

# CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination,

Mee J 24/7/23 ·Jalatha of on

After reviewing the medical history and on clinical examination it has been found that he/she is

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been revealed, in my opinion, these are not	
w the advice/medication that has been	
recommended	
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Dr. KOTTOLINEBS	
Meden Oliver	
* The Apollo Clinic, (Location)	
-	been revealed, in my opinion, these are not

pollo Health and Lifestyle Limited

DN - Less 11876201001.C6465893 Rept. Office: 7-3-612/0, 7" Floor, Imperial Towers, Amearbet, Hyderabad-550036, Telanguna.

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TO BOOK AN APPOINTMENT

Apollo Medical

Expertise, Closer to you.

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POWER PRESCRIPTION

NAME: S. SUJATA

GENDER: W/F DATE: 0014/23 UHID: 80579

VISION

616

Not

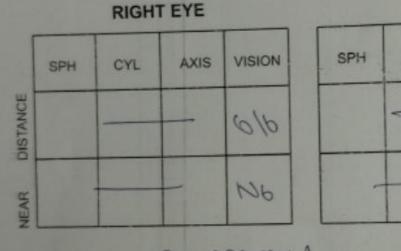
Expertise. Closer to you.

AGE: 30

LEFT EYE

CYL

AXIS



COLOUR VISION : BE . MOORMAL

DIAGNOSIS 1

OTHER FINDINGS :

INSTRUCTIONS : MIL



TO BOOK AN APPOINTMENT

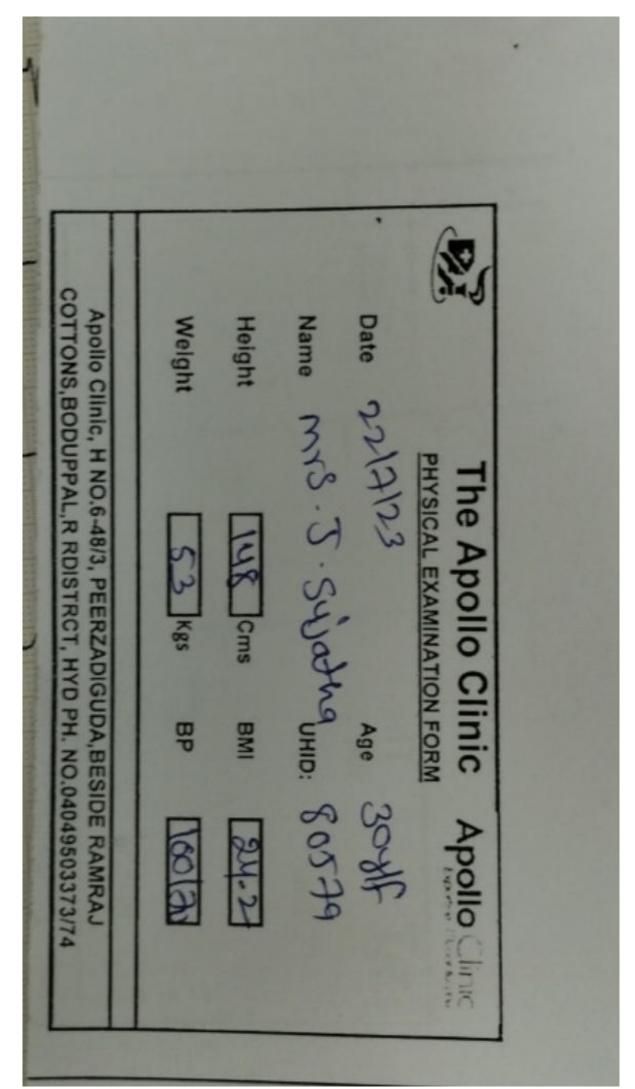
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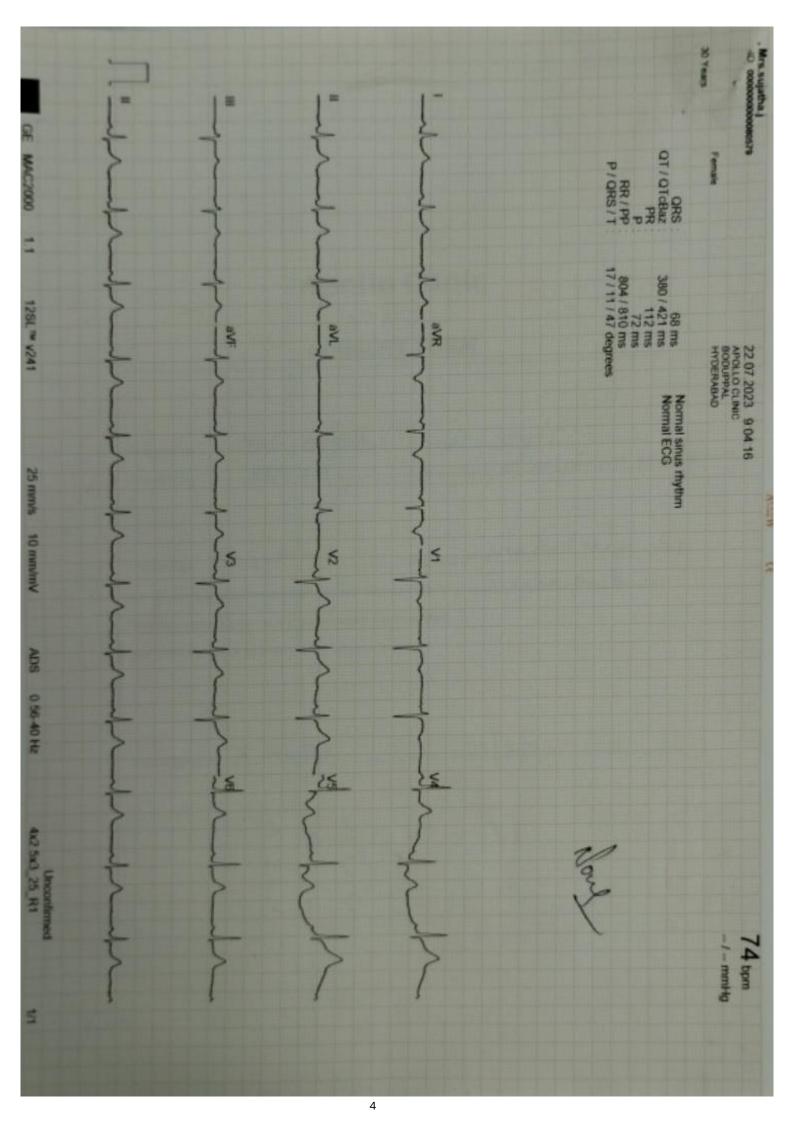
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ad 195 Rat Nagar | Chanda Nagar | Julaine Hills | Acfa | Nalakunta | Nizampet | Uppel)

