


| | | |
|--|-----------|--|
| Name : Mrs. V DEEPIKA | Age: 33 Y | UHID:CBAS.0000091348 |
| Address : blr | Sex: F |  |
| Plan : ARCOFEMI MEDIWHEEL FEMALE AHC CREDIT PAN INDIA OP AGREEMENT | | OP Number:CBASOPV99564 |
| | | Bill No :CBAS-OCR-60553 |
| | | Date : 27.01.2024 09:43 |

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

→ ~~Physio~~ Vit B12

→ Dental

- Se Proloctin

Se Vit D | Se Vit B12

HT - 160

WT - 64.5

BP - 111/75

PR - 94

w.d - 82

H-P - 101

Water - 20
 Low Bvls
 5K - water
 ↓
 ↓
 ↓

Author:
Dr. Yogesh
MD, DNB
Reg No- K

Personal Details
UHD: 01P3FGAT6S90WG4
PatientID: 1245
Name: V DEEPIKA
Age: 33
Gender: Female
Mobile: 9597949994

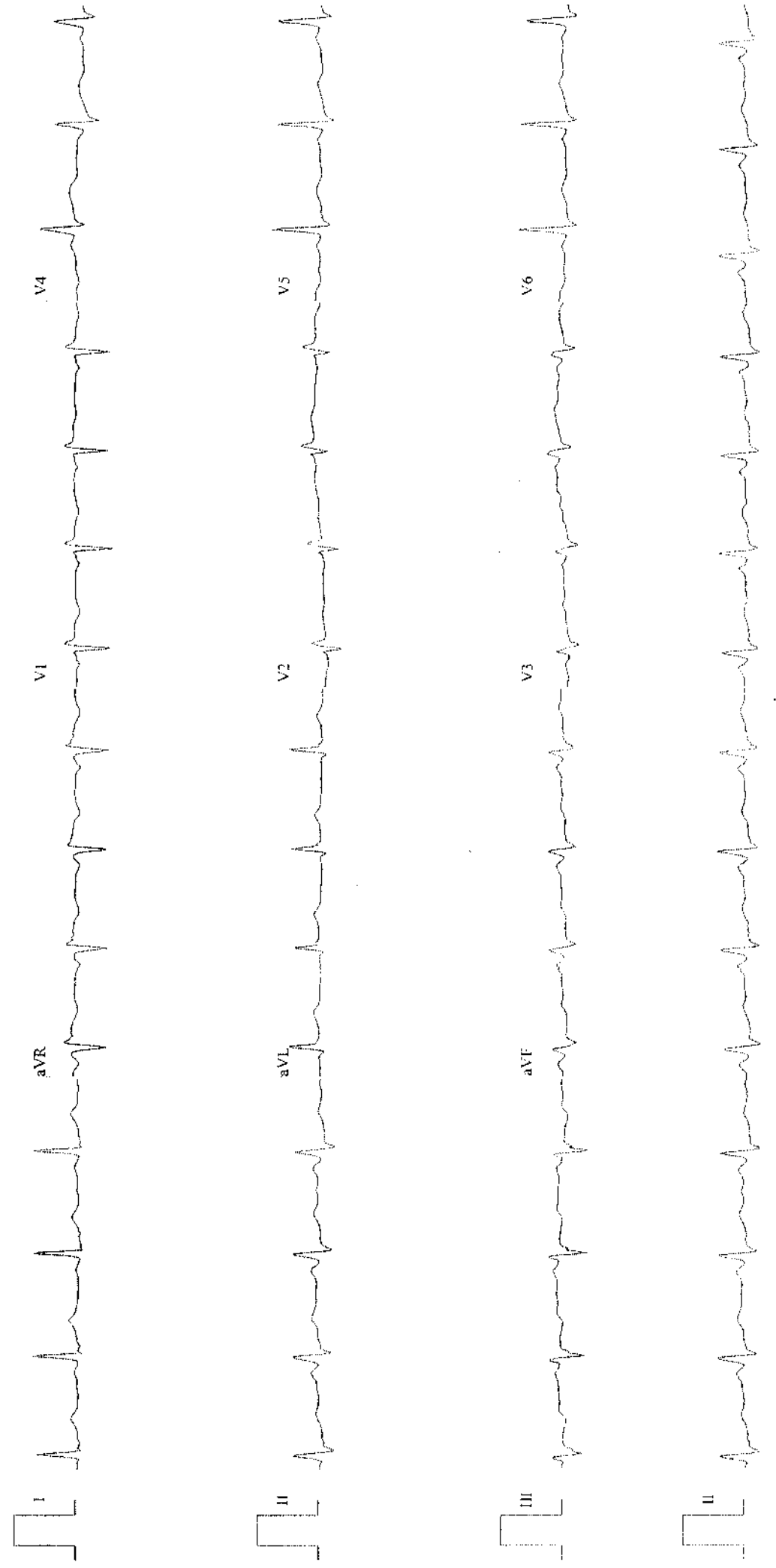
Pre-Existing Medical-Conditions
Symptoms

Vitals

Measurements
HR: 90 BPM
PR: 127 ms
PD: 111 ms
QRS: 103 ms
QT/QTc: 382/468 ms

Interpretation
Sinus Rhythm Regular
Normal Axis
prolonged QT intervals

This trace is generated by KardiaScreen: (Lead Connected, Portable, Digital, 6-12 Lead, Scalable ECG, Platform from MEDRIX)



