





Patient Name	: Mrs.STELLA RANI NEERUDU	Collected	: 27/Mar/2023 01:37PM
Age/Gender	: 34 Y 3 M 23 D/F	Received	: 27/Mar/2023 03:50PM
UHID/MR No	: CMAN.0000087020	Reported	: 27/Mar/2023 05:12PM
Visit ID	: CMANOPV166177	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 151291		

## DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BOD	Y ANNUAL PLUS CI	HECK ADVANC	ED - FEMALE - TMT - P	AN INDIA - FY2324
Test Name	Result	Unit	Bio. Ref. Range	Method

HAEMOGLOBIN	12.2	g/dL	12-15	Spectrophotometer
PCV	35.30	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.43	Million/cu.mm	3.8-4.8	Electrical Impedence
MCV	79.7	fL	83-101	Calculated
MCH	27.5	pg	27-32	Calculated
MCHC	34.4	g/dL	31.5-34.5	Calculated
R.D.W	13.7	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	6,570	cells/cu.mm	4000-10000	Electrical Impedanc
DIFFERENTIAL LEUCOCYTIC COUNT (	DLC)			
NEUTROPHILS	53.5	%	40-80	Electrical Impedanc
LYMPHOCYTES	38.2	%	20-40	Electrical Impedance
EOSINOPHILS	1.9	%	1-6	Electrical Impedance
MONOCYTES	6.1	%	2-10	Electrical Impedance
BASOPHILS	0.3	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	3514.95	Cells/cu.mm	2000-7000	Electrical Impedanc
LYMPHOCYTES	2509.74	Cells/cu.mm	1000-3000	Electrical Impedance
EOSINOPHILS	124.83	Cells/cu.mm	20-500	Electrical Impedance
MONOCYTES	400.77	Cells/cu.mm	200-1000	Electrical Impedance
BASOPHILS	19.71	Cells/cu.mm	0-100	Electrical Impedance
PLATELET COUNT	311000	cells/cu.mm	150000-410000	Electrical impedence
ERYTHROCYTE SEDIMENTATION RATE (ESR)	16	mm at the end of 1 hour	0-20	Modified Westergre
ERIPHERAL SMEAR				

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SIN No:BED230078009

IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE

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

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NO HEMOPARASITES SEEN

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Test Name	Result	Unit	Bio. Ref. Range	Method

BLOOD GROUP ABO AND RH FACTOR, I	NHOLE BLOOD-EDTA	
	0	

BLOOD GROUP TYPE	0		Microplate technology
Rh TYPE	Positive		Microplate technology

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	FY2324				
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Test Name Result Unit Bio. Ref. Range Me	FY2324				
GLUCOSE, FASTING , NAF PLASMA 101 mg/dL 70-100 HEXOKINA	Test Name Result Unit Bio. Ref. Range Method				
GLUCOSE, FASTING , NAF PLASMA 101 mg/dL 70-100 HEXOKINA					
	SE				
Comment:					
As per American Diabetes Guidelines					
Fasting Glucose Values in mg/d L     Interpretation					
<100 mg/dL Normal					
100-125 mg/dL Prediabetes					

GLUCOSE, POST PRANDIAL (PP), 2	101	mg/dL	70-140	HEXOKINASE
HOURS , NAF PLASMA				

Diabetes

## **Comment:**

≥126 mg/dL

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

HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD-EDTA	6	%	HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD-EDTA	126	mg/dL	Calculated

#### **Comment:**

Reference Range as per American Diabetes Association (ADA):

REFERENCE GROUP	HBA1C IN %
NON DIABETIC ADULTS >18 YEARS	<5.7

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# ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - TMT - PAN INDIA - FY2324 Test Name Result Unit Bio. Ref. Range Method

5.7 - 6.4	
$\geq 6.5$	
6 - 7	
7 - 8	
8 - 10	
>10	
	$\geq 6.5$ 6-7 7-8 8-10

Note: Dietary preparation or fasting is not required.

