





Age/Gender

: 39 Y 2 M 0 D/F

UHID/MR No

: CANN.0000224412

Visit ID

: CANNOPV360933

Ref Doctor

: Dr.SELF

Emp/Auth/TPA ID : bobE40516 Collected : 08/Jul/2023 10:36AM

Received : 08/Jul/2023 02:16PM Reported

Status : Final Report

: ARCOFEMI HEALTHCARE LIMITED Sponsor Name

: 08/Jul/2023 04:30PM

#### **DEPARTMENT OF HAEMATOLOGY**

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

PERIPHERAL SMEAR, WHOLE BLOOD-EDTA

METHODOLOGY

RBC MORPHOLOGY : Predominantly normocytic normochromic RBC's noted.

WBC MORPHOLOGY : Normal in number, morphology and distribution. No abnormal cells seen.

**PLATELETS** : Adequate in number.

PARASITES : No haemoparasites seen.

**IMPRESSION** : Normocytic normochromic blood picture.

NOTE/ COMMENT : Please correlate clinically.

Page 1 of 14











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#### **DEPARTMENT OF HAEMATOLOGY**

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

HAEMOGLOBIN	12.6	g/dL	12-15	Spectrophotometer
PCV	36.90	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.14	Million/cu.mm	3.8-4.8	Electrical Impedence
MCV	89.3	fL	83-101	Calculated
MCH	30.6	pg	27-32	Calculated
MCHC	34.2	g/dL	31.5-34.5	Calculated
R.D.W	13.1	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	6,300	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (D	LC)			
NEUTROPHILS	66.8	%	40-80	Electrical Impedance
LYMPHOCYTES	23.3	%	20-40	Electrical Impedance
EOSINOPHILS	1.6	%	1-6	Electrical Impedance
MONOCYTES	7.5	%	2-10	Electrical Impedance
BASOPHILS	0.8	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	4208.4	Cells/cu.mm	2000-7000	Electrical Impedance
LYMPHOCYTES	1467.9	Cells/cu.mm	1000-3000	Electrical Impedance
EOSINOPHILS	100.8	Cells/cu.mm	20-500	Electrical Impedance
MONOCYTES	472.5	Cells/cu.mm	200-1000	Electrical Impedance
BASOPHILS	50.4	Cells/cu.mm	0-100	Electrical Impedance
PLATELET COUNT	260000	cells/cu.mm	150000-410000	Electrical impedence
ERYTHROCYTE SEDIMENTATION RATE (ESR)	49	mm at the end of 1 hour	0-20	Modified Westergre

METHODOLOGY : Microscopic.

RBC MORPHOLOGY : Predominantly normocytic normochromic RBC's noted.

WBC MORPHOLOGY : Normal in number, morphology and distribution. No abnormal cells seen.

**PLATELETS** : Adequate in number.

PARASITES : No haemoparasites seen.

Page 2 of 14









Age/Gender

: 39 Y 2 M 0 D/F

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: ARCOFEMI HEALTHCARE LIMITED

#### **DEPARTMENT OF HAEMATOLOGY**

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

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

**IMPRESSION** 

: Normocytic normochromic blood picture.

NOTE/ COMMENT

: Please correlate clinically.

Page 3 of 14





Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016

This test has been performed at Apollo Health and Lifestyle Ltd - Chennai, Diagnostics Laboratory.

Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)

Address:

Address:

SIN No:BED230158174







Age/Gender

: 39 Y 2 M 0 D/F

UHID/MR No

: CANN.0000224412

Visit ID

: CANNOPV360933

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

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Collected

: 08/Jul/2023 10:36AM

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: 08/Jul/2023 02:16PM : 08/Jul/2023 05:39PM

Reported Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

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

BLOOD GROUP TYPE	A	Microplate Hemagglutination
Rh TYPE	Positive	Microplate Hemagglutination

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Patient Name

: Mrs.HEMALATHA KARANAM

Age/Gender

: 39 Y 2 M 0 D/F

UHID/MR No

: CANN.0000224412

Visit ID

: CANNOPV360933

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

: bobE40516

Collected

: 08/Jul/2023 10:36AM

Received

: 08/Jul/2023 02:20PM : 08/Jul/2023 04:25PM

Reported Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

#### **DEPARTMENT OF BIOCHEMISTRY**

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

GLUCOSE, FASTING , NAF PLASMA	108	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	123	mg/dL	70-140	HEXOKINASE
HOURS, NAF PLASMA				

