

Patient Name : Mrs.G SANDHYA RANI	Collected : 24/Jun/2023 08:39AM
Age/Gender : 30 Y 3 M 20 D/F	Received : 24/Jun/2023 12:11PM
UHID/MR No : CVIS.0000117199	Reported : 24/Jun/2023 03:51PM
Visit ID : CVISOPV111714	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9398096168	

DEPARTMENT OF HAEMATOLOGY

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

PERIPHERAL SMEAR , WHOLE BLOOD-EDTA

RBCs ARE NORMOCYTIC NORMOCHROMIC.
TLC , DLC WITHIN NORMAL LIMIT. NO IMMATURE CELLS ARE SEEN.
PLATELETS ARE ADEQUATE.
NO HEMOPARASITES SEEN

SIN No:BED230144905

This test has been performed at Apollo Health and Lifestyle Ltd/Vizag Lab : Vizag-530017

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

GSTIN: 37AADCA0733E1Z6

Address: 50-81-1/2, Plot no. 5, Seethammapeta,
Visakhapatnam, Andhra Pradesh



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)

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Test Name	Result	Unit	Bio. Ref. Range	Method
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HEMOGRAM , WHOLE BLOOD-EDTA

HAEMOGLOBIN	13.4	g/dL	12-15	Spectrophotometer
PCV	38.10	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.40	Million/cu.mm	3.8-4.8	Electrical Impedence
MCV	83	fL	83-101	Calculated
MCH	27.9	pg	27-32	Calculated
MCHC	32.2	g/dL	31.5-34.5	Calculated
R.D.W	14.7	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	8,600	cells/cu.mm	4000-10000	Electrical Impedence

DIFFERENTIAL LEUCOCYtic COUNT (DLC)

NEUTROPHILS	65.7	%	40-80	Electrical Impedence
LYMPHOCYTES	26.5	%	20-40	Electrical Impedence
EOSINOPHILS	2.6	%	1-6	Electrical Impedence
MONOCYTES	5.2	%	2-10	Electrical Impedence
BASOPHILS	0	%	<1-2	Electrical Impedence

ABSOLUTE LEUCOCYTE COUNT

NEUTROPHILS	5650.2	Cells/cu.mm	2000-7000	Electrical Impedence
LYMPHOCYTES	2279	Cells/cu.mm	1000-3000	Electrical Impedence
EOSINOPHILS	223.6	Cells/cu.mm	20-500	Electrical Impedence
MONOCYTES	447.2	Cells/cu.mm	200-1000	Electrical Impedence

PLATELET COUNT	258000	cells/cu.mm	150000-410000	Electrical impedence
ERYTHROCYTE SEDIMENTATION RATE (ESR)	10	mm at the end of 1 hour	0-20	Modified Westergren

PERIPHERAL SMEAR				
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BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD-EDTA				
BLOOD GROUP TYPE	AB			Forward & Reverse Grouping with Slide/Tube Aggluti
Rh TYPE	POSITIVE			Forward & Reverse Grouping with Slide/Tube Agglutination

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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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GLUCOSE, FASTING , NAF PLASMA	98	mg/dL	70-100	GOD - POD
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Comment:

As per American Diabetes Guidelines

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

GLUCOSE, POST PRANDIAL (PP), 2 HOURS , NAF PLASMA	149	mg/dL	70-140	GOD - POD
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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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Test Name	Result	Unit	Bio. Ref. Range	Method
HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD-EDTA	5.8	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD-EDTA	120	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.

- A1C test should be performed at least two times a year in patients who are meeting treatment goals (and who have stable glycemic control).
- 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.
- 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



SIN No:PLF01989653,PLP1342147,EDT230057672

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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LIPID PROFILE , SERUM

TOTAL CHOLESTEROL	213	mg/dL	<200	CHE/CHO/POD
TRIGLYCERIDES	218	mg/dL	<150	Enzymatic
HDL CHOLESTEROL	43	mg/dL	>40	CHE/CHO/POD
NON-HDL CHOLESTEROL	170	mg/dL	<130	Calculated
LDL CHOLESTEROL	126.4	mg/dL	<100	Calculated
VLDL CHOLESTEROL	43.6	mg/dL	<30	Calculated
CHOL / HDL RATIO	4.95		0-4.97	Calculated