PAP SMEAR CONSENT FORM

PATIENT NAME: D. D. P. P. P.
AGE: 33
GENDER: F
DATE: 27-1-24

MENSTRUAL AND REPRODUCTIVE HISTORY

AGE OF MENARCHE : 14
AGE OF MENOPAUSAL IF APPLICABLE :
MENSTRUAL REGULARITY : REGULAR/ IRREGULAR
FIRST DAY OF LAST MENSTRUATION PERIOD: 11-1-24
AGE AT MARRIAGE :
YEAR'S OF MARRIED LIFE : 24
CONTRACEPTION : YES() NO() IF YES WHAT KIND?
HORMONAL TREATMENT : YES() NO() IF YES WHAT KIND?
GRAVIDA (NO OF TIME'S CONCEIVED) :
PARA (NO OF CHILDBIRTH) :
LIVE (NO OF LIVING CHILDREN) :
ABORTIONS :
MISCARRIAGES/ABORTION : LA - 2019
AGE OF FIRST CHILD :
AGE OF LAST CHILD :
PREVIOUS PAP SMEAR REPORT :

sd / 30cl.
mid cycle spotting.

P2 (2A3) 74 ♀
A3 - mmm 60h
1/2 ♀
CS CS
tubercy.

SPECULUM EXAMINATION FINDINGS

EXTERNAL GENITALIA
VAGINA
CERVIX
SMEAR THAKEN FROM - ENDOCERVIX
ECTOCERVIX
POSTERIOR VAGINA

(P) - inter. menstr. bleed.
blow-ish (P)



ಭಾರತ ಸರ್ಕಾರ
Unique Identification Authority of India

ನೋಂದಾವಣೆ ಕ್ರಮ ಸಂಖ್ಯೆ / Enrolment No.: 2008/00030/31578

To
13/09/2012 ದೀಪಿಕಾ ವಿ
Deepika V
KATKIRIMANE KORGI KONATTU
KORGI POST KUNDAPURA-TALUKU Korgi
Korgi Udupi
Karnataka 576231
9611730302

2249155



MN022491553DF



ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :

8011 8108 1532

ಆಧಾರ್ - ಶ್ರೀಸಾಮಾನ್ಯನ ಅಧಿಕಾರ



ಭಾರತ ಸರ್ಕಾರ

GOVERNMENT OF INDIA



ದೀಪಿಕಾ ವಿ
Deepika V
ತಂದೆ : ವಸಂತ ಶೆಟ್ಟಿ
Father : VASANTHN SHETTY
ಹುಟ್ಟಿದ ವರ್ಷ / Year of Birth : 1990
ಸ್ತ್ರೀ / Female



8011 8108 1532

ಆಧಾರ್ - ಶ್ರೀಸಾಮಾನ್ಯನ ಅಧಿಕಾರ

Deepika V



બંક ઓફ બરોડા
Bank of Baroda

જાણકાર

Name

દીપિકા વી
Deepika V

ઈ.સ. નં.

163556

અધિકારી વર્ણવવું

Issuing Authority



ધારક કે રાખકાર

Signature of Holder

Apollo Clinic

CONSENT FORM

Patient Name: N. Deepika Age: 33y / F

UHID Number: Company Name:

I Mr/Mrs/Ms Employee of

(Company) Want to inform you that I am not interested in getting

Tests done which is a part of my routine health check package.

And I claim the above statement in my full consciousness.

General consultation
- 710n,

Patient Signature: Date: 27/01/2024

प्रति,

समन्वयक,

Mediwheel (Arcofemi Healthcare Limited)

हेल्पलाइन नंबर: 011-41195959

महोदय/ महोदया,

विषय: बैंक ऑफ़ बड़ौदा के कर्मचारियों के लिए वार्षिक स्वास्थ्य जांच।

हम आपको सूचित करना चाहते हैं कि हमारे कर्मचारी जिनका विवरण निम्नानुसार हैं हमारे करार के अनुसार आपके द्वारा उपलब्ध कराई गई कैशलेस वार्षिक स्वास्थ्य जांच सुविधा का लाभ लेना चाहते हैं।

| | कर्मचारी विवरण |
|------------------------------------|---------------------|
| नाम | MS. V DEEPIKA |
| क.कू.संख्या | 163556 |
| पदनाम | DIGI CHAMP |
| कार्य का स्थान | BIDADI |
| जन्म की तारीख | 25-12-1990 |
| स्वास्थ्य जांच की प्रस्तावित तारीख | 27-01-2024 |
| बुकिंग संदर्भ सं. | 23M163556100084564E |

यह अनुमोदन/ संस्तुति पत्र तभी वैध माना जाएगा जब इसे बैंक ऑफ़ बड़ौदा के कर्मचारी आईडी कार्ड की प्रति के साथ प्रस्तुत किया जाएगा। यह अनुमोदन पत्र दिनांक 18-01-2024 से 31-03-2024 तक मान्य है। इस पत्र के साथ किए जाने वाले चिकित्सा जांच की सूची अनुलग्नक के रूप में दी गई है। कृपया नोट करें कि उक्त स्वास्थ्य जांच हमारी टाई-अप व्यवस्था के अनुसार कैशलेस सुविधा है। हम अनुरोध करते हैं कि आप हमारे कर्मचारी के स्वास्थ्य जांच संबंधी आवश्यकताओं पर उचित कार्रवाई करें तथा इस संबंध में अपनी सर्वोच्च प्राथमिकता तथा सर्वोत्तम संसाधन उपलब्ध कराएं। उपर्युक्त सारणी में दी गई कर्मचारी कूट संख्या एवं बुकिंग संदर्भ संख्या का उल्लेख अनिवार्य रूप से इनवॉइस में किया जाना चाहिए।