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

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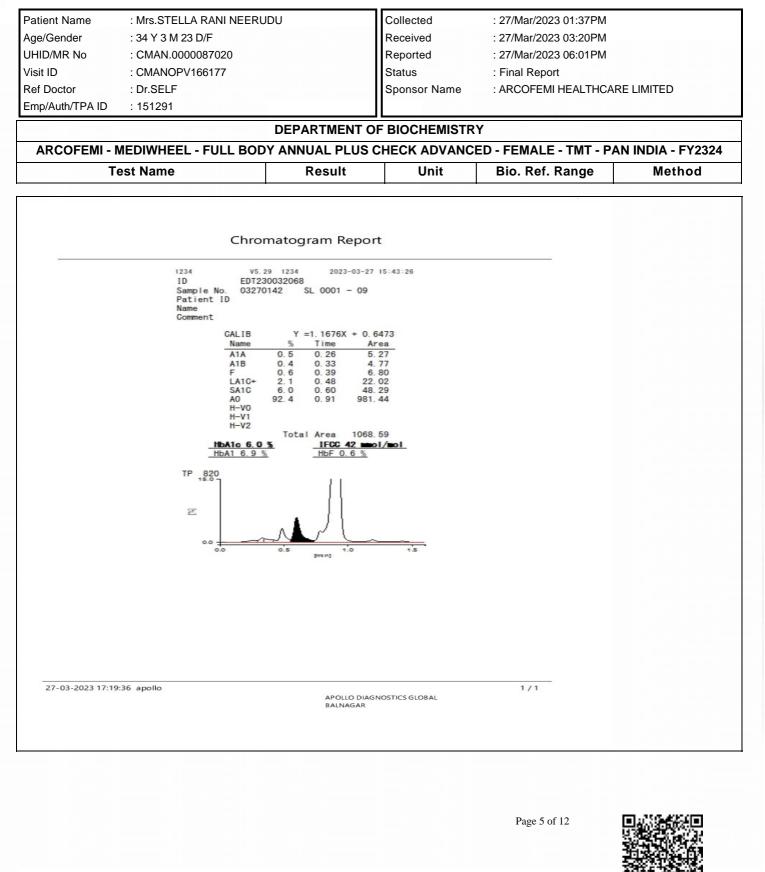


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## SIN No:PLF01951191,PLP1316236,EDT230032068

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ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - TMT - PAN INDIA - FY2324					
Test Name	Result	Unit	Bio. Ref. Range	Method	

# LIPID PROFILE, SERUM

TOTAL CHOLESTEROL	150	mg/dL	<200	CHO-POD
TRIGLYCERIDES	68	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	41	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	109	mg/dL	<130	Calculated
LDL CHOLESTEROL	95.4	mg/dL	<100	Calculated
VLDL CHOLESTEROL	13.6	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.66		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	$\geq$ 240	
TRIGLYCERIDES	<150	150 - 199	200 - 499	$\geq$ 500
LDL	Optimal < 100 Near Optimal 100-129	130 - 159	160 - 189	≥ 190
HDL	$\geq 60$			
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.



1860 <mark>500</mark> 7788

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Test Name	Result	Unit	Bio. Ref. Range	Method

LIVER FUNCTION TEST (LFT), SERUM				
BILIRUBIN, TOTAL	0.39	mg/dL	0.3–1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.07	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.32	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	22	U/L	<35	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	20.0	U/L	<35	IFCC
ALKALINE PHOSPHATASE	80.00	U/L	30-120	IFCC
PROTEIN, TOTAL	7.78	g/dL	6.6-8.3	Biuret
ALBUMIN	4.52	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.26	g/dL	2.0-3.5	Calculated
A/G RATIO	1.39		0.9-2.0	Calculated

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RENAL PROFILE/RENAL FUNCTION T	E <b>ST (RFT/KFT)</b> , SERU	Μ		
CREATININE	0.65	mg/dL	0.66 - 1.09	Modified Jaffe, Kinetic
UREA	19.20	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	9.0	mg/dL	8.0 - 23.0	Calculated
URIC ACID	4.79	mg/dL	2.6-6.0	Uricase PAP
CALCIUM	9.70	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	2.87	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	138	mmol/L	136–146	ISE (Indirect)
POTASSIUM	4.2	mmol/L	3.5–5.1	ISE (Indirect)
CHLORIDE	103	mmol/L	101–109	ISE (Indirect)

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GAMMA GLUTAMYL TRANSPEPTIDASE	27.00	U/L	<38	IFCC
(GGT), SERUM				

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SIN No:SE04333546 This test has been performed at Apollo Health & Lifestyle Ltd, Global Reference Laboratory, Hyderabad

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Patient Name	: Mrs.STELLA RANI NEERUDU	Collected	: 27/Mar/2023 01:37PM
Age/Gender	: 34 Y 3 M 23 D/F	Received	: 27/Mar/2023 03:37PM
UHID/MR No	: CMAN.0000087020	Reported	: 27/Mar/2023 04:26PM
Visit ID	: CMANOPV166177	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 151291		
	DEPARTMENT O	F IMMUNOLOGY	

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - TMT - PAN INDIA - FY2324 **Test Name** Unit Bio. Ref. Range Method Result

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

TRI-IODOTHYRONINE (T3, TOTAL)	1	ng/mL	0.7-2.04	CLIA	
THYROXINE (T4, TOTAL)	7.96	µg/dL	6.09-12.23	CLIA	
THYROID STIMULATING HORMONE (TSH)	2.848	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





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Patient Name	: Mrs.STELLA RANI NEERUDU	Collected	: 27/Mar/2023 01:37PM
Age/Gender	: 34 Y 3 M 23 D/F	Received	: 27/Mar/2023 04:13PM
UHID/MR No	: CMAN.0000087020	Reported	: 27/Mar/2023 05:37PM
Visit ID	: CMANOPV166177	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 151291		

## DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BOD	Y ANNUAL PLUS C	HECK ADVANCE	D - 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	Bromothymol Blue
SP. GRAVITY	1.015		1.002-1.030	Bromothymol Blue
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	Peroxidase
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	PYRROLE HYDROLYSIS
CENTRIFUGED SEDIMENT WET MOUNT	AND MICROSCOPY			
PUS CELLS	2-3	/hpf	0-5	Microscopy
EPITHELIAL CELLS	3-4	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY

Page 11 of 12



SIN No:UR2086922

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

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Patient Name	: Mrs.STELLA RANI NEER	JDU	Collected	: 27/Mar/2023 01:37PN	Λ
Age/Gender	: 34 Y 3 M 23 D/F		Received	: 27/Mar/2023 04:10PM	Λ
UHID/MR No	: CMAN.0000087020		Reported	: 27/Mar/2023 05:37PM	Λ
Visit ID	: CMANOPV166177		Status	: Final Report	
Ref Doctor	: Dr.SELF		Sponsor Name	: ARCOFEMI HEALTH	CARE LIMITED
Emp/Auth/TPA ID	: 151291				
ARCOFFMI - I		EPARTMENT OF CL			<b>PAN INDIA - FY2324</b>
	D MEDIWHEEL - FULL BOD est Name				PAN INDIA - FY2324 Method
	MEDIWHEEL - FULL BOI	DY ANNUAL PLUS (	CHECK ADVANC	ED - FEMALE - TMT -	
Т	MEDIWHEEL - FULL BOI	DY ANNUAL PLUS (	CHECK ADVANC	ED - FEMALE - TMT -	

Result/s to Follow: PERIPHERAL SMEAR

DR. SHALINI SINGH

**Consultant Pathologist** 

M.B.B.S, MD

Apo Dr. RAJESH BATTINA PhD. (Biochemistry)

**Consultant Biochemist** 

ALINI

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

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

wjanya Dr Sc MBBS, MD(Pathology) **Consultant Pathologist** 

Page 12 of 12



SIN No:UPP014487,UF008211 This test has been performed at Apollo Health & Lifestyle Ltd, Global Reference Laboratory, Hyderabad

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Patient Name	: Mrs. STELLA RANI NEERUDU	Age/Gender	: 34 Y/F
UHID/MR No.	: CMAN.0000087020	OP Visit No	: CMANOPV166177
Sample Collected on	:	Reported on	: 28-03-2023 12:44
LRN#	: RAD1961013	Specimen	:
<b>Ref Doctor</b>	: SELF		
Emp/Auth/TPA ID	: 151291		

## DEPARTMENT OF RADIOLOGY

#### **ULTRASOUND - WHOLE ABDOMEN**

**Liver** appears normal in size 14.60 cm and echotexture. No focal lesion is seen. PV and CBD normal. No dilatation of the intrahepatic biliary radicals.

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

Spleen appears normal in size 10.22 cm. No focal lesion seen. Splenic vein appears normal.

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

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

 Right kidney:
 10.88 x 4.03 cm.

 Left kidney:
 11.14 x 5.57 cm.

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

<u>Uterus</u> appears bulky in size 9.45 x 5.94 x 4.89 cm. It shows normal shape & echo pattern.Endometrial echo-complex appears normal and measures 1.09 cm.No intra/extra uterine gestational sac seen.

Both ovaries appear normal in size, shape and echotexture.

 Right ovary:
 4.26 x 2.97 cm.

 Left ovary:
 3.09 x 2.29 cm.

No evidence of any adnexal pathology noted.

#### **IMPRESSION:-**

#### BULKY UTERUS.

#### Suggest - clinical correlation.

(The sonography findings should always be considered in correlation with the clinical and other investigation