#### **Comment:**

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

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

Ref: Marks medical biochemistry and clinical approach

Page 5 of 14







Age/Gender : 39 Y 2 M 0 D/F UHID/MR No : CANN.0000224412 Visit ID : CANNOPV360933

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Received : 08/Jul/2023 02:20PM Reported : 08/Jul/2023 04:25PM

Status : Final Report

: ARCOFEMI HEALTHCARE LIMITED Sponsor Name

DEPA	RTMFNT	OF BIG	CHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324					
Test Name	Result	Unit	Bio. Ref. Range	Method	
LIDAGE OF VOATED HEMOCLOPIN	6.7	0/		LIDLC	

HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD-EDTA	6.7	%	HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD-EDTA	146	mg/dL	Calculated

# **Comment:**

Reference Range as per American Diabetes Association (ADA):

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

Note: Dietary preparation or fasting is not required.

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

Page 6 of 14





SIN No:PLF01997056,PLP1347320,EDT230062384

This test has been performed at Apollo Health and Lifestyle Ltd - Chennai, Diagnostics Laboratory.







Age/Gender

: 39 Y 2 M 0 D/F

UHID/MR No

: CANN.0000224412

Visit ID

: CANNOPV360933

Ref Doctor

: Dr.SELF

Emp/Auth/TPA ID : bobE40516 Collected : 08/Jul/2023 10:36AM

Received : 08/Jul/2023 01:27PM

Reported : 08/Jul/2023 03:49PM

: Final Report : ARCOFEMI HEALTHCARE LIMITED Sponsor Name

#### **DEPARTMENT OF BIOCHEMISTRY**

Status

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

LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	225	mg/dL	<200	CHO-POD
TRIGLYCERIDES	265	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	41	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	184	mg/dL	<130	Calculated
LDL CHOLESTEROL	131	mg/dL	<100	Calculated
VLDL CHOLESTEROL	53	mg/dL	<30	Calculated
CHOL / HDL RATIO	5.49		0-4.97	Calculated

#### **Comment:**

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

	Desirable	Borderline High	High	Very High
TOTAL CHOLESTEROL	< 200	200 - 239	≥ 240	
TRIGLYCERIDES	<150	150 - 199	200 - 499	≥ 500
	Optimal < 100 Near Optimal 100-129	130 - 159	160 - 189	≥ 190
HDL	≥ 60			
NON-HDL CHOLESTEROL	Optimal <130; Above Optimal 130-159	160-189	190-219	>220

Measurements in the same patient can show physiological and analytical variations.

NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.

Page 7 of 14











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Ref Doctor Emp/Auth/TPA ID : Dr.SELF : bobE40516 Collected

: 08/Jul/2023 10:36AM

Received

: 08/Jul/2023 01:27PM : 08/Jul/2023 03:49PM

Reported Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

# **DEPARTMENT OF BIOCHEMISTRY**

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

Test Name	Result Uni	t Bio. Ref. Range	Method
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LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.90	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.17	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.73	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	30	U/L	<35	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	30.0	U/L	<35	IFCC
ALKALINE PHOSPHATASE	71.00	U/L	30-120	IFCC
PROTEIN, TOTAL	7.50	g/dL	6.6-8.3	Biuret
ALBUMIN	4.50	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.00	g/dL	2.0-3.5	Calculated
A/G RATIO	1.5		0.9-2.0	Calculated

Page 8 of 14







Address: D No.30, F – Block 2nd Avenue, Anna Nagar East, Chennai.600 102, Phone - 044-26224504 / 05







Age/Gender

: 39 Y 2 M 0 D/F

UHID/MR No

: CANN.0000224412

Visit ID

: CANNOPV360933

Ref Doctor Emp/Auth/TPA ID

: Dr.SELF : bobE40516

Test Name

Collected : 08/Jul/2023 10:36AM

Received : 08/Jul/2023 01:27PM Reported : 08/Jul/2023 03:49PM

Status : Final Report

: ARCOFEMI HEALTHCARE LIMITED Sponsor Name

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

RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT), SERUM					
CREATININE	0.56	mg/dL	0.72 – 1.18	JAFFE METHOD	
UREA	13.00	mg/dL	17-43	GLDH, Kinetic Assay	
BLOOD UREA NITROGEN	6.1	mg/dL	8.0 - 23.0	Calculated	
URIC ACID	6.00	mg/dL	2.6-6.0	Uricase PAP	
CALCIUM	9.20	mg/dL	8.8-10.6	Arsenazo III	
PHOSPHORUS, INORGANIC	3.50	mg/dL	2.5-4.5	Phosphomolybdate Complex	
SODIUM	138	mmol/L	136–146	ISE (Indirect)	
POTASSIUM	3.5	mmol/L	3.5–5.1	ISE (Indirect)	
CHLORIDE	103	mmol/L	101–109	ISE (Indirect)	