हम इस संबंध में आपके सहयोग की अपेक्षा करते हैं।

भवदीय,

हस्ता/-

(मुख्य महाप्रबंधक)

मानव संसाधन प्रबंधन विभाग

बैंक ऑफ़ बड़ौदा

(नोट: यह कंप्यूटर द्वारा जनरेट किया गया पत्र है। हस्ताक्षर की आवश्यकता नहीं है। कृपया किसी भी स्पष्टीकरण के लिए Mediwheel (Arcofemi Healthcare Limited) से संपर्क करें।)

SUGGESTIVE LIST OF MEDICAL TESTS

| FOR MALE | FOR FEMALE |
|-------------------------------------|---|
| CBC | CBC |
| ESR | ESR |
| Blood Group & RH Factor | Blood Group & RH Factor |
| Blood and Urine Sugar Fasting | Blood and Urine Sugar Fasting |
| Blood and Urine Sugar PP | Blood and Urine Sugar PP |
| Stool Routine | Stool Routine |
| Lipid Profile | Lipid Profile |
| Total Cholesterol | Total Cholesterol |
| HDL | HDL |
| LDL | LDL |
| VLDL | VLDL |
| Triglycerides | Triglycerides |
| HDL / LDL ratio | HDL / LDL ratio |
| Liver Profile | Liver Profile |
| AST | AST |
| ALT | ALT |
| GGT | GGT |
| Bilirubin (total, direct, indirect) | Bilirubin (total, direct, indirect) |
| ALP | ALP |
| Proteins (T, Albumin, Globulin) | Proteins (T, Albumin, Globulin) |
| Kidney Profile | Kidney Profile |
| Serum creatinine | Serum creatinine |
| Blood Urea Nitrogen | Blood Urea Nitrogen |
| Uric Acid | Uric Acid |
| HBA1C | HBA1C |
| Routine urine analysis | Routine urine analysis |
| USG Whole Abdomen | USG Whole Abdomen |
| General Tests | General Tests |
| X Ray Chest | X Ray Chest |
| ECG | ECG |
| 2D/3D ECHO / TMT | 2D/3D ECHO / TMT |
| Stress Test | Thyroid Profile (T3, T4, TSH) |
| PSA Male (above 40 years) | Mammography (above 40 years) and Pap Smear (above 30 years). |
| Thyroid Profile (T3, T4, TSH) | Dental Check-up consultation |
| Dental Check-up consultation | Physician Consultation |
| Physician Consultation | Eye Check-up consultation |
| Eye Check-up consultation | Skin/ENT consultation |
| Skin/ENT consultation | Gynaec Consultation |

Fwd: Health Check up Booking Confirmed Request(bobE5743),Package Code-PKG10000377, Beneficiary Code-284302

Deepika Shetty <deepsshety@gmail.com>

Thu 25-Jan-24 4:28 PM

To:Byramangala, Mandya Region <VJBYRA@bankofbaroda.com>

You don't often get email from deepsshety@gmail.com. [Learn why this is important](#)

वधान: यह मेल बैंक डोमेन के बाहर से आया है. अगर आप प्रेषक को नहीं जानते तो मेल में दी गयी लिन
AUTION: THIS MAIL IS ORIGINATED FROM OUTSIDE OF THE BANK'S DOMAIN. DO NOT

----- Forwarded message -----

From: **Mediwheel** <wellness@mediwheel.in>

Date: Sat, Jan 20, 2024, 13:25

Subject: Health Check up Booking Confirmed Request(bobE5743),Package Code-PKG10000377, Beneficiary Code-284302

To: <deepsshety@gmail.com>

Cc: <customercare@mediwheel.in>

011-41195959Dear **Deepika V**,

We are pleased to confirm your health checkup booking request with the following details.

Booking Date : 18-01-2024**Hospital Package Name** : Mediwheel Full Body Health Annual Plus Check**Patient Package Name** : Mediwheel Full Body Health Checkup Female Below 40**Name of Diagnostic/Hospital** : Apollo Clinic**Address of Diagnostic/Hospital-** Apollo Clinic, # 99, Bull Temple Road , Next to Ramakrishna mutt, Basavanagudi - 560019**City** : Bangalore**State** :**Pincode** : 560019**Appointment Date** : 27-01-2024**Confirmation Status** : Booking Confirmed**Preferred Time** : 8:30am**Booking Status** : Booking Confirmed

Patient Name : Mrs. V DEEPIKA

Age/Gender : 33 Y/F

UHID/MR No. : CBAS.0000091348

OP Visit No : CBASOPV99564

Sample Collected on :

Reported on : 27-01-2024 16:07

LRN# : RAD2218242

Specimen :

Ref Doctor : SELF

Emp/Auth/TPA ID : 332893

DEPARTMENT OF RADIOLOGY

Liver: appears normal in size (13.9 cm) and appears normal in echotexture. No focal lesion is seen. Portal vein and Common Bile Duct appear normal. No dilatation is seen.

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. No focal lesion seen. Splenic vein appears normal.