Comment:

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

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

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

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



SIN No:SE04404066

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Test Name	Result	Unit	Bio. Ref. Range	Method
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LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.70	mg/dL	0.20-1.20	DIAZO METHOD
BILIRUBIN CONJUGATED (DIRECT)	0.10	mg/dL	0.0-0.3	Calculated
BILIRUBIN (INDIRECT)	0.60	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	203	U/L	<35	Visible with P-5-P
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	166.0	U/L	14-36	UV with P-5-P
ALKALINE PHOSPHATASE	78.00	U/L	38-126	p-nitrophenyl phosphate
PROTEIN, TOTAL	8.20	g/dL	6.3-8.2	Biuret
ALBUMIN	4.40	g/dL	3.5 - 5	Bromocresol Green
GLOBULIN	3.80	g/dL	2.0-3.5	Calculated
A/G RATIO	1.16		0.9-2.0	Calculated

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Test Name	Result	Unit	Bio. Ref. Range	Method
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RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM

CREATININE	0.50	mg/dL	0.5-1.04	Creatinine amidohydrolase
UREA	16.60	mg/dL	15-36	Urease
BLOOD UREA NITROGEN	7.8	mg/dL	8.0 - 23.0	Calculated
URIC ACID	5.10	mg/dL	2.5-6.2	Uricase
CALCIUM	9.10	mg/dL	8.4 - 10.2	Arsenazo-III
PHOSPHORUS, INORGANIC	3.50	mg/dL	2.5-4.5	PMA Phenol
SODIUM	139	mmol/L	135-145	Direct ISE
POTASSIUM	4.6	mmol/L	3.5-5.1	Direct ISE
CHLORIDE	102	mmol/L	98 - 107	Direct ISE

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Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	90.00	U/L	12-43	Glycylcysteine Nitoranalide

SIN No:SE04404066

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DEPARTMENT OF IMMUNOLOGY

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Test Name	Result	Unit	Bio. Ref. Range	Method
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THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM

TRI-IODOTHYRONINE (T3, TOTAL)	1.82	ng/ml	0.69-2.15	CLIA
THYROXINE (T4, TOTAL)	102.00	ng/ml	52-127	CLIA
THYROID STIMULATING HORMONE (TSH)	1.750	µIU/mL	0.3-4.5	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

SIN No: SPL23091154

This test has been performed at Apollo Health and Lifestyle Ltd/Vizag Lab : Vizag-530017



Patient Name : Mrs.G SANDHYA RANI	Collected : 24/Jun/2023 08:39AM
Age/Gender : 30 Y 3 M 20 D/F	Received : 24/Jun/2023 12:59PM
UHID/MR No : CVIS.0000117199	Reported : 24/Jun/2023 01:19PM
Visit ID : CVISOPV111714	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9398096168	

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

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

Result/s to Follow:

LBC PAP TEST (PAPSURE), COMPLETE URINE EXAMINATION (CUE)



DR. V. SNEHAL
M.D (PATH)
Consultant Pathologist



Patient Name : Mrs. G Sandhya Rani

Age/Gender : 30 Y/F

UHID/MR No. : CVIS.0000117199

OP Visit No : CVISOPV111714

Sample Collected on :

Reported on : 24-06-2023 15:10

LRN# : RAD2029725

Specimen :

Ref Doctor : SELF

Emp/Auth/TPA ID : 9398096168

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Both lung fields and hila are normal .

No obvious active pleuro-parenchymal lesion seen .

Both costophrenic and cardiophrenic angles are clear .

Both diaphragms are normal in position and contour .

Thoracic wall and soft tissues appear normal.

CONCLUSION :

No obvious abnormality seen.