line appointments www.applochnic.com





# **Apollo Clinic**

# CONSENT FORM

Patiene Name Mrs- Bujatha AR 304/1-IMA/MIS/MS Sujata Employce of Arto fem? Mediused Tests done which is a part of my routine health check package. and I claim the above statement in my full consciousness. Patient Signature: + sujatka Date: 23 7 23









Patient Name	: Mrs.JATOTH SUJATHA	Collected	: 22/Jul/2023 08:49AM
Age/Gender	: 30 Y 4 M 17 D/F	Received	: 22/Jul/2023 12:38PM
UHID/MR No	: CUPP.0000080579	Reported	: 22/Jul/2023 02:44PM
Visit ID	: CUPPOPV119533	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 826502620934		

#### DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - F	ULL BODY GOLD PL	US-1 FEMALE	- 2D ECHO - PAN INDIA	A - FY2324
Test Name	Result	Unit	Bio. Ref. Range	Method

HAEMOGLOBIN	10.9	g/dL	12-15	Spectrophotometer
PCV	32.90	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.84	Million/cu.mm	3.8-4.8	Electrical Impedence
MCV	67.8	fL	83-101	Calculated
MCH	22.5	pg	27-32	Calculated
MCHC	33.1	g/dL	31.5-34.5	Calculated
R.D.W	16.9	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	6,680	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (E	DLC)			
NEUTROPHILS	51.5	%	40-80	Electrical Impedance
LYMPHOCYTES	39.8	%	20-40	Electrical Impedance
EOSINOPHILS	1.6	%	1-6	Electrical Impedance
MONOCYTES	6.8	%	2-10	Electrical Impedance
BASOPHILS	0.3	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				•
NEUTROPHILS	3440.2	Cells/cu.mm	2000-7000	Electrical Impedance
LYMPHOCYTES	2658.64	Cells/cu.mm	1000-3000	Electrical Impedance
EOSINOPHILS	106.88	Cells/cu.mm	20-500	Electrical Impedance
MONOCYTES	454.24	Cells/cu.mm	200-1000	Electrical Impedance
BASOPHILS	20.04	Cells/cu.mm	0-100	Electrical Impedance
PLATELET COUNT	318000	cells/cu.mm	150000-410000	Electrical impedence
ERYTHROCYTE SEDIMENTATION RATE (ESR)	12	mm at the end of 1 hour	0-20	Modified Westergre