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

Right kidney appear normal in size 10.2x1.4 cm, shape and echopattern. Cortical thickness and Cortico-medullary differentiation are maintained. Non obstructive right renal calculus in midpole measuring 0.2 cm.

Left kidney appear normal in size 9.5x1.4 cm, shape and echopattern. Cortical thickness and Cortico-medullary differentiation are maintained. Non obstructive left renal calculus in midpole measuring 0.3 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 wall thickening.

Uterus appears normal in size with anteverted position and measuring 8.2x4.2x5.3 cm. It shows normal shape & echopattern. Endometrial echo-complex appears normal and measures 1.3 cm.

Both ovaries appear normal in size, shape and echotexture. Right ovary measuring 3.7x2.4 cm and left ovary measuring 3.2x2.2 cm. No evidence of any adnexal pathology noted.

- No thickened or tender bowel loops. No mass lesion. No ascites / pleural effusion.

IMPRESSION:-

BILATERAL NON OBSTRUCTIVE RENAL CALCULUS.

Suggested 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.



Dr. V K PRANAV VENKATESH
MBBS,MD
Radiology

| | | | |
|----------------------------|-------------------|--------------------|--------------------|
| Patient Name | : Mrs. V DEEPIKA | Age/Gender | : 33 Y/F |
| UHID/MR No. | : CBAS.0000091348 | OP Visit No | : CBASOPV99564 |
| Sample Collected on | : | Reported on | : 27-01-2024 15:04 |
| LRN# | : RAD2218242 | Specimen | : |
| Ref Doctor | : SELF | | |
| Emp/Auth/TPA ID | : 332893 | | |

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Both lungs fields appears normal and shows normal bronchovascular markings.

Bilateral hila appears normal.

Cardiac silhouette appears normal.

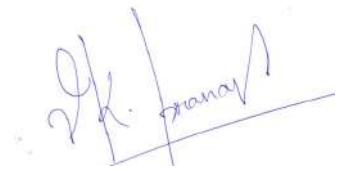
Both costophrenic and cardiophrenic angles are clear.

Both diaphragms are normal in position and contour.

Thoracic wall and soft tissues appear normal.

IMPRESSION:

No obvious abnormality seen in the present study.



Dr. V K PRANAV VENKATESH
MBBS,MD
Radiology

| | |
|------------------------------|--|
| Patient Name : Mrs.V DEEPIKA | Collected : 27/Jan/2024 10:00AM |
| Age/Gender : 33 Y 6 M 0 D/F | Received : 27/Jan/2024 12:52PM |
| UHID/MR No : CBAS.0000091348 | Reported : 27/Jan/2024 03:26PM |
| Visit ID : CBASOPV99564 | Status : Final Report |
| Ref Doctor : Dr.SELF | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 332893 | |

DEPARTMENT OF HAEMATOLOGY

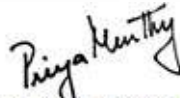
ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324

| Test Name | Result | Status | Unit | Bio. Ref. Range | Method |
|---|---------------|--------|-------------------------|-----------------|--------------------------------|
| HEMOGRAM , WHOLE BLOOD EDTA | | | | | |
| HAEMOGLOBIN | 10.9 | L | g/dL | 12-15 | Spectrophotometer |
| PCV | 32.80 | L | % | 36-46 | Electronic pulse & Calculation |
| RBC COUNT | 3.73 | L | Million/cu.mm | 3.8-4.8 | Electrical Impedence |
| MCV | 88 | L | fL | 83-101 | Calculated |
| MCH | 29.2 | L | pg | 27-32 | Calculated |
| MCHC | 33.2 | L | g/dL | 31.5-34.5 | Calculated |
| R.D.W | 13.7 | L | % | 11.6-14 | Calculated |
| TOTAL LEUCOCYTE COUNT (TLC) | 5,950 | L | cells/cu.mm | 4000-10000 | Electrical Impedence |
| DIFFERENTIAL LEUCOCYTC COUNT (DLC) | | | | | |
| NEUTROPHILS | 62.5 | L | % | 40-80 | Electrical Impedence |
| LYMPHOCYTES | 26.5 | L | % | 20-40 | Electrical Impedence |
| EOSINOPHILS | 4.2 | L | % | 1-6 | Electrical Impedence |
| MONOCYTES | 6.1 | L | % | 2-10 | Electrical Impedence |
| BASOPHILS | 0.7 | L | % | <1-2 | Electrical Impedence |
| ABSOLUTE LEUCOCYTE COUNT | | | | | |
| NEUTROPHILS | 3718.75 | L | Cells/cu.mm | 2000-7000 | Calculated |
| LYMPHOCYTES | 1576.75 | L | Cells/cu.mm | 1000-3000 | Calculated |
| EOSINOPHILS | 249.9 | L | Cells/cu.mm | 20-500 | Calculated |
| MONOCYTES | 362.95 | L | Cells/cu.mm | 200-1000 | Calculated |
| BASOPHILS | 41.65 | L | Cells/cu.mm | 0-100 | Calculated |
| PLATELET COUNT | 216000 | L | cells/cu.mm | 150000-410000 | Electrical impedence |
| ERYTHROCYTE SEDIMENTATION RATE (ESR) | 25 | H | mm at the end of 1 hour | 0-20 | Modified Westegren method |
| PERIPHERAL SMEAR | | L | | | |

Page 1 of 18



Dr. Shobha Emmanuel
M.B.B.S, M.D (Pathology)
Consultant Pathologist



Dr. Priya Murthy
M.B.B.S, M.D (Pathology)
Consultant Pathologist



SIN No: BED240019897

THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFESTYLE LIMITED- RRL BANGALORE

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

APOLLO CLINICS NETWORK

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:
323/100/123, Doddathangur Village, Neeladri Main Road,
Neeladri Nagar, Electronic city, Bengaluru,
Karnataka - 560034

 1860 500 7788
www.apolloclinic.com

| | |
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| Emp/Auth/TPA ID : 332893 | |

DEPARTMENT OF HAEMATOLOGY

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

RBCs: are normocytic normochromic

WBCs: are normal in total number with normal distribution and morphology.