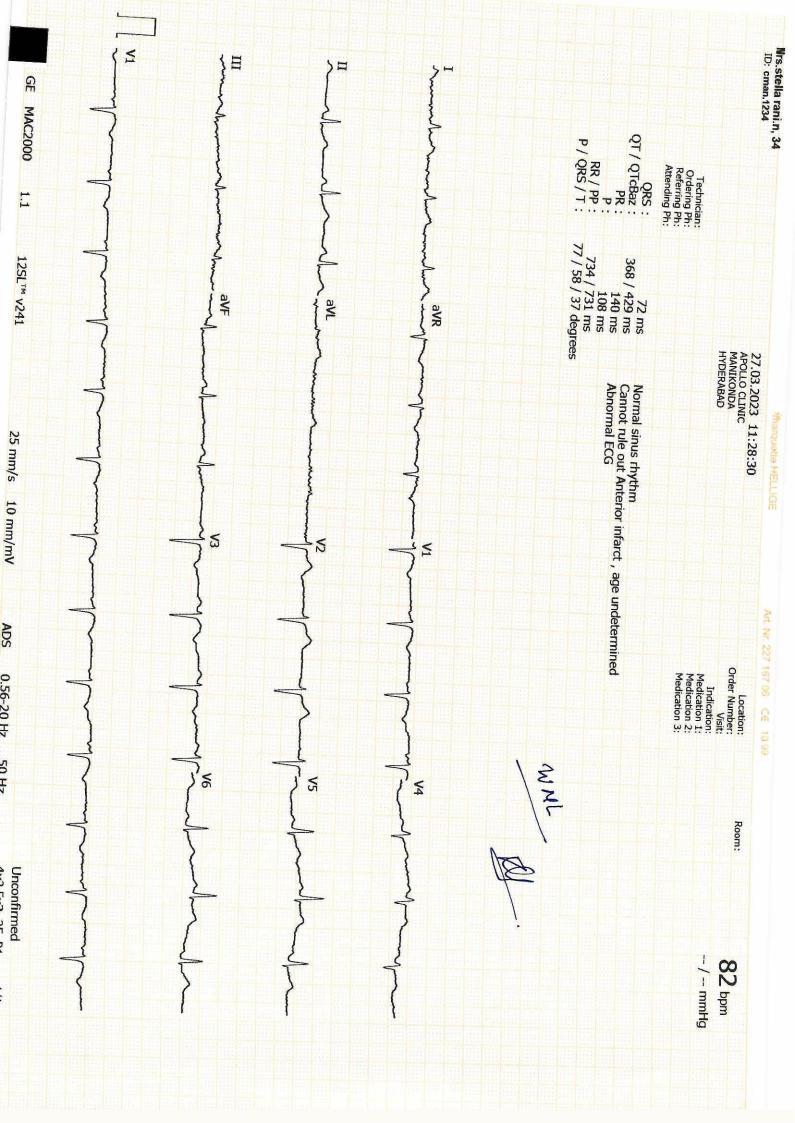
Patient Name : Mrs. STELLA RANI NEERUDU

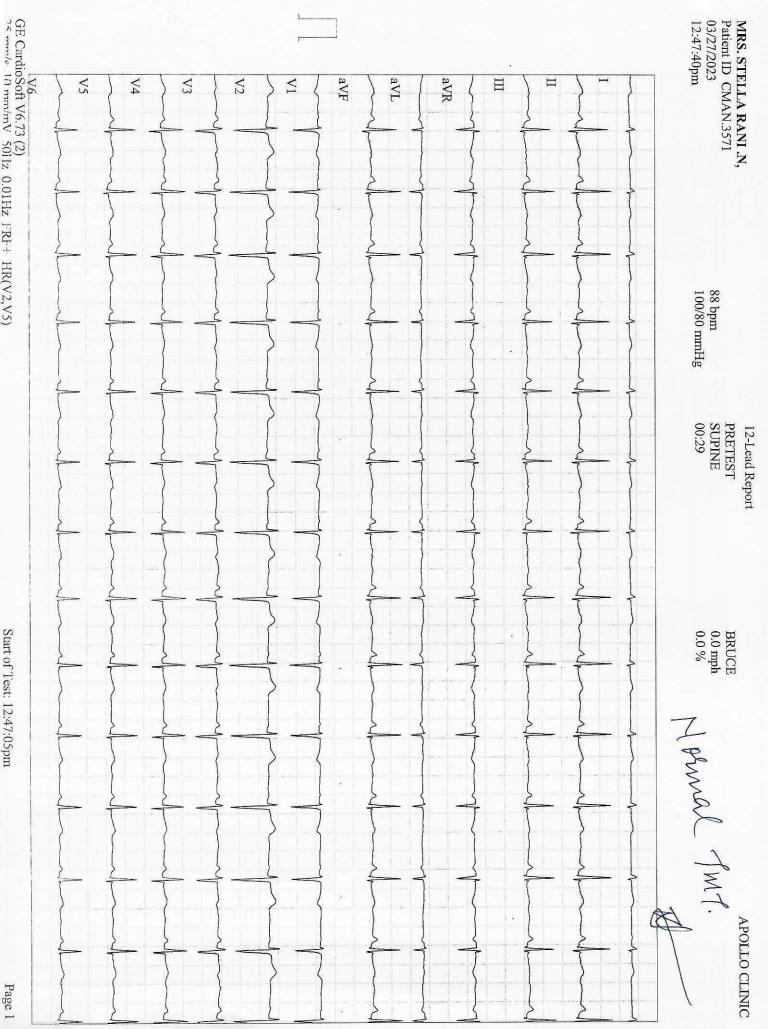
Age/Gender

: 34 Y/F

finding where applicable.) It is only a professional opinion, Not valid for medico legal purpose.