RBC- MICROCYTIC HYPOCHROMIC.MILD DEGREE OF ANISOPOIKILOCYTOSIS WITH TEAR DROP CELLS,ELLIPTOCYTES AND OVALOCYTES SEEN. WBC WITHIN NORMAL LIMITS PLATELETS ARE ADEQUATE ON SMEAR NO HEMOPARASITES SEEN IMPRESSION: MICROCYTIC HYPOCHROMIC ANEMIA KINDLY CORRELATE WITH IRON STUDIES.

Page 1 of 13

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Address: H. No 6-48/3, Peerzadiguda Panchayat, Boduppal, R R District., Uppal, Hyderabad, Telangana, India - 50003

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Test Name Result			Unit	Bio. Ref. Range	Method
ARCO	OFEMI - MEDIWHEEL - FU	ULL BODY GOLD PI	LUS-1 FEMALE	- 2D ECHO - PAN INDIA	- FY2324
		DEPARTMENT OF	HAEMATOLOG	Y	
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Ref Doctor	: Dr.SELF		Sponsor Name	: ARCOFEMI HEALTHCAI	RE LIMITED
Visit ID	: CUPPOPV119533		Status	: Final Report	
UHID/MR No	: CUPP.0000080579		Reported	: 22/Jul/2023 02:44PM	
Age/Gender	: 30 Y 4 M 17 D/F		Received	: 22/Jul/2023 12:38PM	
Patient Name	: Mrs.JATOTH SUJATHA		Collected	: 22/Jul/2023 08:49AM	

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DEPARTMENT OF HAEMATOLOGY ARCOFEMI - MEDIWHEEL - FULL BODY GOLD PLUS-1 FEMALE - 2D ECHO - PAN INDIA - FY2324				
Emp/Auth/TPA ID : 826502620934				
Ref Doctor         : Dr.SELF         Sponsor Name         : ARCOFEMI HEALTHCARE LIMITED				
Visit ID : CUPPOPV119533 Status : Final Report				
UHID/MR No	: CUPP.0000080579	Reported	: 22/Jul/2023 04:25PM	
Age/Gender	: 30 Y 4 M 17 D/F	Received	: 22/Jul/2023 12:38PM	
Patient Name	: Mrs.JATOTH SUJATHA	Collected	: 22/Jul/2023 08:49AM	

Test Name	Result	Unit	Bio. Ref. Range	Method

BLOOD GROUP ABO AND RH FACTOR, WHOLE BLOOD EDTA				
BLOOD GROUP TYPE	0		I	Microplate technology
Rh TYPE	Positive		I	Microplate technology

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Patient Name	: Mrs.JATOTH SUJATHA	Collected	: 22/Jul/2023 12:09PM		
Age/Gender	: 30 Y 4 M 17 D/F	Received	: 22/Jul/2023 05:09PM		
UHID/MR No	: CUPP.0000080579	Reported	: 22/Jul/2023 05:41PM		
Visit ID : CUPPOPV119533 Status : Final Report					
Ref Doctor         : Dr.SELF         Sponsor Name         : ARCOFEMI HEALTHCARE LIMITED					
Emp/Auth/TPA ID : 826502620934					
DEPARTMENT OF BIOCHEMISTRY					

# ARCOFEMI - MEDIWHEEL - FULL BODY GOLD PLUS-1 FEMALE - 2D ECHO - PAN INDIA - FY2324

	Test Name	Result	Unit	Bio. Ref. Range	Method
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GLUCOSE, FASTING , SODIUM FLUORIDE	89	mg/dL	70-100	GOD - POD
PLASMA				

**Comment:** 

#### As per American Diabetes Guidelines

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

GLUCOSE, POST PRANDIAL (PP), 2	106	mg/dL	70-140	HEXOKINASE
HOURS , SODIUM FLUORIDE PLASMA (2				
HR)				

#### **Comment:**

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

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

Ref: Marks medical biochemistry and clinical approach

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#### SIN No:PLF02003195,PLP1351660

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Patient Name	: Mrs.JATOTH SUJATHA	Collected	: 22/Jul/2023 08:49AM
Age/Gender	: 30 Y 4 M 17 D/F	Received	: 22/Jul/2023 12:42PM
UHID/MR No	: CUPP.0000080579	Reported	: 22/Jul/2023 03:25PM
Visit ID	: CUPPOPV119533	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 826502620934		

#### DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FU	JLL BODY GOLD PL	US-1 FEMALE	- 2D ECHO - PAN INDIA	- FY2324
Test Name	Result	Unit	Bio. Ref. Range	Method

### LIPID PROFILE, SERUM

TOTAL CHOLESTEROL	175	mg/dL	<200	CHO-POD
TRIGLYCERIDES	84	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	55	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	120	mg/dL	<130	Calculated
LDL CHOLESTEROL	103.2	mg/dL	<100	Calculated
VLDL CHOLESTEROL	16.8	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.18		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.