PLATELETS: appear adequate in number.

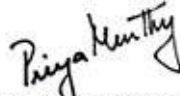
HEMOPARASITES: negative

IMPRESSION: NORMOCYTIC NORMOCHROMIC ANEMIA.

Kindly correlate clinically.



Dr. Shobha Emmanuel
M.B.B.S, M.D (Pathology)
Consultant Pathologist



Dr. Priya Murthy
M.B.B.S, M.D (Pathology)
Consultant Pathologist



SIN No: BED240019897

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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

APOLLO CLINICS NETWORK

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:
323/100/123, Doddathangur Village, Neeladri Main Road,
Neeladri Nagar, Electronic city, Bengaluru,
Karnataka - 560034

 **1860 500 7788**
www.apolloclinic.com

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| Patient Name : Mrs.V DEEPIKA | Collected : 27/Jan/2024 10:00AM |
| Age/Gender : 33 Y 6 M 0 D/F | Received : 27/Jan/2024 12:52PM |
| UHID/MR No : CBAS.0000091348 | Reported : 27/Jan/2024 04:47PM |
| Visit ID : CBASOPV99564 | Status : Final Report |
| Ref Doctor : Dr.SELF | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 332893 | |

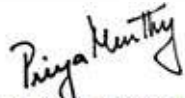
DEPARTMENT OF HAEMATOLOGY

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

| Test Name | Result | Status | Unit | Bio. Ref. Range | Method |
|---|----------|--------|------|-----------------|-----------------------------|
| BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA | | | | | |
| BLOOD GROUP TYPE | B | N | | | Microplate Hemagglutination |
| Rh TYPE | Positive | N | | | Microplate Hemagglutination |



Dr. Shobha Emmanuel
M.B.B.S, M.D (Pathology)
Consultant Pathologist



Dr. Priya Murthy
M.B.B.S, M.D (Pathology)
Consultant Pathologist



SIN No: BED240019897

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|------------------------------|--|
| Patient Name : Mrs.V DEEPIKA | Collected : 27/Jan/2024 10:00AM |
| Age/Gender : 33 Y 6 M 0 D/F | Received : 27/Jan/2024 01:24PM |
| UHID/MR No : CBAS.0000091348 | Reported : 27/Jan/2024 03:34PM |
| Visit ID : CBASOPV99564 | Status : Final Report |
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DEPARTMENT OF BIOCHEMISTRY

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

| Test Name | Result | Status | Unit | Bio. Ref. Range | Method |
|-------------------------------|--------|--------|-------|-----------------|------------|
| GLUCOSE, FASTING , NAF PLASMA | 88 | L | mg/dL | 70-100 | HEXOKINASE |

Comment:

As per American Diabetes Guidelines, 2023

| Fasting Glucose Values in mg/dL | Interpretation |
|---------------------------------|----------------|
| 70-100 mg/dL | Normal |
| 100-125 mg/dL | Prediabetes |
| ≥126 mg/dL | Diabetes |
| <70 mg/dL | Hypoglycemia |

Note:

- The diagnosis of Diabetes requires a fasting plasma glucose of > or = 126 mg/dL and/or a random / 2 hr post glucose value of > or = 200 mg/dL on at least 2 occasions.
- Very high glucose levels (>450 mg/dL in adults) may result in Diabetic Ketoacidosis & is considered critical.

| Test Name | Result | Status | Unit | Bio. Ref. Range | Method |
|--|--------|--------|-------|-----------------|------------|
| GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR) | 115 | L | 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.

| Test Name | Result | Status | Unit | Bio. Ref. Range | Method |
|--|--------|--------|------|-----------------|--------|
| HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA | | | | | |



DR.SHIVARAJA SHETTY
M.B.B.S,M.D(Biochemistry)
CONSULTANT BIOCHEMIST

SIN No:EDT240008508



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

| | | | | |
|---------------------------------|-----|---|-------|------------|
| HBA1C, GLYCATED HEMOGLOBIN | 5.6 | L | % | HPLC |
| ESTIMATED AVERAGE GLUCOSE (eAG) | 114 | N | mg/dL | Calculated |

Comment:


Reference Range as per American Diabetes Association (ADA) 2023 Guidelines:

| REFERENCE GROUP | HBA1C % |
|------------------------|-----------|
| NON DIABETIC | <5.7 |
| PREDIABETES | 5.7 – 6.4 |
| DIABETES | ≥ 6.5 |
| DIABETICS | |
| EXCELLENT CONTROL | 6 – 7 |
| FAIR TO GOOD CONTROL | 7 – 8 |
| UNSATISFACTORY CONTROL | 8 – 10 |
| POOR CONTROL | >10 |

Note: Dietary preparation or fasting is not required.