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Age/Gender

: 39 Y 2 M 0 D/F

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: Dr.SELF Emp/Auth/TPA ID : bobE40516 Collected : 08/Jul/2023 10:36AM

Received : 08/Jul/2023 01:27PM Reported

Status : Final Report

: ARCOFEMI HEALTHCARE LIMITED Sponsor Name

: 08/Jul/2023 03:49PM

DEPARTMENT	OF BIC	CHEMISTRY
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ARCOFEMI - MEDIWHEEL - FULL BODY	HEALTH ANNUAL	PLUS CHECK -	FEMALE - 2D ECHO - F	PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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GAMMA GLUTAMYL TRANSPEPTIDASE	19.00	U/L	<38	IFCC	
(GGT), SERUM					

Page 10 of 14







SIN No:SE04417523

This test has been performed at Apollo Health and Lifestyle Ltd - Chennai, Diagnostics Laboratory.

Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)

Address:

Address:







Age/Gender

: 39 Y 2 M 0 D/F

UHID/MR No

: CANN.0000224412

Visit ID

: CANNOPV360933

Ref Doctor Emp/Auth/TPA ID : Dr.SELF : bobE40516 Collected

: 08/Jul/2023 10:36AM

Received

: 08/Jul/2023 01:25PM

Reported Status

: 08/Jul/2023 03:44PM : Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

# **DEPARTMENT OF IMMUNOLOGY**

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

THYROID PROFILE TOTAL (T3, T4, TSH), SERUM				
TRI-IODOTHYRONINE (T3, TOTAL)	1.03	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	15.59	μg/dL	6.09-12.23	CLIA
THYROID STIMULATING HORMONE (TSH)	1.615	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

Page 11 of 14







 Age/Gender
 : 39 Y 2 M 0 D/F

 UHID/MR No
 : CANN.0000224412

 Visit ID
 : CANNOPV360933

Ref Doctor : Dr.SELF Emp/Auth/TPA ID : bobE40516 Collected : 08/Jul/2023 10:36AM

Received : 08/Jul/2023 02:52PM Reported : 08/Jul/2023 04:04PM

Status : Final Report

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

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

COMPLETE URINE EXAMINATION (CUE) , URINE					
PHYSICAL EXAMINATION					
COLOUR	PALE YELLOW		PALE YELLOW	Visual	
TRANSPARENCY	CLOUDY		CLEAR	Visual	
рН	6.0		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	MODIFED EHRLICH REACTION	
BLOOD	POSITIVE		NEGATIVE	Peroxidase	
NITRITE	NEGATIVE		NEGATIVE	Diazotization	
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	LEUCOCYTE ESTERASE	
CENTRIFUGED SEDIMENT WET MOUN	T AND MICROSCOPY				
PUS CELLS	1-3	/hpf	0-5	Microscopy	
EPITHELIAL CELLS	2-4	/hpf	<10	MICROSCOPY	
RBC	6-8	/hpf	0-2	MICROSCOPY	
CASTS	ABSENT		0-2 Hyaline Cast	MICROSCOPY	
CRYSTALS	ABSENT		ABSENT	MICROSCOPY	









Age/Gender

: 39 Y 2 M 0 D/F

UHID/MR No

: CANN.0000224412

Visit ID

: CANNOPV360933

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

: bobE40516

Collected

: 08/Jul/2023 10:36AM

Received

: 08/Jul/2023 02:50PM

Reported Status

: 08/Jul/2023 05:08PM : Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT	OF CLINICAL	PATHOLOGY
	OI OLIMOAL	

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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URINE GLUCOSE(POST PRANDIAL)	NEGATIVE		NEGATIVE	Dipstick
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URINE GLUCOSE(FASTING)	NEGATIVE	NEGATIVE	Dipstick