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Visit ID	: CUPPOPV119533	Status	: Final Report		
UHID/MR No	: CUPP.0000080579	Reported	: 22/Jul/2023 03:25PM		
Age/Gender	: 30 Y 4 M 17 D/F	Received	: 22/Jul/2023 12:42PM		
Patient Name	: Mrs.JATOTH SUJATHA	Collected	: 22/Jul/2023 08:49AM		

#### 

ARCOFEMI - MEDIWHEEL - F	ULL BODY GOLD PL	US-1 FEMALE	- 2D ECHO - PAN INDIA	- FY2324
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Test Name	Result	Unit	Bio. Ref. Range	Method

LIVER FUNCTION TEST (LFT), SERUM				
BILIRUBIN, TOTAL	0.57	mg/dL	0.3–1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.11	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.46	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	17	U/L	<35	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	18.0	U/L	<35	IFCC
ALKALINE PHOSPHATASE	53.00	U/L	30-120	IFCC
PROTEIN, TOTAL	6.90	g/dL	6.6-8.3	Biuret
ALBUMIN	4.28	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.62	g/dL	2.0-3.5	Calculated
A/G RATIO	1.63		0.9-2.0	Calculated

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Patient Name	: Mrs.JATOTH SUJATHA	Collected	: 22/Jul/2023 08:49AM
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#### DEPARTMENT OF BIOCHEMISTRY

# ARCOFEMI - MEDIWHEEL - FULL BODY GOLD PLUS-1 FEMALE - 2D ECHO - PAN INDIA - FY2324Test NameResultUnitBio. Ref. RangeMethod

RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT), SERUM					
CREATININE	0.57	mg/dL	0.66 - 1.09	Modified Jaffe, Kinetic	
UREA	17.30	mg/dL	17-43	GLDH, Kinetic Assay	
BLOOD UREA NITROGEN	8.1	mg/dL	8.0 - 23.0	Calculated	
URIC ACID	4.54	mg/dL	2.6-6.0	Uricase PAP	
CALCIUM	9.61	mg/dL	8.8-10.6	Arsenazo III	
PHOSPHORUS, INORGANIC	3.05	mg/dL	2.5-4.5	Phosphomolybdate Complex	
SODIUM	137	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)	

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Test Name Result Unit Bio. Ref. Range Method					
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		DEPARTMENT OF	BIOCHEMISTR	Y	
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ALKALINE PHOSPHATASE, SERUM	53.00	U/L	30-120	IFCC	
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT), SERUM	19.00	U/L	<38	IFCC	

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UHID/MR No	: CUPP.0000080579	Reported	: 22/Jul/2023 08:54PM		
Age/Gender	: 30 Y 4 M 17 D/F	Received	: 22/Jul/2023 12:43PM		
Patient Name	: Mrs.JATOTH SUJATHA	Collected	: 22/Jul/2023 08:49AM		

#### DEPARTMENT OF IMMUNOLOGY

# ARCOFEMI - MEDIWHEEL - FULL BODY GOLD PLUS-1 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)	1.32	ng/mL	0.87-1.78	CLIA		
THYROXINE (T4, TOTAL)	8.19	µg/dL	6.09-12.23	CLIA		
THYROID STIMULATING HORMONE (TSH)	0.830	µIU/mL	0.38-5.33	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 hypothyroidism, 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:

lkor pregnant temales	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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#### SIN No:SPL23104502

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Telangana: Hyderabad (AS Rao Nagar | Chanda Nagar | Kondapur | Nallakunta | Nizampet | Manikonda | Uppal ) Andhra Pradesh: Vizag (Seethamma Peta) Karnataka: Bangalore (Basavanagudi | Bellandur | Electronics City | Fraser Town | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli | Koramangala | Sarjapur Road) Mysore (VV Mohalla) Tamilnadu: Chennai ( Annanagar | Kotturpuram | Mogappair | T Nagar | Valasaravakkam | Velachery ) Maharashtra: Pune (Aundh | Nigdi Pradhikaran | Viman Nagar | Wanowrie) Uttar Pradesh: Ghaziabad (Indrapuram) Gujarat: Ahmedabad (Satellite) Punjab: Amritsar (Court Road) Haryana: Faridabad (Railway Station Road)