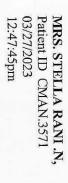
Dr. MD RAHEEMUDDIN QURESHI Radiology





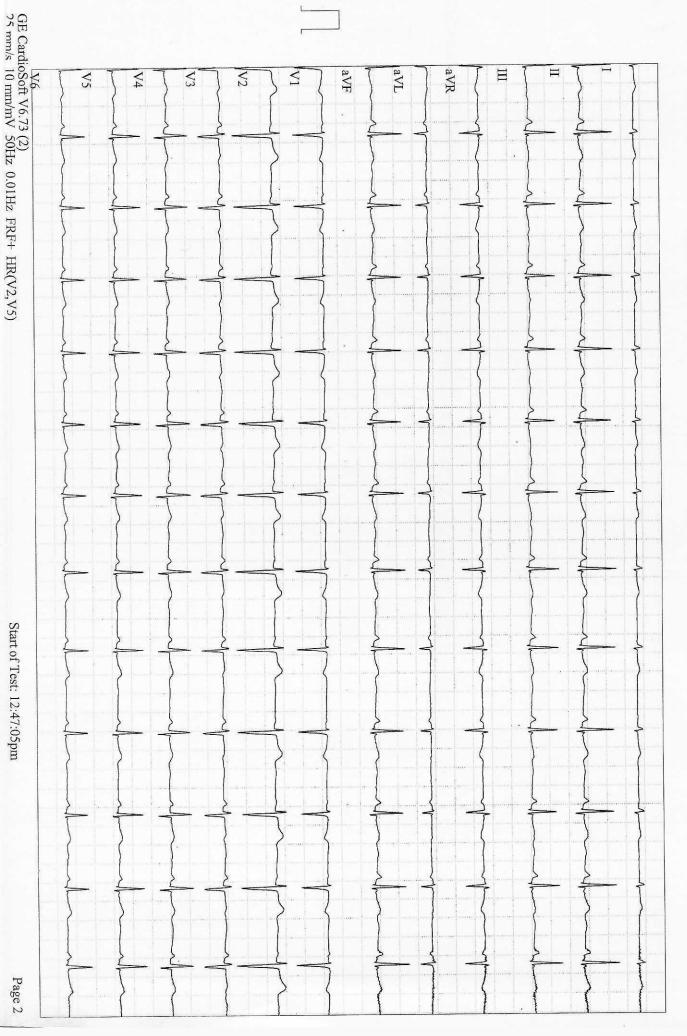
Start of Test: 12:47:05pm

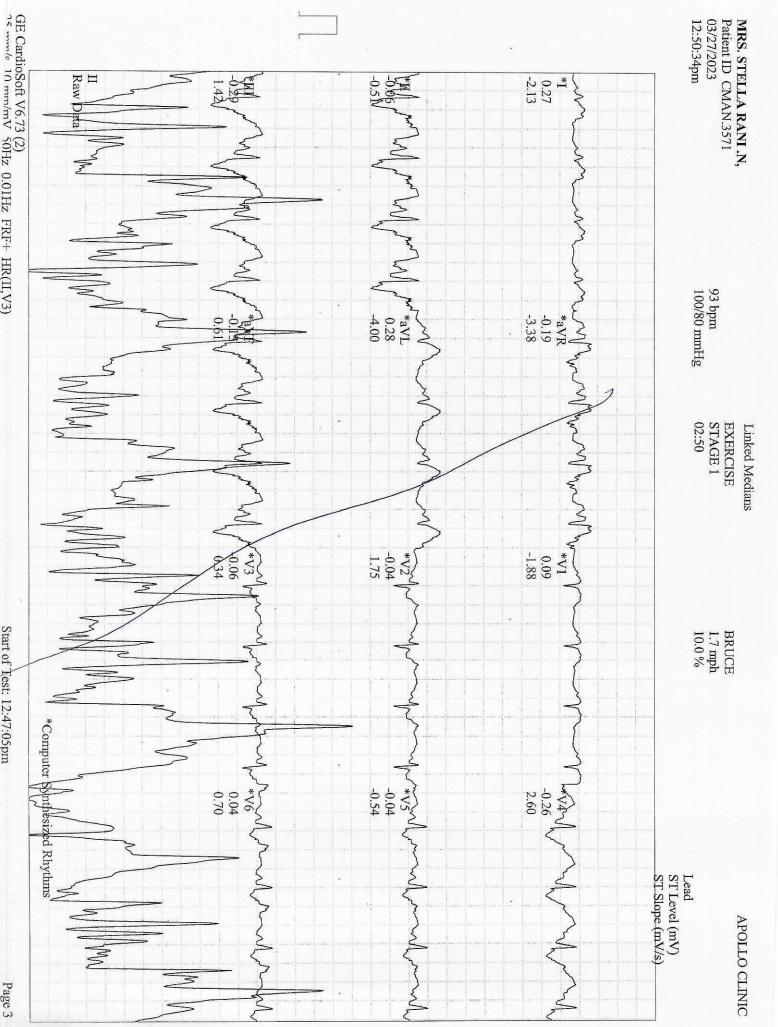
0.0 %	0.0 mph	BRUCE	
			APOLLO CLINIC

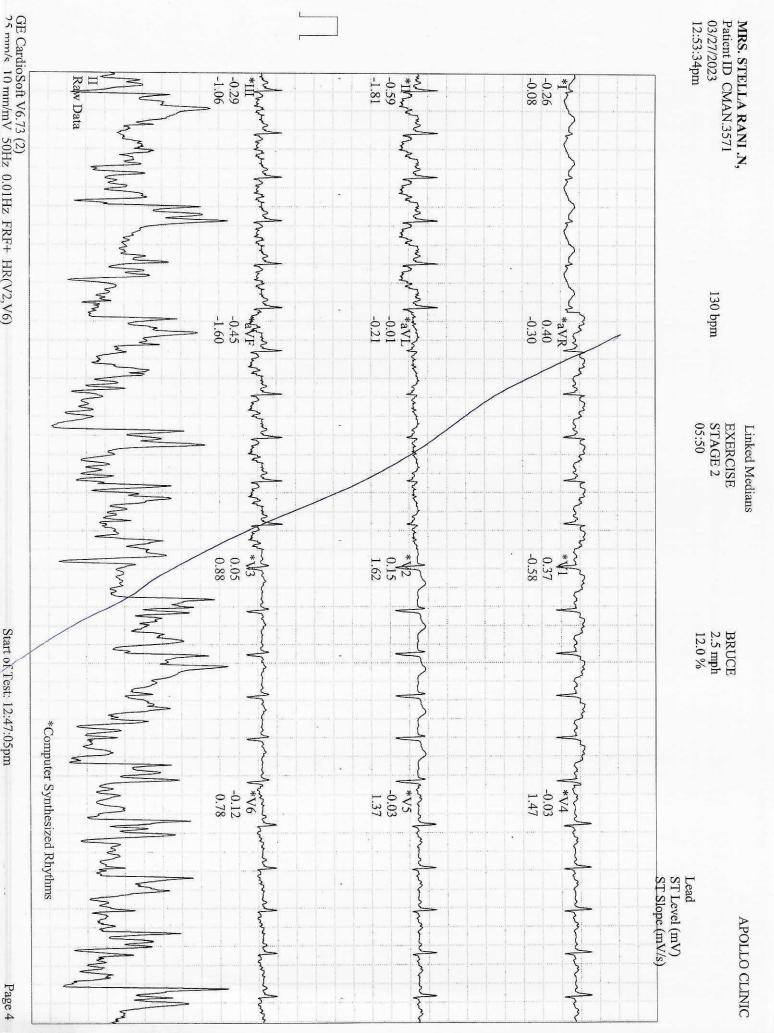


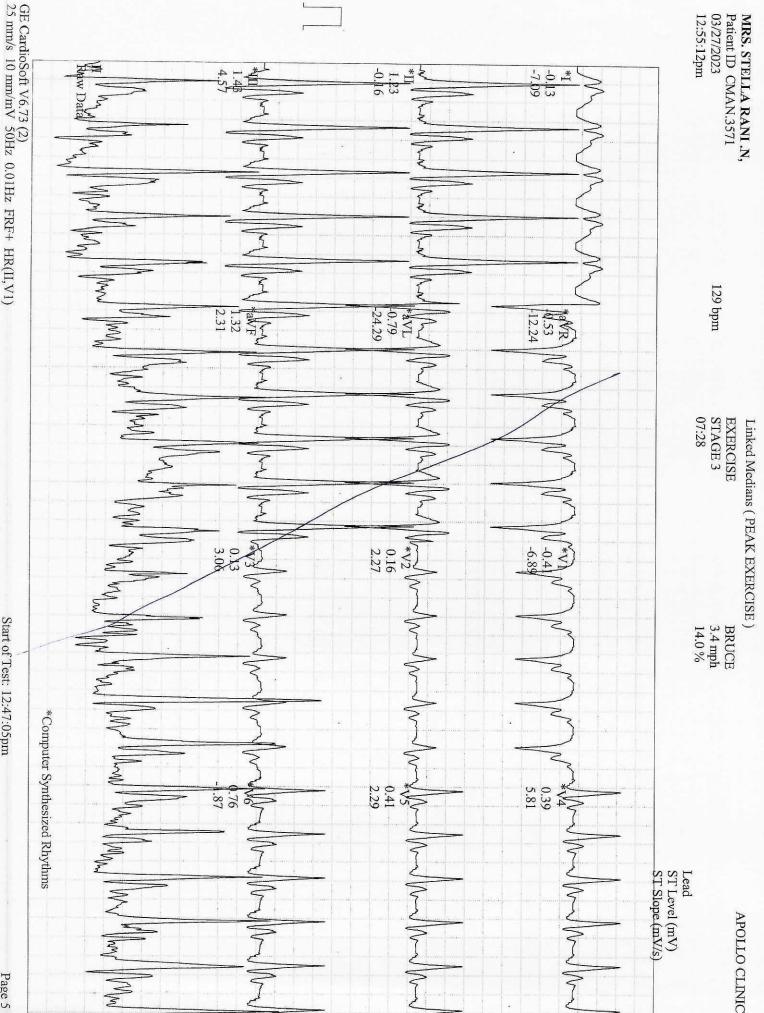
85 bpm 100/80 mmHg

12-Lead Report PRETEST STANDING 00:34



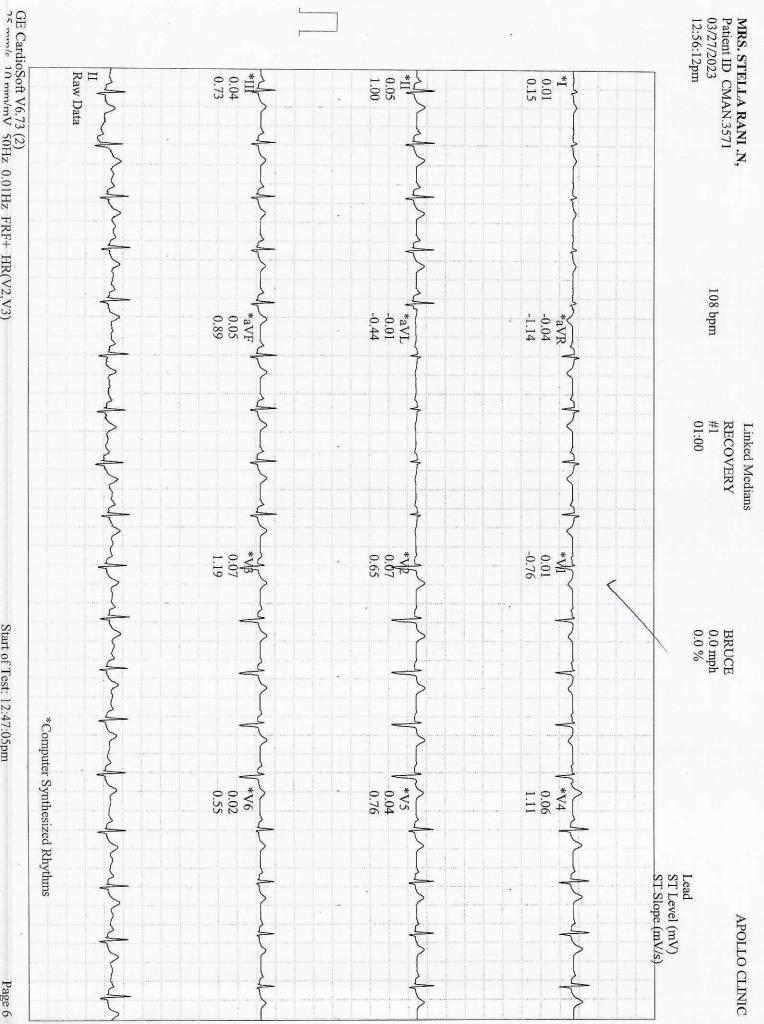


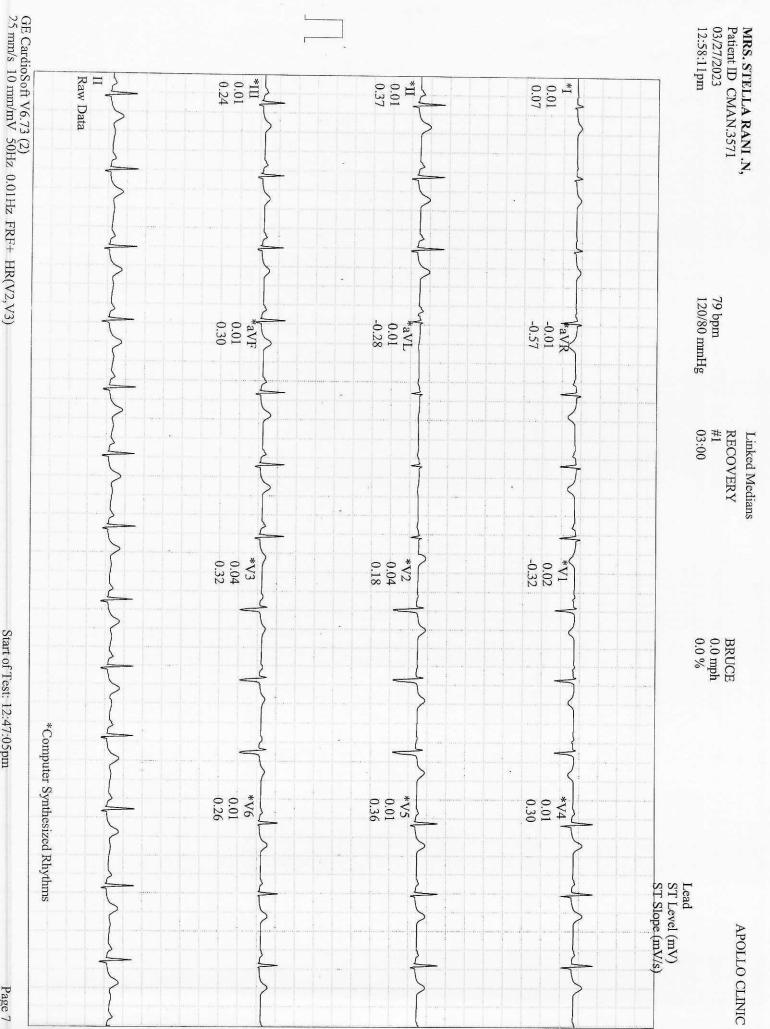




Start of Test: 12:47:05pm

Page 5





	. 0	A LML	A B	Monnal	Z						
	1.43 0.01	4 0	9360	120/80	129 78	1.0 1.0	0.00	0.00	01:28 03:09	STAGE 3	RECOVERY
State of the second state	-0.25 -0.22	v o	12900 14190	100/80 110/80	129 129	4.6 7.0	10.00 12.00	1.70 2.50	03:00 03:00	STAGE 1 STAGE 2	EXERCISE