Dr. ARUNA PEBBILI
DMRD Radiology
Radiology

Patient Name	: Mrs. G Sandhya Rani	Age/Gender	: 30 Y/F
UHID/MR No.	: CVIS.0000117199	OP Visit No	: CVISOPV111714
Sample Collected on	:	Reported on	: 24-06-2023 14:54
LRN#	: RAD2029725	Specimen	:
Ref Doctor	: SELF		
Emp/Auth/TPA ID	: 9398096168		

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

Liver appears normal in size and increased in 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. 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 : 9.6 x 4.3 cm

Left kidney : 10.2 x 4.2 cm

Urinary Bladder : Minimally distended.

Uterus appears normal in size. It shows normal shape and echo pattern. It measures 7.3 x 4.2 x 4.2 cm. Endometrial echo-complex appears normal and measures 6.7 mm. No intra/extra uterine gestational sac seen.

Both ovaries:

Right ovary : 2.9 x 2 cm appear normal in size, shape and echotexture.

Left ovary : 5.3 x 3.5 cm and 2.9 x 2.6 cm measuring cystic lesion with fine internal septations seen in left ovary.

There is no evidence of ascites/ pleural effusion seen.

IMPRESSION:-

***LEFT COMPLEX OVARIAN CYST.**

-POSSIBLE HEMORRHAGIC CYST.

Patient Name : Mrs. G Sandhya Rani

Age/Gender : 30 Y/F

***FATTY INFILTRATION OF LIVER.**

**For clinico-lab correlation / follow - up / further work up.
This is only a screening test.**



Dr. ARUNA PEBBILI
DMRD Radiology
Radiology

Name: Mrs. G Sandhya Rani
Age/Gender: 30 Y/F
Address: vskp
Location: VISAKHAPATNAM, ANDHRA PRADESH
Doctor:
Department: LABORATORY
Rate Plan: VISHAKAPATNAM_06042023
Sponsor: ARCOFEMI HEALTHCARE LIMITED
Consulting Doctor: Dr. ABHIJEET SINGH SACHAN

MR No: CVIS.0000117199
Visit ID: CVISOPV111714
Visit Date: 24-06-2023 08:34
Discharge Date:
Referred By: SELF

HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

SYSTEMIC REVIEW

HT-HISTORY

PHYSICAL EXAMINATION

SYSTEMIC EXAMINATION

IMPRESSION

RECOMMENDATION

Doctor's Signature

Name: Mrs. G Sandhya Rani
Age/Gender: 30 Y/F
Address: vskp
Location: VISAKHAPATNAM, ANDHRA PRADESH
Doctor:
Department: LABORATORY
Rate Plan: VISHAKAPATNAM_06042023
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IMPRESSION

RECOMMENDATION

Doctor's Signature

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Age/Gender: 30 Y/F
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Location: VISAKHAPATNAM, ANDHRA PRADESH
Doctor:
Department: LABORATORY
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Doctor's Signature

Name: Mrs. G Sandhya Rani
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Doctor:
Department: LABORATORY
Rate Plan: VISHAKAPATNAM_06042023
Sponsor: ARCOFEMI HEALTHCARE LIMITED
Consulting Doctor: Dr. ABHIJEET VISHWAS GHATGE

MR No: CVIS.0000117199
Visit ID: CVISOPV111714
Visit Date: 24-06-2023 08:34
Discharge Date:
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HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

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RECOMMENDATION

Doctor's Signature

Name: Mrs. G Sandhya Rani
Age/Gender: 30 Y/F
Address: vskp
Location: VISAKHAPATNAM, ANDHRA PRADESH
Doctor:
Department: LABORATORY
Rate Plan: VISHAKAPATNAM_06042023
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HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

SYSTEMIC REVIEW

HT-HISTORY

PHYSICAL EXAMINATION

SYSTEMIC EXAMINATION

IMPRESSION

RECOMMENDATION

Doctor's Signature

Established Patient: No

Vitals

Date	Pulse (Beats/min)	B.P (mmHg)	Resp (Rate/min)	Temp (F)	Height (cms)	Weight (Kgs)	Body Fat Percentage (%)	Visceral Fat Level (%)	Body Age (Years)	BMI	Waist Circum (cms)	Hip (cms)	Waist (cms)	Waist & Hip Ratio	User
24-06-2023 15:11	68 Beats/min	110/70 mmHg	18 Rate/min	98.6 F	155 cms	55 Kgs	%	%	Years	22.89	cms	cms	cms		AHLL07730