Address: H. No 6-48/3, Peerzadiguda R R District,, Uppal, Hyderat

ida Panchayat, B Mabad, Telangan









DEPARTMENT OF IMMUNOLOGY ARCOFEMI - MEDIWHEEL - FULL BODY GOLD PLUS-1 FEMALE - 2D ECHO - PAN INDIA - FY2324						
Emp/Auth/TPA ID	: 826502620934					
Ref Doctor	: Dr.SELF		Sponsor Name	: ARCOFEMI HEALTHCA	RE LIMITED	
Visit ID	: CUPPOPV119533		Status	: Final Report		
UHID/MR No	: CUPP.0000080579		Reported	: 22/Jul/2023 04:58PM		
Age/Gender	: 30 Y 4 M 17 D/F		Received	: 22/Jul/2023 12:43PM		
Patient Name	: Mrs.JATOTH SUJATHA		Collected	: 22/Jul/2023 08:49AM		

VITAMIN D (25 - OH VITAMIN D) , SERUM 18.1 ng/mL		
	30 -100	CLIA

#### **Comment:**

**BIOLOGICAL REFERENCE RANGES** 

VITAMIN D STATUS	VITAMIN D 25 HYDROXY (ng/mL)
DEFICIENCY	<10
INSUFFICIENCY	10-30
SUFFICIENCY	30 - 100
TOXICITY	>100
INSUFFICIENCY SUFFICIENCY	10 - 30     30 - 100

The assay measures both D2 (Ergocalciferol) and D3 (Cholecalciferol) metabolites of vitamin D.Vitamin D status is best determined by measurement of 25 hydroxy vitamin D, as it is the major circulating form and has longer half life (2-3 weeks) than 1,25 Dihydroxy vitamin D (5-8 hrs)

The reference ranges discussed in the preceding are related to total 25-OHD; as long as the combined total is 30 ng/mL or more, the patient has sufficient vitamin D.

Levels needed to prevent rickets and osteomalacia (15 ng/mL) are lower than those that dramatically suppress parathyroid hormone levels (20–30 ng/mL). In turn, those levels are lower than levels needed to optimize intestinal calcium absorption (34 ng/mL). Neuromuscular peak performance is associated with levels approximately 38 ng/mL.

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1860

500

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## SIN No:SPL23104502

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APOLLO CLINICS NETWORK

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Address: H. No 6-48/3, Peerza R R District,, Uppal,

da Panchayat, B





				96	_
Т	est Name	Result	Unit	Bio. Ref. Range	Method
ARCO	OFEMI - MEDIWHEEL - FU	JLL BODY GOLD P	LUS-1 FEMALE	- 2D ECHO - PAN INDI	A - FY2324
		DEPARTMENT O	F IMMUNOLOG	Y	
Emp/Auth/TPA ID	: 826502620934				
Ref Doctor	: Dr.SELF		Sponsor Name	: ARCOFEMI HEALTHC	ARE LIMITED
Visit ID	: CUPPOPV119533		Status	: Final Report	
UHID/MR No	: CUPP.0000080579		Reported	: 22/Jul/2023 04:50PM	
Age/Gender	: 30 Y 4 M 17 D/F		Received	: 22/Jul/2023 12:43PM	
Patient Name	: Mrs.JATOTH SUJATHA		Collected	: 22/Jul/2023 08:49AM	

#### **Comment:**

Vitamin B12 deficiency frequently causes macrocytic anemia, glossitis, peripheral neuropathy, weakness, hyperreflexia, ataxia, loss of proprioception, poor coordination, and affective behavioral changes. A significant increase in RBC MCV may be an important indicator of vitamin B12 deficiency.

Patients taking vitamin B12 supplementation may have misleading results. A normal serum concentration of B12 does not rule out tissue deficiency of vitamin B12. The most sensitive test for B12 deficiency at the cellular level is the assay for MMA. If clinical symptoms suggest deficiency, measurement of MMA and homocysteine should be considered, even if serum B12 concentrations are normal.