Page 13 of 14













Age/Gender

: 39 Y 2 M 0 D/F

UHID/MR No Visit ID

: CANN.0000224412

Ref Doctor

: CANNOPV360933

Emp/Auth/TPA ID

: Dr.SELF : bobE40516 Collected

: 08/Jul/2023 01:31PM

Received

: 09/Jul/2023 10:42AM : 10/Jul/2023 02:09PM

Reported Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

#### **DEPARTMENT OF CYTOLOGY**

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

	CYTOLOGY NO.	11482/23
I	SPECIMEN	11.102.20
a	SPECIMEN ADEQUACY	ADEQUATE
b	SPECIMEN TYPE	LIQUID-BASED PREPARATION (LBC)
	SPECIMEN NATURE/SOURCE	CERVICAL SMEAR
c	ENDOCERVICAL-TRANSFORMATION ZONE	ABSENT
d	COMMENTS	SATISFACTORY FOR EVALUATION
II	MICROSCOPY	Superficial and intermediate squamous epithelial cells with benign morphology.  Inflammatory cells, predominantly neutrophils.  Negative for intraepithelial lesion/ malignancy.
II	RESULT	
a	EPITHEIAL CELL	
	SQUAMOUS CELL ABNORMALITIES	NOT SEEN
	GLANDULAR CELL ABNORMALITIES	NOT SEEN
b	ORGANISM	NIL
IV	INTERPRETATION	NEGATIVE FOR INTRAEPITHELIAL LESION OR MALIGNANCY

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

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

DR. R.SRIVATSAN M.D.(Biochemistry) M.B.B.S, M.D(Pathology) Consultant Pathologist

Dr.A. Kalyan Rao M.B.B.S,MD(Pathology) Consultant Pathologist

Page 14 of 14



This test has been performed at Apollo Health & Lifestyle Ltd, Global Reference Laboratory, Hyderabad Apollo Health and Lifestyle Limited (CIN-U85110TG2000PLC115819)

Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016

www.apollohl.com | Email ID: enquiry@apollohl.com, Ph No: 040-4904 7777, Fax No: 4904 7744







: 39 Y/F **Patient Name** : Mrs. HEMALATHA KARANAM Age/Gender : CANN.0000224412 UHID/MR No. **OP Visit No** : CANNOPV360933 Sample Collected on : : 10-07-2023 12:10 Reported on LRN# : RAD2042005 Specimen **Ref Doctor** : SELF : bobE40516 Emp/Auth/TPA ID

#### DEPARTMENT OF RADIOLOGY

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

Liver is enlarged in size (Liver span ~17cm) and shows fatty changes (Grade -I) Intra and extra hepatic biliary passages are not dilated.

Gall bladder appears normal with no evidence of calculus. Wall thickness appear normal.

Pancreas and spleen appear normal.

Spleen measures 11.3cms.

Portal and splenic veins appear normal.

No evidence of ascites or lymphadenopathy. Diaphragmatic movements are satisfactory.

There is no evidence of sub diaphragmatic pathology or pleural effusion.

Right kidney measures 11.5 x 3.4cms.

Left kidney measures 10.9 x 5.4cms.

Both kidneys show normal echopattern with no evidence of calculi or calyceal dilatation.

uterus measures 8.7 x 4.5 x 5.5cms and shows normal endometrial and myometrial echoes.

The endometrial thickness 6.2mm.

Right ovary measures  $2.4 \times 1.9 \times 2.4 \text{ cms.}$  (Volume ~6cc)

Left ovary measures  $2.6 \times 2.1 \times 2.8 \text{cms.}$  (volume ~8cc)

Both ovaries are normal in size and echotexture.



**Patient Name** 

: Mrs. HEMALATHA KARANAM

Age/Gender

: 39 Y/F

No mass lesion seen in the pelvis.

Bladder is normal in contour.

IMPRESSION:

\*HEPATOMEGALY WITH GRADE -I FATTY LIVER

DR.P.V.MITHILA MBBS MD RD (RADIOLOGIST)

UHID : CANN.0000224412 OP Visit No : CANNOPV360933
Reported By: : Dr. ARULNITHI AYYANATHAN Conducted Date : 10-07-2023 16:36

Referred By : SELF

# **ECG REPORT**

$\Delta$ 1	4 •	
Observ	Jation.	•_
	auvn	•-

- 1. Sinus Rhythm.
- 2. Heart rate is 70 beats per minutes.