Established Patient: No

Vitals

Date	Pulse (Beats/min)	B.P (mmHg)	Resp (Rate/min)	Temp (F)	Height (cms)	Weight (Kgs)	Body Fat Percentage (%)	Visceral Fat Level (%)	Body Age (Years)	BMI	Waist Circum (cms)	Hip (cms)	Waist (cms)	Waist & Hip Ratio	User
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Established Patient: No

Vitals

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Established Patient: No

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24-06-2023 15:11	68 Beats/min	110/70 mmHg	18 Rate/min	98.6 F	155 cms	55 Kgs	%	%	Years	22.89	cms	cms	cms		AHLL07730

Established Patient: No

Vitals

Date	Pulse (Beats/min)	B.P (mmHg)	Resp (Rate/min)	Temp (F)	Height (cms)	Weight (Kgs)	Body Fat Percentage (%)	Visceral Fat Level (%)	Body Age (Years)	BMI	Waist Circum (cms)	Hip (cms)	Waist (cms)	Waist & Hip Ratio	User
24-06-2023 15:11	68 Beats/min	110/70 mmHg	18 Rate/min	98.6 F	155 cms	55 Kgs	%	%	Years	22.89	cms	cms	cms		AHLL07730

Physical Medical Examination Format

NAME:- <u>G. Sandhya Rani</u>	DATE:- <u>24/6/22</u>
DESIGNATION:- <u>-</u>	AGE:- <u>32 F</u>
EMP CODE:- <u>-</u>	UNIT/DEPARTMENT:-
BLOOD GROUP:- <u>-</u>	MARTIAL STATUS:- MARRIED/UNMARRIED

MEDICAL EXAMINATION

Complaints (if any)	<u>Nil</u>
Personal /family history	<u>Nil</u>
Past Medical /Occupational History	<u>Nil</u>
Sensltivity/Allergy (if any)	<u>Nil</u>
Heart	<u>Normal</u>
Any other Conditions	<u>Nil</u>

Height:- <u>155</u>	Weight:- <u>55</u>	BMI <u>22.8</u>	Pulse <u>68</u>
Temp:- <u>98.6</u>	Pulse <u>68</u>	Resp:- <u>18</u>	B.P <u>110/70</u>

Remarks

Treatment Recommended (if any):

I Hereby Certify that I have examined Mr/Ms. G. Sandhya Ranifor pre-employment /periodical medical examination, I have found / not found any disease, illness, contagious illness.

I Certify That Employee Is Medically..... fit

Fit

Unfit

Temporarily Unfit

Signature Of Employee

Dr SURYAMALA SANAPATHI
 Signature & Seal Of Medical Examiner With
 Registration No:.....
 Apollo Clinic, Hyderabad

ID: 117199

BPL

24-06-2023 09:06:58

g sandhya rani

Female 30Years

Req. No. :