	-0.01 0.01	00	8600	100/80	86 79	1.0 1.0	0.00 0.00	0.00 0.00	00:32 00:08	SUPINE STANDING	PRETEST
el Comment	ST Level (III mV)	vE n (/min)	RPP (mmHg*bpm	BP (mmHg)	HR (bpm)	Workload (METS)	Grade . (%)	Speed (mph)	Time in Stage	Stage Name	Phase Name
Summary: Resting ECG: normal. Functional Capacity: normal. HR Response to Exercise: appropriate. BP Response to Exercise: normal resting BP - appropriate response. Chest Pain: none. Arrhythmias: none. ST Changes: none. Overall impression: Normal stress test.	al. Function onse to Exe rhythmias:	CG: normi BP Resp none. Ar ress test.	Summary: Resting ECG: norr Exercise: appropriate. BP Res response. Chest Pain: none. A impression: Normal stress test.	Summa Exercise response impressi					Test Type:	H R	
Max. S1: -1.03 mV, 0.00 mV/s in III; EXERCISE STAGE 1 02:00 ST/HR index: 2.60 µV/bpm <b>Reasons for Termination:</b> Target heart rate achieved,Patient unable to walk on treadmill	in III; EXI get heart rat	7/bpm ation: Targ	Max. S1: -1.03 mV, 0.00 m ST/HR index: 2.60 µV/bpm <b>Reasons for Termination:</b>	Max. S1: ST/HR in Reasons					r story: Ordering MD:	Test Reason: Medical History: Ref. MD: Orde	
BRUCE: Total Exercise Time 07:28 Max HR: 244 bpm 131% of max predicted 186 bpm HR at rest: 80 Max BP: 120/80 mmHg BP at rest: 100/80 Max RPP: 14410 mmHg*bpm Maximum Workload: 10.10 METS	17:28 ax predicted rest: 100/8 TS	ise Time ( 31% of mi 1g BP at 10.10 ME	BRUCE: Total Exercise Time 07:28 Max HR: 244 bpm 131% of max predicted 186 bpm Max BP: 120/80 mmHg BP at rest: 100/80 Max RJ Maximum Workload: 10.10 METS	BRUCE Max HR Max BP Maximu					cm 62 kg	Female 153 cm 34yrs Asian Meds:	03/27/2023 12:47:05pm
APOLLO CLINIC					Tabular Summary	Tabular				A RANI .N, AN.3571	MRS. STELLA RANI .N, Patient ID CMAN.3571
				1							

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GE CardioSoft V6.73 (2)

Unconfirmed

Attending MD:

Page 1



Patient Name	: Mrs. STELLA RANI NEERUDU	Age/Gender	: 34 Y/F
UHID/MR No.	: CMAN.0000087020	<b>OP</b> Visit No	: CMANOPV166177
Sample Collected on	:	Reported on	: 27-03-2023 14:23
LRN#	: RAD1961013	Specimen	:
<b>Ref Doctor</b>	: SELF		
Emp/Auth/TPA ID	: 151291		

## DEPARTMENT OF RADIOLOGY

## X-RAY CHEST PA

Cardiac is normal in size.

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

ph

Dr. MD RAHEEMUDDIN QURESHI Radiology