**Impression:** 

LOW QRS COMPLEX.

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

Dr. ARULNITHI AYYANATHAN



UHID/MR No. Sample Collected on :

: CANN.0000224412

LRN#

: RAD2042005

**Ref Doctor** : SELF Emp/Auth/TPA ID : bobE40516 **OP Visit No** Reported on Specimen

: CANNOPV360933 : 08-07-2023 18:04

#### DEPARTMENT OF RADIOLOGY

#### X-RAY CHEST PA

Lung fields are clear.

Cardio thoracic ratio is normal.

Apices, costo and cardiophrenic angles are free.

Cardio vascular shadow and hila show no abnormal feature.

Bony thorax shows no significant abnormality.

Domes of diaphragm are well delineated.

# **IMPRESSION:**

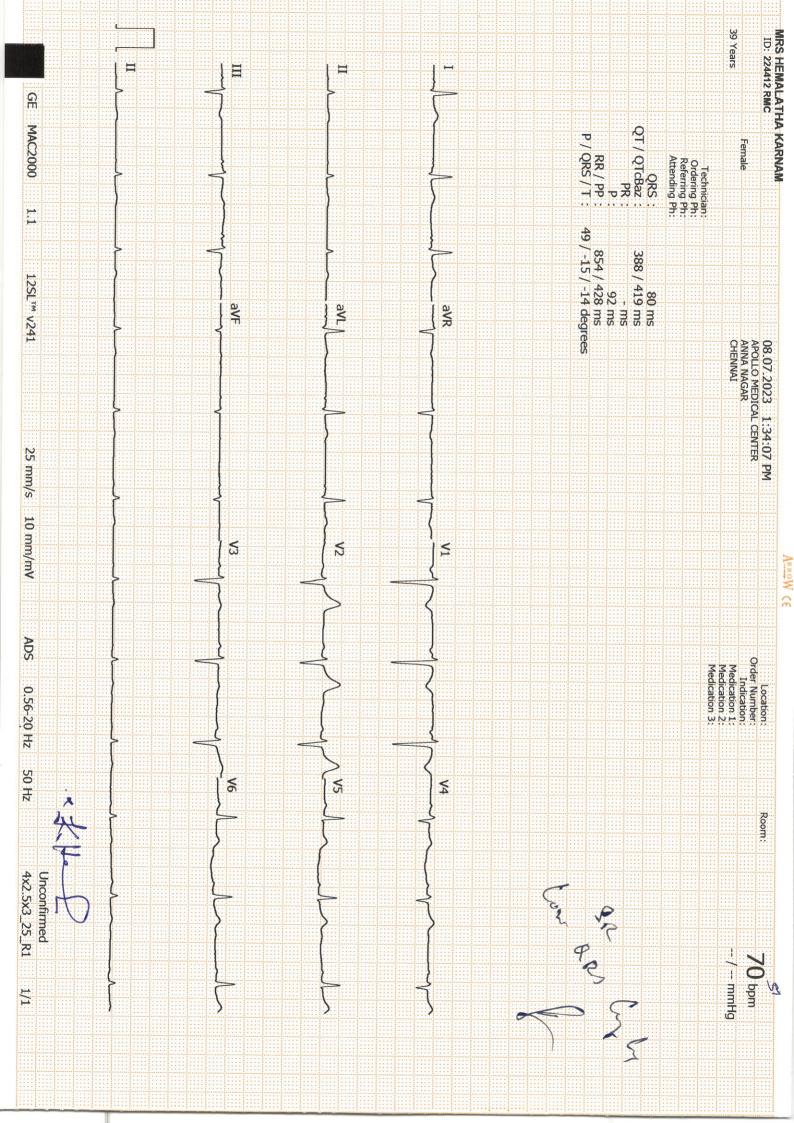
\*NO SIGNIFICANT ABNORMALITY DETECTED.

**DR.P.V.MITHILA** Mbbs Md.Rd



X.45

CANN-224412 OUR- 93616



# Dear MRS. KARANAM HEMALATHA,

Please find the confirmation for following request.