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1860

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#### SIN No:SPL23104502 This test has been performed at Apollo Health & Lifestyle Ltd, Global Reference Laboratory,Hyderabad

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Address: H. No 6-48/3, Peerzadiguda Panchayat, Boduppal, R R District,, Uppal, Hyderabad, Telangana, India - 500039

Telangana: Hyderabad (AS Rao Nagar | Chanda Nagar | Kondapur | Nallakunta | Nizampet | Manikonda | Uppal ) Andhra Pradesh: Vizag (Seethamma Peta) Karnataka: Bangalore (Basavanagudi | Bellandur | Electronics City | Fraser Town | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli | Koramangala | Sarjapur Road) Mysore (VV Mohalla) Tamilnadu: Chennai ( Annanagar | Kotturpuram | Mogappair | T Nagar | Valasaravakkam | Velachery ) Maharashtra: Pune (Aundh | Nigdi Pradhikaran | Viman Nagar | Wanowrie) Uttar Pradesh: Ghaziabad (Indrapuram) Gujarat: Ahmedabad (Satellite) Punjab: Amritsar (Court Road) Haryana: Faridabad (Railway Station Road)









Emp/Auth/TPA ID	: 826502620934			
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED	
Visit ID	: CUPPOPV119533	Status	: Final Report	
UHID/MR No	: CUPP.0000080579	Reported	: 22/Jul/2023 06:12PM	
Age/Gender	: 30 Y 4 M 17 D/F	Received	: 22/Jul/2023 04:48PM	
Patient Name	: Mrs.JATOTH SUJATHA	Collected	: 22/Jul/2023 08:49AM	

#### DEPARTMENT OF CLINICAL PATHOLOGY

# ARCOFEMI - MEDIWHEEL - FULL BODY GOLD PLUS-1 FEMALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method	
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COMPLETE URINE EXAMINATION (C	UE), URINE			
PHYSICAL EXAMINATION				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
рН	6.5		5-7.5	Bromothymol Blue
SP. GRAVITY	1.005		1.002-1.030	Bromothymol Blue
<b>BIOCHEMICAL EXAMINATION</b>				
URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE		NEGATIVE	GOD - POD
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING
URINE KETONES (RANDOM)	NEGATIVE	2	NEGATIVE	SODIUM NITRO PRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	EHRLICH
BLOOD	NEGATIVE		NEGATIVE	Peroxidase
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	PYRROLE HYDROLYSIS
CENTRIFUGED SEDIMENT WET MC	OUNT AND MICROSCOPY		×	
PUS CELLS	2-3	/hpf	0-5	Microscopy
EPITHELIAL CELLS	3-5	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY

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1860 500 7788

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SIN No:UR2152239

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APOLLO CLINICS NETWORK

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Address: H. No 6-48/3, Peerzadiguda Panchayat, Boduppal, R R District,, Uppal, Hyderabad, Telangana, India - 500039











Т	est Name	Result	Unit	Bio. Ref. Range	Method				
ARCO	OFEMI - MEDIWHEEL - FU	JLL BODY GOLD PI	LUS-1 FEMALE	- 2D ECHO - PAN INDIA -	FY2324				
	DI	EPARTMENT OF CL	INICAL PATHOL	.OGY					
Emp/Auth/TPA ID	: 826502620934								
Ref Doctor	: Dr.SELF		Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED					
Visit ID	: CUPPOPV119533		Status	: Final Report					
UHID/MR No	: CUPP.0000080579		Reported	: 22/Jul/2023 06:50PM					
Age/Gender	: 30 Y 4 M 17 D/F		Received						
Patient Name	: Mrs.JATOTH SUJATHA		Collected	: 22/Jul/2023 08:49AM					

URINE GLUCOSE(POST PRANDIAL) , URINE	NEGATIVE	NEGATIVE	Dipstick
URINE GLUCOSE(FASTING), URINE	NEGATIVE	NEGATIVE	Dipstick

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

Result/s to Follow: PERIPHERAL SMEAR

DR, SHALINI SINGH M.B.B.S, MD **Consultant Pathologist** 

Dr R.SHAUNI

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

Dr E.Maruthi Prasad MSc,PhD(Biochemistry) Consultant Biochemist

Page 13 of 13



1860 500 7788

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SIN No:UPP015192,UF009066 This test has been performed at Apollo Health & Lifestyle Ltd, Global Reference Laboratory,Hyderabad

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Address: H. No 6-48/3, Peerzadiguda Panchayat, Boduppal, R R District,, Uppal, Hyderabad, Telangana, India - 500



Patient Name	: Mrs. Jatoth Sujatha	Age/Gender	: 30 Y/F
UHID/MR No.	: CUPP.0000080579	<b>OP</b> Visit No	: CUPPOPV119533
Sample Collected on	:	<b>Reported on</b>	: 22-07-2023 14:06
LRN#	: RAD2054135	Specimen	:
<b>Ref Doctor</b>	: SELF		
Emp/Auth/TPA ID	: 826502620934		

#### DEPARTMENT OF RADIOLOGY

#### ULTRASOUND - WHOLE ABDOMEN

**Liver** appears normal in size 127 mm 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 91 mm.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 :** 97 x 43 mm. **Left kidney :** 89 x 50 mm.