- HbA1C is recommended by American Diabetes Association for Diagnosing Diabetes and monitoring Glycemic Control by American Diabetes Association guidelines 2023.
- Trends in HbA1C values is a better indicator of Glycemic control than a single test.
- Low HbA1C in Non-Diabetic patients are associated with Anemia (Iron Deficiency/Hemolytic), Liver Disorders, Chronic Kidney Disease. Clinical Correlation is advised in interpretation of low Values.
- Falsely low HbA1c (below 4%) may be observed in patients with clinical conditions that shorten erythrocyte life span or decrease mean erythrocyte age. HbA1c may not accurately reflect glycemic control when clinical conditions that affect erythrocyte survival are present.
- In cases of Interference of Hemoglobin variants in HbA1C, alternative methods (Fructosamine) estimation is recommended for Glycemic Control
 - A: HbF >25%
 - B: Homozygous Hemoglobinopathy.
 (Hb Electrophoresis is recommended method for detection of Hemoglobinopathy)




DR.SHIVARAJA SHETTY
 M.B.B.S,M.D(Biochemistry)
 CONSULTANT BIOCHEMIST

SIN No:EDT240008508

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

| Test Name | Result | Status | Unit | Bio. Ref. Range | Method |
|------------------------------|--------|--------|-------|-----------------|----------------------------|
| LIPID PROFILE , SERUM | | | | | |
| TOTAL CHOLESTEROL | 206 | H | mg/dL | <200 | CHO-POD |
| TRIGLYCERIDES | 71 | L | mg/dL | <150 | GPO-POD |
| HDL CHOLESTEROL | 66 | H | mg/dL | 40-60 | Enzymatic Immunoinhibition |
| NON-HDL CHOLESTEROL | 140 | H | mg/dL | <130 | Calculated |
| LDL CHOLESTEROL | 126 | H | mg/dL | <100 | Calculated |
| VLDL CHOLESTEROL | 14.2 | L | mg/dL | <30 | Calculated |
| CHOL / HDL RATIO | 3.12 | L | | 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 on different days can show physiological and analytical variations.
- NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.
- Primary prevention algorithm now includes absolute risk estimation and lower LDL Cholesterol target levels to determine eligibility of drug therapy.
- Low HDL levels are associated with Coronary Heart Disease due to insufficient HDL being available to participate in reverse cholesterol transport, the process by which cholesterol is eliminated from peripheral tissues.
- As per NCEP guidelines, all adults above the age of 20 years should be screened for lipid status. Selective screening of children above the age of 2 years with a family history of premature cardiovascular disease or those with at least one parent with high total cholesterol is recommended.
- VLDL, LDL Cholesterol Non HDL Cholesterol, CHOL/HDL RATIO, LDL/HDL RATIO are calculated parameters when Triglycerides are below 350mg/dl. When Triglycerides are more than 350 mg/dl LDL cholesterol is a direct measurement.



DR.SHIVARAJA SHETTY
M.B.B.S,M.D(Biochemistry)
CONSULTANT BIOCHEMIST

SIN No:SE04610972



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| Visit ID : CBASOPV99564 | Status : Final Report |
| Ref Doctor : Dr.SELF | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 332893 | |

DEPARTMENT OF BIOCHEMISTRY

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| Test Name | Result | Status | Unit | Bio. Ref. Range | Method |
|--|--------|--------|-------|-----------------|--------------------|
| LIVER FUNCTION TEST (LFT) , SERUM | | | | | |
| BILIRUBIN, TOTAL | 0.74 | L | mg/dL | 0.3-1.2 | DPD |
| BILIRUBIN CONJUGATED (DIRECT) | 0.10 | L | mg/dL | <0.2 | DPD |
| BILIRUBIN (INDIRECT) | 0.64 | L | mg/dL | 0.0-1.1 | Dual Wavelength |
| ALANINE AMINOTRANSFERASE (ALT/SGPT) | 12 | L | U/L | <35 | IFCC |
| ASPARTATE AMINOTRANSFERASE (AST/SGOT) | 17.0 | L | U/L | <35 | IFCC |
| ALKALINE PHOSPHATASE | 92.00 | L | U/L | 30-120 | IFCC |
| PROTEIN, TOTAL | 6.92 | L | g/dL | 6.6-8.3 | Biuret |
| ALBUMIN | 4.38 | L | g/dL | 3.5-5.2 | BROMO CRESOL GREEN |
| GLOBULIN | 2.54 | L | g/dL | 2.0-3.5 | Calculated |
| A/G RATIO | 1.72 | L | | 0.9-2.0 | Calculated |

Comment:

LFT results reflect different aspects of the health of the liver, i.e., hepatocyte integrity (AST & ALT), synthesis and secretion of bile (Bilirubin, ALP), cholestasis (ALP, GGT), protein synthesis (Albumin)

Common patterns seen:

1. Hepatocellular Injury:

- AST – Elevated levels can be seen. However, it is not specific to liver and can be raised in cardiac and skeletal injuries.
- ALT – Elevated levels indicate hepatocellular damage. It is considered to be most specific lab test for hepatocellular injury. Values also correlate well with increasing BMI.
- Disproportionate increase in AST, ALT compared with ALP. • Bilirubin may be elevated.
- AST: ALT (ratio) – In case of hepatocellular injury AST: ALT > 1 In Alcoholic Liver Disease AST: ALT usually >2. This ratio is also seen to be increased in NAFLD, Wilson's's diseases, Cirrhosis, but the increase is usually not >2.