: 08-06-2023 **Booking Date** 

Arcofemi MediWheel Full Body Health Annual Plus Check Female 2D

Package Name ECHO (Metro)

Diagnostic/Hospital: Apollo Medical centre - Anna Nagar

Diagnostic/Hospital: 30, F- Block, 2nd Avenue, Anna Nagar East - 600012

: 7358392880 // 7305702537 **Contact Details** 

: Chennai

: Tamil Nadu State

City

: 600012 **Pincode** Appointment Date : 08-07-2023

Confirmation : Confirmed Status

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

: APPOINTMENT TIME 9:00AM Comment

# 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.

Request you to reach half an hour before the scheduled time.

In case of further assistance, Please reach out to Team Mediwheel.



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# ENT check of

Hemalatha Karanam 39 F 8/7/23

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

General Examination / Allergies History

No complaints

Ofe- DSR & HT

Ean | 10

or | 10

Tup: 9 Sinusitis

Adv: X-ray PNX

Follow up date:

**Doctor Signature & Stamp** 

Convenient & reliable. Complete diagnostic services for the entire family. All under one roof.



# **OPHTHALMOLOGY**



		Experiese. Closer to yo
Name: Mrs I—emalath: Occupation: Kar Age: Sex: Male Fen Address: Ph:	Ref. Physician:  Copies to:	.3. Reg. No. 2 24412
REPO	RT ON OPHTHALMIC EXAMINAT	TION
History:	xisting glass w	ser. 20 years,
Present Complaint:	mfortable with	present glasses
ON EXAMINATION:	with glass BE RE	6/6 LE
Ocular Movements :  Anterior Segment :  Intra-Ocular-Pressure :	Pull	Full
Visual Acuity: D.V. : Without Glass : With Glass : N.V. :	6/12	6/12
Visual Fields : Fundus :	N6	N6
Impression :  Advice :  Colour Vision :	Full	Pull
CONTRACTOR		V × ,













Mrs. Hendatha Karanam

39/F

08/01/23

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

**General Examination / Allergies** History

Adv fealing / Extraction

Follow up date:

**Doctor Signature & Stamp** 

K.P. Markel Kenly

Convenient & reliable. Complete diagnostic services for the entire family. All under one roof.

UHID : CANN.0000224412 OP Visit No : CANNOPV360933 Conducted By: : Dr. RAKESH P GOPAL Conducted Date : 08-07-2023 13:28

Referred By : SELF

# **2D-ECHO WITH COLOUR DOPPLER**

**Dimensions:** 

Ao (ed) 2.8 CM

LA (es) 3.0 CM

**RVID( ed)** 1.6 CM

**LVID (ed)** 4.2 CM

LVID (es) 2.6 CM

IVS (Ed) 0.6/1.1 CM

LVPW (Ed) 0.7/1.2 CM

EF 69.00%

%Fs 39.00%

MITRAL VALVE: NORMAL

AML NORMAL

PML NORMAL

AORTIC VALVE NORMAL

TRICUSPID VALVE NORMAL

RIGHT VENTRICLE NORMAL

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INTER ATRIAL SEPTUM INTACT

INTER VENTRICULAR SEPTUM INTACT

AORTA NORMAL

RIGHT ATRIUM NORMAL

LEFT ATRIUM NORMAL

Pulmonary Valve NORMAL

PERICARDIUM NORMAL

**LEFT VENTRICLE:** 

NO REGIONAL WALL MOTION ABNORMALITY

NORMAL LEFT VENTRICULAR SYSTOLIC FUNCTION

**COLOUR AND DOPPLER STUDIES** 

E/A-E: 0.7m/sec A: 0.6m/sec

**VELOCITY ACROSS THE PULMONIC VALVE 0.8m/sec** 

**VELOCITY ACROSS THE AV 1.2m/sec** 

TR VELOCITY 0.6m/sec

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# **IMPRESSION**

NORMAL CHAMBER DIMENSION
NO REGIONAL WALL MOTION ABNORMALITY
NORMAL LV SYSTOLIC FUNCTION (EF 69 %)
STRUCTURALLY VALVES ARE NORMAL
TRIVIAL MITRAL REGURGITATION
TRIVIAL TRICUSPID REGURGITATION
NO PAH / CLOT / PE

Dr. RAKESH P GOPAL

UHID : CANN.0000224412 OP Visit No : CANNOPV360933

Conducted By: : Conducted Date :

Referred By : SELF

Patient Name : Mrs. HEMALATHA KARANAM Age : 39 Y/F

UHID : CANN.0000224412 OP Visit No : CANNOPV360933

Conducted By : Conducted Date :

Referred By : SELF