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

**Uterus** appears normal in size 77 x 42 x 35 mm. It shows normal shape & echo pattern.Endometrial echo-complex appears normal and measures 4 mm.

**Both ovaries** appear normal in size, shape and echotexture. **Right ovary :** 26 x 16 mm. **Left ovary :** 25 x 21 mm.

No evidence of any adnexal pathology noted.

## **IMPRESSION:-**

#### No significant abnormality detected. Suggest – clinical correlation.

(The sonography findings should always be considered in correlation with the clinical and other investigation finding where applicable.) It is only a professional opinion, Not valid for medico legal purpose.



Patient Name

: Mrs. Jatoth Sujatha

Age/Gender

H. Tystliemai Dr. MATT

MBBS, MDRD Radiology



Patient Name	: Mrs. Jatoth Sujatha	Age/Gender	: 30 Y/F
UHID/MR No.	: CUPP.0000080579	<b>OP</b> Visit No	: CUPPOPV119533
Sample Collected on	:	<b>Reported on</b>	: 22-07-2023 14:05
LRN#	: RAD2054135	Specimen	:
<b>Ref Doctor</b>	: SELF		
Emp/Auth/TPA ID	: 826502620934		

#### DEPARTMENT OF RADIOLOGY

#### SONO MAMOGRAPHY - SCREENING

#### **Real time B–Mode USG of both breasts:**

Sono mammography study reveals normal appearance and distribution of fibro glandular breast parenchyma.

No evidence of focal, solid or cystic lesion.

No obvious asymmetry or distortion is noted.

No abnormal axillary lymphadenopathy is detected.

### **CONCLUSION :** No significant abnormality is seen in this study.

#### **Consultant Radiologist.**

(The sonography findings should always be considered in correlation with the clinical and other investigation finding where applicable.) It is only a professional opinion, Not valid for medico legal purpose.

4. Lysthiemai

Dr. MATTA JYOTHIRMAI <u>MBBS, MDRD</u> Radiology



Patient Name	: Mrs. Jatoth Sujatha	Age/Gender	: 30 Y/F
UHID/MR No.	: CUPP.0000080579	OP Visit No	: CUPPOPV119533
Sample Collected on	:	Reported on	: 22-07-2023 13:37
LRN#	: RAD2054135	Specimen	:
<b>Ref Doctor</b>	: SELF		
Emp/Auth/TPA ID	: 826502620934		
Emp/Auth/TPA ID	: 826502620934		

### 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

H. Lysthiemai

Dr. MATTA JYOTHIRMAI <u>MBBS, MDRD</u> Radiology

Name:Mrs. Jatoth SujathaAge/Gender:30 Y/FAddress:HYDLocation:HYDERABAD, TELANGANADoctor:EDepartment:GENERALRate Plan:UPPAL\_06042023Sponsor:ARCOFEMI HEALTHCARE LIMITEDConsulting Doctor: Jr. ABHIJEET VISHWAS GHATGE

MR No: Visit ID: Visit Date: Discharge Date: Referred By: CUPP.0000080579 CUPPOPV119533 22-07-2023 08:39

SELF

#### HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

#### SYSTEMIC REVIEW

#### **HT-HISTORY**

#### PHYSICAL EXAMINATION

#### SYSTEMIC EXAMINATION

#### IMPRESSION

#### RECOMMENDATION

Name: Mrs. Jatoth Sujatha 30 Y/F Age/Gender: Address: HYD HYDERABAD, TELANGANA Location: Doctor: Department: GENERAL UPPAL\_06042023 Rate Plan: ARCOFEMI HEALTHCARE LIMITED Sponsor: Consulting Doctor: Dr. AYYAPPA SWAMY AMARA

MR No: Visit ID: Visit Date: Discharge Date: Referred By: CUPP.0000080579 CUPPOPV119533 22-07-2023 08:39

SELF

Name:Mrs. Jatoth SujathaAge/Gender:30 Y/FAddress:HYDLocation:HYDERABAD, TELANGANADoctor:EDepartment:GENERALRate Plan:UPPAL\_06042023Sponsor:ARCOFEMI HEALTHCARE LIMITEDConsulting Doctor: Jr. KOPPULA TRIVENI