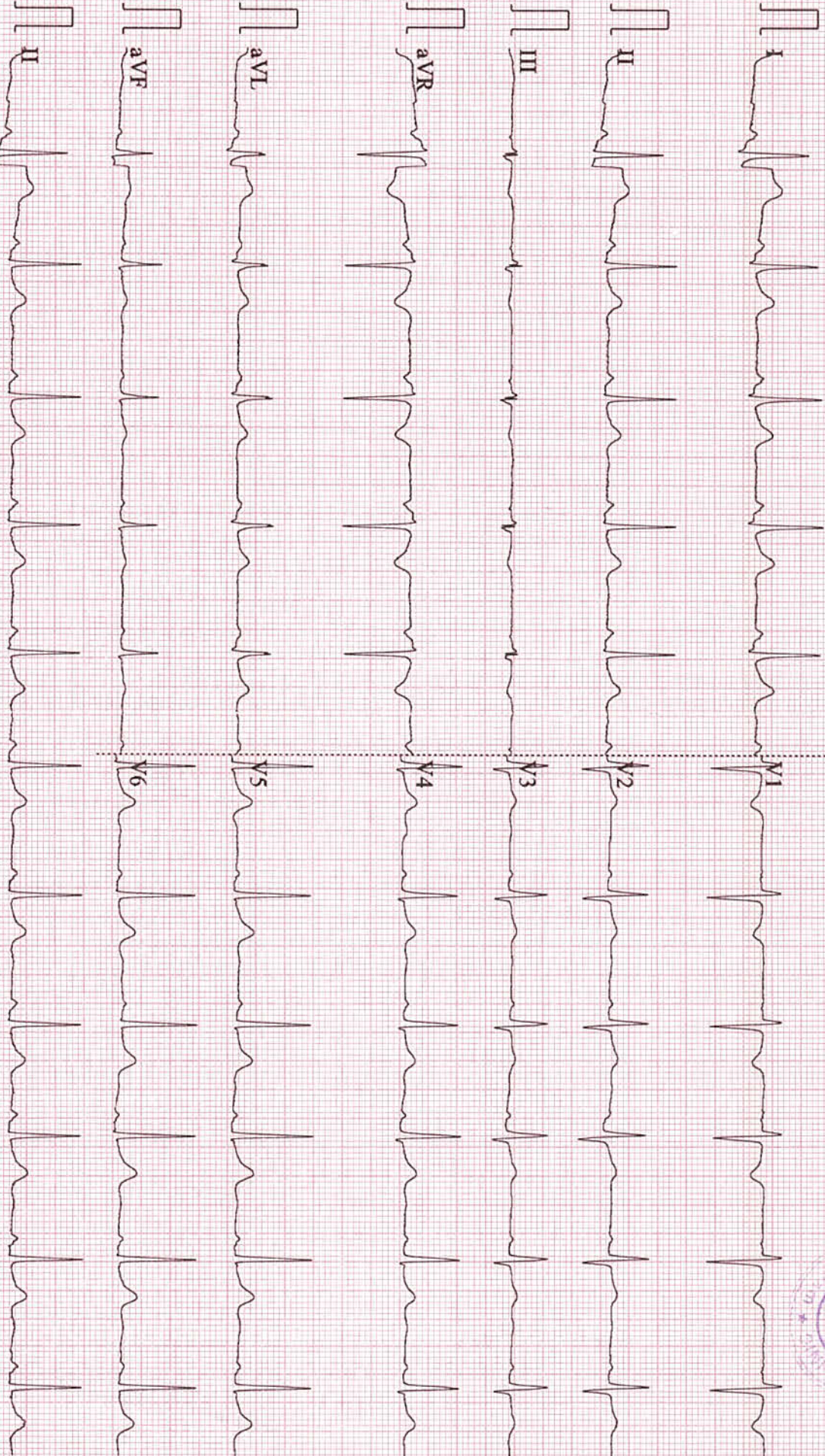
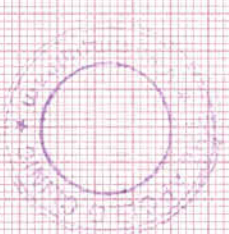
Diagnosis Information:

Sinus rhythm

Normal ECG

HR	: 68	bpm
P	: 96	ms
PR	: 144	ms
QRS	: 90	ms
QT/QTcBz	: 400/426	ms
P/QRS/T	: 16/29/20	
RV5/SV1	: 1.324/0.909	mV

Report Confirmed by:



0.67~35Hz AC50 25mm/s 10mm/mV 2*5.0s+1r CARDIART 0108 D V1.46 Glasgow V28.6.7 APOLLO CLINIC VIZAG

CARDIART

BANK of BARODA

Name: *Mrs. G. SANDHYA RANI*
Gender: *F*
Test Done Date: *24/8/23*

Age: *30* Years:

OPHTHALMOLOGY SCREENING REPORT

VISION : *(OD) 6/6* *(OS) 6/6*

DISTANCE : *26* *26*

NEAR VISION :
COLOUR VISION : *Normal*

ANT. SEGMENT:

Conjunctiva : *Normal*
Cornea : *clear*
Pupil : *2.0/2*

FUNDUS : *Normal*
IMPRESSION :

M/Ka
Signature



Patient Name	: Mrs. G Sandhya Rani	Age	: 30 Y F
UHID	: CVIS.0000117199	OP Visit No	: CVISOPV111714
Reported on	: 24-06-2023 15:10	Printed on	: 24-06-2023 15:10
Adm/Consult Doctor	:	Ref Doctor	: SELF

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 .

