONINE (T3, TOTAL)	1.11	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	11.33	µg/dL	6.09-12.23	CLIA
THYROID STIMULATING HORMONE (TSH)	0.885	µIU/mL	0.34-5.60	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



Patient Name : Mrs.GUPTA RITIKA	Collected : 08/Apr/2023 08:28AM
Age/Gender : 34 Y 3 M 30 D/F	Received : 08/Apr/2023 12:51PM
UHID/MR No : CMAR.0000309252	Reported : 08/Apr/2023 01:44PM
Visit ID : CMAROPV657523	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8756384001.	

DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY GOLD PLUS - FEMALE - TMT - PAN INDIA - FY2324

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

COMPLETE URINE EXAMINATION , URINE

PHYSICAL EXAMINATION

COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pH	5.5		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	1.025		1.002-1.030	Bromothymol Blue

BIOCHEMICAL EXAMINATION

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

CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY

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



Patient Name : Mrs.GUPTA RITIKA	Collected : 08/Apr/2023 08:28AM
Age/Gender : 34 Y 3 M 30 D/F	Received : 08/Apr/2023 12:51PM
UHID/MR No : CMAR.0000309252	Reported : 08/Apr/2023 05:00PM
Visit ID : CMAROPV657523	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8756384001.	

DEPARTMENT OF CLINICAL PATHOLOGY


ARCOFEMI - MEDIWHEEL - FULL BODY GOLD PLUS - FEMALE - TMT - 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:

PERIPHERAL SMEAR, LBC PAP TEST- PAPSURE



DR. PRASHANTH. R
M.B.B.S., MD
Consultant Pathologist



Dr. Anita Shobha Flynn
M.B.B.S/MD(Pathology)
Consultant Pathologist



Patient Name : Mrs. GUPTA RITIKA
UHID : CMAR.0000309252
Reported on : 08-04-2023 14:47
Adm/Consult Doctor :

Age : 34 Y F
OP Visit No : CMAROPV657523
Printed on : 08-04-2023 14:48
Ref Doctor : SELF

DEPARTMENT OF RADIOLOGY

SONO MAMMOGRAPHY - SCREENING

Right Breast:

Skin and subcutaneous echoes are normal.
Sub areolar echoes are normal.
Normal glandular echopattern is noted.
No focal/diffuse mass lesion is identified.
No ductal dilatation is seen.
Retro mammary fascia and pectoralis muscle echoes are normal.
There are no enlarged axillary lymph nodes.

Left Breast:

Skin and subcutaneous echoes are normal.
Sub areolar echoes are normal.
Normal glandular echopattern is noted.
No focal/diffuse mass lesion is identified.
No ductal dilatation is seen.
Retro mammary fascia and pectoralis muscle echoes are normal.
There are no enlarged axillary lymph nodes.

Impression:

NO SONOGRAPHICALLY DETECTABLE ABNORMALITY NOTED IN PRESENT SCAN.

Suggested clinical correlation and follow up.

Report disclaimer :

Patient Name : Mrs. GUPTA RITIKA
UHID : CMAR.0000309252
Reported on : 08-04-2023 12:34
Adm/Consult Doctor :

Age : 34 Y F
OP Visit No : CMAROPV657523
Printed on : 08-04-2023 12:40
Ref Doctor : SELF

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

LIVER: Appears normal in size, shape and echopattern. No focal parenchymal lesions identified. No evidence of intra/extrahepatic biliary tree dilatation noted. Portal vein appears to be of normal size.

GALLBLADDER: Partially distended. No definite calculi identified in this state of distension. No evidence of abnormal wall thickening noted.

SPLEEN: Appears normal in size and shows normal echopattern. No focal parenchymal lesions identified.

PANCREAS: Head and body appears normal. Rest obscured by bowel gas.

KIDNEYS: Both kidneys appear normal in size, shape and echopattern. Corticomedullary differentiation appears maintained. No evidence of calculi on right side. No hydronephrosis on either side.

Right kidney measures 9.1 cm and parenchymal thickness measures 1.6 cm.

Left kidney measures 10.7 cm and parenchymal thickness measures 1.9 cm. **Two hyperechoic foci noted, largest in interpole region measuring 7.9 mm.**

URINARY BLADDER: Distended and appears normal. No evidence of abnormal wall thickening noted.

UTERUS: appears normal in size, measuring 7.7 x 6.0 x 4.6 cm. **Few intramural fibroids noted, largest in anterior fundal region measuring 3.1 x 2.9 cm.** The endometrial lining appears intact. Endometrium measures 8.7 mm.

OVARIES: Both ovaries appear normal in size and echopattern.

Right ovary measures 3.6 x 1.8 cm.

Left ovary measures 3.5 x 2.0 cm.

No free fluid is seen.

Visualized bowel loops appears normal.

Patient Name : Mrs. GUPTA RITIKA
UHID : CMAR.0000309252
Reported on : 08-04-2023 12:34
Adm/Consult Doctor :

Age : 34 Y F
OP Visit No : CMAROPV657523
Printed on : 08-04-2023 12:40
Ref Doctor : SELF

**IMPRESSION:
LEFT RENAL NON-OBSTRUCTIVE CALCULI.
FIBROID UTERUS.**

Suggested clinical correlation and further evaluation if needed.

Report disclaimer :

1. Not all diseases/ pathologies can be detected in USG due to certain technical limitation , obesity, bowel gas , patient preparation and organ location .