2. Cholestatic Pattern:

- ALP – Disproportionate increase in ALP compared with AST, ALT.
- Bilirubin may be elevated. • ALP elevation also seen in pregnancy, impacted by age and sex.



DR.SHIVARAJA SHETTY
M.B.B.S,M.D(Biochemistry)
CONSULTANT BIOCHEMIST

SIN No:SE04610972



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- To establish the hepatic origin correlation with GGT helps. If GGT elevated indicates hepatic cause of increased ALP.
- 3. **Synthetic function impairment:**
- Albumin- Liver disease reduces albumin levels. • Correlation with PT (Prothrombin Time) helps.



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| Test Name | Result | Status | Unit | Bio. Ref. Range | Method |
|---|--------------|--------|--------|-----------------|--------------------------|
| RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM | | | | | |
| CREATININE | 0.55 | L | mg/dL | 0.51-0.95 | Jaffe's, Method |
| UREA | 16.20 | L | mg/dL | 17-43 | GLDH, Kinetic Assay |
| BLOOD UREA NITROGEN | 7.6 | L | mg/dL | 8.0 - 23.0 | Calculated |
| URIC ACID | 4.61 | L | mg/dL | 2.6-6.0 | Uricase PAP |
| CALCIUM | 8.90 | L | mg/dL | 8.8-10.6 | Arsenazo III |
| PHOSPHORUS, INORGANIC | 3.40 | L | mg/dL | 2.5-4.5 | Phosphomolybdate Complex |
| SODIUM | 140 | L | mmol/L | 136-146 | ISE (Indirect) |
| POTASSIUM | 4.1 | L | mmol/L | 3.5-5.1 | ISE (Indirect) |
| CHLORIDE | 105 | L | mmol/L | 101-109 | ISE (Indirect) |



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| Age/Gender : 33 Y 6 M 0 D/F | Received : 27/Jan/2024 12:57PM |
| UHID/MR No : CBAS.0000091348 | Reported : 27/Jan/2024 03:46PM |
| Visit ID : CBASOPV99564 | Status : Final Report |
| Ref Doctor : Dr.SELF | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 332893 | |

DEPARTMENT OF BIOCHEMISTRY

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

| Test Name | Result | Status | Unit | Bio. Ref. Range | Method |
|--|--------|--------|------|-----------------|--------|
| GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , <i>SERUM</i> | 18.00 | L | U/L | <38 | IFCC |



DR.SHIVARAJA SHETTY
M.B.B.S,M.D(Biochemistry)
CONSULTANT BIOCHEMIST

SIN No:SE04610972



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APOLLO CLINICS NETWORK

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| | |
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DEPARTMENT OF IMMUNOLOGY

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

| Test Name | Result | Status | Unit | Bio. Ref. Range | Method |
|--|--------|--------|--------|-----------------|--------|
| THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM | | | | | |
| TRI-iodothyronine (T3, TOTAL) | 1 | L | ng/mL | 0.7-2.04 | CLIA |
| THYROXINE (T4, TOTAL) | 9.34 | L | µg/dL | 5.48-14.28 | CLIA |
| THYROID STIMULATING HORMONE (TSH) | 1.850 | L | µIU/mL | 0.34-5.60 | CLIA |

Comment:

| 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 |

1. TSH is a glycoprotein hormone secreted by the anterior pituitary. TSH activates production of T3 (Triiodothyronine) and its prohormone T4 (Thyroxine). Increased blood level of T3 and T4 inhibit production of TSH.
2. TSH is elevated in primary hypothyroidism and will be low in primary hyperthyroidism. Elevated or low TSH in the context of normal free thyroxine is often referred to as sub-clinical hypo- or hyperthyroidism respectively.
3. Both T4 & T3 provides limited clinical information as both are highly bound to proteins in circulation and reflects mostly inactive hormone. Only a very small fraction of circulating hormone is free and biologically active.
4. Significant variations in TSH can occur with circadian rhythm, hormonal status, stress, sleep deprivation, medication & circulating antibodies.

| TSH | T3 | T4 | FT4 | Conditions |
|-------|------|------|------|---|
| High | Low | Low | Low | Primary Hypothyroidism, Post Thyroidectomy, Chronic Autoimmune Thyroiditis |
| High | N | N | N | Subclinical Hypothyroidism, Autoimmune Thyroiditis, Insufficient Hormone Replacement Therapy. |
| N/Low | Low | Low | Low | Secondary and Tertiary Hypothyroidism |
| Low | High | High | High | Primary Hyperthyroidism, Goitre, Thyroiditis, Drug effects, Early Pregnancy |
| Low | N | N | N | Subclinical Hyperthyroidism |
| Low | Low | Low | Low | Central Hypothyroidism, Treatment with Hyperthyroidism |
| Low | N | High | High | Thyroiditis, Interfering Antibodies |



DR.SHIVARAJA SHETTY
M.B.B.S,M.D(Biochemistry)
CONSULTANT BIOCHEMIST

SIN No:SPL24013114



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DEPARTMENT OF IMMUNOLOGY

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

| | | | | |
|-------|------|------|------|--|
| N/Low | High | N | N | T3 Thyrotoxicosis, Non thyroidal causes |
| High | High | High | High | Pituitary Adenoma; TSHoma/Thyrotropinoma |