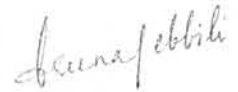
Thoracic wall and soft tissues appear normal.

CONCLUSION :

No obvious abnormality seen.

Printed on:24-06-2023 15:10

---End of the Report---



Dr. ARUNA PEBBILI
DMRD Radiology
Radiology

Patient Name	: Mrs. G Sandhya Rani	Age	: 30 Y/F
UHID	: CVIS.0000117199	OP Visit No	: CVISOPV111714
Reported By:	: Dr. SHASHANKA CHUNDURI	Conducted Date	: 24-06-2023 15:13
Referred By	: SELF		

ECG REPORT

Observation :-

1. Normal Sinus Rhythm.
2. Heart rate is 68 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 seen.

Impression:

NORMAL RESTING ECG.

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

Dr. SHASHANKA CHUNDURI

Patient Name	: Mrs. G Sandhya Rani	Age	: 30 Y/F
UHID	: CVIS.0000117199	OP Visit No	: CVISOPV111714
Conducted By:	: Dr. SHASHANKA CHUNDURI	Conducted Date	: 24-06-2023 14:49
Referred By	: SELF		

2D-ECHO WITH COLOUR DOPPLER

Dimensions:

Ao (cd)	2.6 CM
LA (es)	2.4 CM
LVID (cd)	3.8 CM
LVID (es)	2.0 CM
IVS (Ed)	1.0 CM
LVPW (Ed)	0.9 CM
EF	62.00%
%FD	33.00%

MITRAL VALVE : NORMAL

AML NORMAL

PML NORMAL

AORTIC VALVE NORMAL

TRICUSPID VALVE NORMAL

RIGHT VENTRICLE NORMAL

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 :

PF:0.9m/sec.
MF:E>A
AF:0.8m/sec.

IMPRESSION :
NORMAL CARDIAC SIZE.
NO RWMA.
GOOD LV/ RV FUNCTION.
TRIVIALMR/NO AR/NO TR/NO PAH. NO CLOT.
NO PERICARDIAL EFFUSION.
LVEF:62%.

Dr. SHASHANKA
CHUNDURI

Patient Name	: Mrs. G Sandhya Rani	Age	: 30 Y F
UHID	: CVIS.0000117199	OP Visit No	: CVISOPV111714
Reported on	: 24-06-2023 14:46	Printed on	: 24-06-2023 14:54
Adm/Consult Doctor	:	Ref Doctor	: SELF

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

Liver appears normal in size and increased in 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. 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 : 9.6 x 4.3 cm

Left kidney : 10.2 x 4.2 cm

Urinary Bladder : Minimally distended.

Uterus appears normal in size. It shows normal shape and echo pattern. It measures 7.3 x 4.2 x 4.2 cm. Endometrial echo-complex appears normal and measures 6.7 mm. No intra/extra uterine gestational sac seen.

Both ovaries:

Right ovary : 2.9 x 2 cm appear normal in size, shape and echotexture.

Left ovary : 5.3 x 3.5 cm and 2.9 x 2.6 cm measuring cystic lesion with fine internal septations seen in left ovary.

Patient Name : Mrs. G Sandhya Rani
UHID : CVIS.0000117199
Reported on : 24-06-2023 14:46
Adm/Consult Doctor :

Age : 30 Y F
OP Visit No : CVISOPV111714
Printed on : 24-06-2023 14:54
Ref Doctor : SELF

There is no evidence of ascites/ pleural effusion seen.

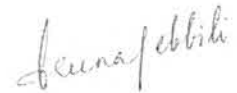
IMPRESSION:-

- *LEFT COMPLEX OVARIAN CYST.
 -POSSIBLE HEMORRHAGIC CYST.
- *FATTY INFILTRATION OF LIVER.