2. USG scan being an investigation with technical limitation has to be correlated clinically; this report is not valid for medicolegal purpose

3. Printing mistakes should immediately be brought to notice for correction.

Printed on:08-04-2023 12:34

---End of the Report---



Dr. NAVEEN KUMAR K
MBBS, DMRD Radiology, (DNB)
Radiology

Patient Name : Mrs. GUPTA RITIKA

Age/Gender : 34 Y/F

UHID/MR No. : CMAR.0000309252

OP Visit No : CMAROPV657523

Sample Collected on :

Reported on : 08-04-2023 20:06

LRN# : RAD1971605

Specimen :

Ref Doctor : SELF

Emp/Auth/TPA ID : 8756384001.

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Both lung fields and hila are normal .

No obvious active pleuro-parenchymal lesion seen .

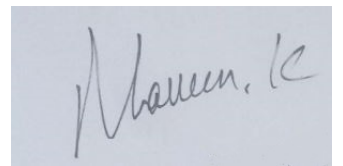
Both costophrenic and cardiophrenic angles are clear .

Both diaphragms are normal in position and contour .

Thoracic wall and soft tissues appear normal.

CONCLUSION :

No obvious abnormality seen



Dr. NAVEEN KUMAR K
MBBS, DMRD Radiology, (DNB)
Radiology

Patient Name : Mrs. GUPTA RITIKA

Age/Gender : 34 Y/F

UHID/MR No. : CMAR.0000309252

OP Visit No : CMAROPV657523

Sample Collected on :

Reported on : 08-04-2023 14:48

LRN# : RAD1971605

Specimen :

Ref Doctor : SELF

Emp/Auth/TPA ID : 8756384001.

DEPARTMENT OF RADIOLOGY

SONO MAMMOGRAPHY - SCREENING

Right Breast:

Skin and subcutaneous echoes are normal.
Sub areolar echoes are normal.
Normal glandular echopattern is noted.
No focal/diffuse mass lesion is identified.
No ductal dilatation is seen.
Retro mammary fascia and pectoralis muscle echoes are normal.
There are no enlarged axillary lymph nodes.

Left Breast:

Skin and subcutaneous echoes are normal.
Sub areolar echoes are normal.
Normal glandular echopattern is noted.
No focal/diffuse mass lesion is identified.
No ductal dilatation is seen.
Retro mammary fascia and pectoralis muscle echoes are normal.
There are no enlarged axillary lymph nodes.

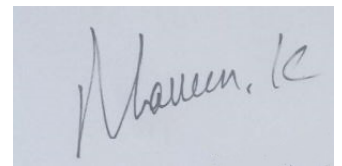
Impression:

NO SONOGRAPHICALLY DETECTABLE ABNORMALITY NOTED IN PRESENT SCAN.

Suggested clinical correlation and follow up.

Report disclaimer :

1. Not all diseases/ pathologies can be detected in USG due to certain technical limitation , obesity, bowel gas , patient preparation and organ location .
2. USG scan being an investigation with technical limitation has to be correlated clinically; this report is not valid for medicolegal purpose
3. Printing mistakes should immediately be brought to notice for correction.



Dr. NAVEEN KUMAR K
MBBS, DMRD Radiology, (DNB)
Radiology

Patient Name	: Mrs. GUPTA RITIKA	Age/Gender	: 34 Y/F
UHID/MR No.	: CMAR.0000309252	OP Visit No	: CMAROPV657523
Sample Collected on	:	Reported on	: 08-04-2023 12:40
LRN#	: RAD1971605	Specimen	:
Ref Doctor	: SELF		
Emp/Auth/TPA ID	: 8756384001.		

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

LIVER: Appears normal in size, shape and echopattern. No focal parenchymal lesions identified. No evidence of intra/extrahepatic biliary tree dilatation noted. Portal vein appears to be of normal size.

GALLBLADDER: Partially distended. No definite calculi identified in this state of distension. No evidence of abnormal wall thickening noted.

SPLEEN: Appears normal in size and shows normal echopattern. No focal parenchymal lesions identified.

PANCREAS: Head and body appears normal. Rest obscured by bowel gas.

KIDNEYS: Both kidneys appear normal in size, shape and echopattern. Corticomedullary differentiation appears maintained. No evidence of calculi on right side. No hydronephrosis on either side.

Right kidney measures 9.1 cm and parenchymal thickness measures 1.6 cm.

Left kidney measures 10.7 cm and parenchymal thickness measures 1.9 cm. **Two hyperechoic foci noted, largest in interpole region measuring 7.9 mm.**

URINARY BLADDER: Distended and appears normal. No evidence of abnormal wall thickening noted.

UTERUS: appears normal in size, measuring 7.7 x 6.0 x 4.6 cm. **Few intramural fibroids noted, largest in anterior fundal region measuring 3.1 x 2.9 cm.** The endometrial lining appears intact. Endometrium measures 8.7 mm.

OVARIES: Both ovaries appear normal in size and echopattern.

Right ovary measures 3.6 x 1.8 cm.

Left ovary measures 3.5 x 2.0 cm.

No free fluid is seen.

Visualized bowel loops appears normal.

IMPRESSION:

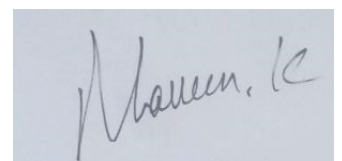
LEFT RENAL NON-OBSTRUCTIVE CALCULI.

FIBROID UTERUS.

Suggested clinical correlation and further evaluation if needed.

Report disclaimer :

1. Not all diseases/ pathologies can be detected in USG due to certain technical limitation, obesity, bowel gas, patient preparation and organ location.
2. USG scan being an investigation with technical limitation has to be correlated clinically; this report is not valid for medicolegal purpose
3. Printing mistakes should immediately be brought to notice for correction.





Patient Name : Mrs. GUPTA RITIKA

Age/Gender : 34 Y/F

Dr. NAVEEN KUMAR K
MBBS, DMRD Radiology, (DNB)
Radiology