MR No: Visit ID: Visit Date: Discharge Date: Referred By: CUPP.0000080579 CUPPOPV119533 22-07-2023 08:39

SELF

#### HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

#### SYSTEMIC REVIEW

#### **HT-HISTORY**

#### PHYSICAL EXAMINATION

#### SYSTEMIC EXAMINATION

#### IMPRESSION

#### RECOMMENDATION

Name:Mrs. Jatoth SujathaAge/Gender:30 Y/FAddress:HYDLocation:HYDERABAD, TELANGANADoctor:EDepartment:GENERALRate Plan:UPPAL\_06042023Sponsor:ARCOFEMI HEALTHCARE LIMITEDConsulting Doctor: Jr. ARUN PHOPHALIA

#### MR No: Visit ID: Visit Date: Discharge Date: Referred By:

CUPP.0000080579 CUPPOPV119533 22-07-2023 08:39

SELF

#### HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

#### SYSTEMIC REVIEW

#### **HT-HISTORY**

#### PHYSICAL EXAMINATION

#### SYSTEMIC EXAMINATION

#### IMPRESSION

#### RECOMMENDATION

Name:Mrs. Jatoth SujathaAge/Gender:30 Y/FAddress:HYDLocation:HYDERABAD, TELANGANADoctor:EDepartment:GENERALRate Plan:UPPAL\_06042023Sponsor:ARCOFEMI HEALTHCARE LIMITEDConsulting Doctor: Jr. K SOWMYA

MR No: Visit ID: Visit Date: Discharge Date: Referred By: CUPP.0000080579 CUPPOPV119533 22-07-2023 08:39

SELF

#### HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

#### SYSTEMIC REVIEW

#### **HT-HISTORY**

#### PHYSICAL EXAMINATION

#### SYSTEMIC EXAMINATION

#### IMPRESSION

#### RECOMMENDATION

Date	Pulse (Beats/min)	Resp (Rate/min)	Temp (F)	Height (cms)	Weight (Kas)	Percentage	Fat Level	Body Age (Years)		( ircum	Hip (cms)	Waist	Waist & Hip Ratio	User
22-07-202 11:22			-	148 cms	53 Kgs	%	%	Years	24.2	cms	cms	cms		AHLL09781

Date	Pulse (Beats/min)	Resp (Rate/min)	Temp (F)	Height (cms)	Weight (Kas)	Percentage	Fat Level	Body Age (Years)		( ircum	Hip (cms)	Waist	Waist & Hip Ratio	User
22-07-202 11:22			-	148 cms	53 Kgs	%	%	Years	24.2	cms	cms	cms		AHLL09781

Date	Pulse (Beats/min)	Resp (Rate/min)	Temp (F)	Height (cms)	Weight (Kas)	Percentage	Fat Level	Body Age (Years)		( ircum	Hip (cms)	Waist	Waist & Hip Ratio	User
22-07-202 11:22			-	148 cms	53 Kgs	%	%	Years	24.2	cms	cms	cms		AHLL09781

Date	Pulse (Beats/min)	Resp (Rate/min)	Temp (F)	Height (cms)	Weight (Kas)	Percentage	Fat Level	Body Age (Years)		( ircum	Hip (cms)	Waist	Waist & Hip Ratio	User
22-07-202 11:22			-	148 cms	53 Kgs	%	%	Years	24.2	cms	cms	cms		AHLL09781

Date	Pulse (Beats/min)	Resp (Rate/min)	Temp (F)	Height (cms)	Weight (Kas)	Percentage	Fat Level	Body Age (Years)		( ircum	Hip (cms)	Waist	Waist & Hip Ratio	User
22-07-202 11:22			-	148 cms	53 Kgs	%	%	Years	24.2	cms	cms	cms		AHLL09781

Patient Name	: Mrs. Jatoth Sujatha	Age	: 30 Y/F
UHID	: CUPP.0000080579	OP Visit No	: CUPPOPV119533
Reported By:	: Dr. CH VENKATESHAM	Conducted Date	: 22-07-2023 15:40
Referred By	: SELF		

# ECG REPORT

# **Observation :-**

- 1. Normal Sinus Rhythm.
- 2. Heart rate is 74 beats per minutes.
- 3. No pathological Q wave or S-T,T changes seen.
- 4. Normal P,Q,R,S,T waves and axis.
- 5. No evidence of chamber, hypertrophy or enlargement see

**Impression:** 

NORMAL ECG

CORRELATE CLINICALLY.

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