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| Emp/Auth/TPA ID : 332893 | |

DEPARTMENT OF CLINICAL PATHOLOGY

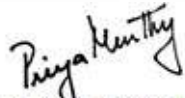
ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324

| Test Name | Result | Status | Unit | Bio. Ref. Range | Method |
|--|-------------|--------|------|------------------|----------------------------|
| COMPLETE URINE EXAMINATION (CUE) , URINE | | | | | |
| PHYSICAL EXAMINATION | | | | | |
| COLOUR | PALE YELLOW | N | | PALE YELLOW | Visual |
| TRANSPARENCY | CLEAR | N | | CLEAR | Visual |
| pH | 6.5 | L | | 5-7.5 | DOUBLE INDICATOR |
| SP. GRAVITY | 1.010 | L | | 1.002-1.030 | Bromothymol Blue |
| BIOCHEMICAL EXAMINATION | | | | | |
| URINE PROTEIN | NEGATIVE | N | | NEGATIVE | PROTEIN ERROR OF INDICATOR |
| GLUCOSE | NEGATIVE | N | | NEGATIVE | GLUCOSE OXIDASE |
| URINE BILIRUBIN | NEGATIVE | N | | NEGATIVE | AZO COUPLING REACTION |
| URINE KETONES (RANDOM) | NEGATIVE | N | | NEGATIVE | SODIUM NITRO PRUSSIDE |
| UROBILINOGEN | NORMAL | N | | NORMAL | MODIFIED EHRlich REACTION |
| BLOOD | NEGATIVE | N | | NEGATIVE | Peroxidase |
| NITRITE | NEGATIVE | N | | NEGATIVE | Diazotization |
| LEUCOCYTE ESTERASE | NEGATIVE | N | | NEGATIVE | LEUCOCYTE ESTERASE |
| CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY | | | | | |
| PUS CELLS | 1-2 | L | /hpf | 0-5 | Microscopy |
| EPITHELIAL CELLS | 2-3 | N | /hpf | <10 | MICROSCOPY |
| RBC | NIL | N | /hpf | 0-2 | MICROSCOPY |
| CASTS | NIL | L | | 0-2 Hyaline Cast | MICROSCOPY |
| CRYSTALS | ABSENT | N | | ABSENT | MICROSCOPY |

Page 14 of 18



Dr. Shobha Emmanuel
M.B.B.S, M.D (Pathology)
Consultant Pathologist



Dr. Priya Murthy
M.B.B.S, M.D (Pathology)
Consultant Pathologist



SIN No: UR2269474

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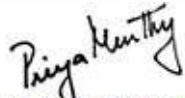
| | |
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| Patient Name : Mrs.V DEEPIKA | Collected : 27/Jan/2024 09:59AM |
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DEPARTMENT OF CLINICAL PATHOLOGY

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



Dr. Shobha Emmanuel
M.B.B.S, M.D (Pathology)
Consultant Pathologist



Dr. Priya Murthy
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DEPARTMENT OF CLINICAL PATHOLOGY

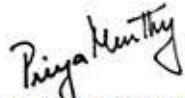
ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324

| Test Name | Result | Status | Unit | Bio. Ref. Range | Method |
|------------------------------|----------|--------|------|-----------------|----------|
| URINE GLUCOSE(POST PRANDIAL) | NEGATIVE | N | | NEGATIVE | Dipstick |

| Test Name | Result | Status | Unit | Bio. Ref. Range | Method |
|------------------------|----------|--------|------|-----------------|----------|
| URINE GLUCOSE(FASTING) | NEGATIVE | N | | NEGATIVE | Dipstick |



Dr. Shobha Emmanuel
M.B.B.S, M.D (Pathology)
Consultant Pathologist



Dr. Priya Murthy
M.B.B.S, M.D (Pathology)
Consultant Pathologist



SIN No: UF010368

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| | |
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| Emp/Auth/TPA ID : 332893 | |

DEPARTMENT OF CYTOLOGY

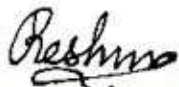
LBC PAP TEST (PAPSURE) , CERVICAL BRUSH SAMPLE

| | | |
|------------|----------------------------------|--|
| | CYTOLOGY NO. | 1674/24 |
| I | SPECIMEN | |
| a | SPECIMEN ADEQUACY | ADEQUATE |
| b | SPECIMEN TYPE | LIQUID-BASED PREPARATION (LBC) |
| | SPECIMEN NATURE/SOURCE | CERVICAL SMEAR |
| c | ENDOCERVICAL-TRANSFORMATION ZONE | ABSENT |
| d | COMMENTS | SATISFACTORY FOR EVALUATION |
| II | MICROSCOPY | Superficial and intermediate squamous epithelial cells with benign morphology. Negative for intraepithelial lesion/ malignancy. |
| III | RESULT | |
| a | EPITHELIAL 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. Reshma Stanly
M.B.B.S, DNB(Pathology)
Consultant Pathologist

SIN No:CS073529

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

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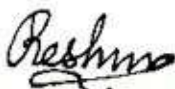
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| | | | |
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DEPARTMENT OF CYTOLOGY



Dr. Reshma Stanly
M.B.B.S, DNB(Pathology)
Consultant Pathologist

SIN No: CS073529

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