**For clinico-lab correlation / follow - up / further work up.
This is only a screening test.**

Printed on:24-06-2023 14:46

---End of the Report---



Dr. ARUNA PEBBILI
DMRD Radiology
Radiology

Name: Mrs. G Sandhya Rani
 Age/Gender: 30 Y/F
 Address: vskp
 Location: VISAKHAPATNAM, ANDHRA PRADESH
 Doctor:
 Department: LABORATORY
 Rate Plan: VISHAKAPATNAM_06042023
 Sponsor: ARCOFEMI HEALTHCARE LIMITED

MR No: CVIS.0000117199
 Visit ID: CVISOPV111714
 Visit Date: 24-06-2023 08:34
 Discharge Date:
 Referred By: SELF

Vitals:

Date	Pulse (Beats/min)	B.P (mmHg)	Resp (Rate/min)	Temp (F)	Height (cms)	Weight (Kgs)	Body Fat Percentage (%)	Visceral Fat Level (%)	Body Age (Years)	BMI	Waist Circum (cms)	Hip (cms)	Waist (cms)	Waist & Hip Ratio	User
24-06-2023 15:11	68 Beats/min	110/70 mmHg	18 Rate/min	98.6 F	155 cms	55 Kgs	%	%	Years	22.89	cms	cms	cms		AHLL07730

Patient Name : Mrs.G SANDHYA RANI	Collected : 24/Jun/2023 08:39AM
Age/Gender : 30 Y 3 M 20 D/F	Received : 24/Jun/2023 12:11PM
UHID/MR No : CVIS.0000117199	Reported : 24/Jun/2023 03:51PM
Visit ID : CVISOPV111714	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9398096168	

DEPARTMENT OF HAEMATOLOGY

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

PERIPHERAL SMEAR , WHOLE BLOOD-EDTA

RBCs ARE NORMOCYTIC NORMOCHROMIC.
TLC , DLC WITHIN NORMAL LIMIT. NO IMMATURE CELLS ARE SEEN.
PLATELETS ARE ADEQUATE.
NO HEMOPARASITES SEEN



Patient Name : Mrs.G SANDHYA RANI	Collected : 24/Jun/2023 08:39AM
Age/Gender : 30 Y 3 M 20 D/F	Received : 24/Jun/2023 12:11PM
UHID/MR No : CVIS.0000117199	Reported : 24/Jun/2023 03:51PM
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DEPARTMENT OF HAEMATOLOGY

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

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

HEMOGRAM , WHOLE BLOOD-EDTA				
HAEMOGLOBIN	13.4	g/dL	12-15	Spectrophotometer
PCV	38.10	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.40	Million/cu.mm	3.8-4.8	Electrical Impedance
MCV	83	fL	83-101	Calculated
MCH	27.9	pg	27-32	Calculated
MCHC	32.2	g/dL	31.5-34.5	Calculated
R.D.W	14.7	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	8,600	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	65.7	%	40-80	Electrical Impedance
LYMPHOCYTES	26.5	%	20-40	Electrical Impedance
EOSINOPHILS	2.6	%	1-6	Electrical Impedance
MONOCYTES	5.2	%	2-10	Electrical Impedance
BASOPHILS	0	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	5650.2	Cells/cu.mm	2000-7000	Electrical Impedance
LYMPHOCYTES	2279	Cells/cu.mm	1000-3000	Electrical Impedance
EOSINOPHILS	223.6	Cells/cu.mm	20-500	Electrical Impedance
MONOCYTES	447.2	Cells/cu.mm	200-1000	Electrical Impedance
PLATELET COUNT	258000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	10	mm at the end of 1 hour	0-20	Modified Westergren
PERIPHERAL SMEAR				



Patient Name : Mrs.G SANDHYA RANI	Collected : 24/Jun/2023 08:39AM
Age/Gender : 30 Y 3 M 20 D/F	Received : 24/Jun/2023 12:11PM
UHID/MR No : CVIS.0000117199	Reported : 24/Jun/2023 04:46PM
Visit ID : CVISOPV111714	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9398096168	

DEPARTMENT OF HAEMATOLOGY

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

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

BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD-EDTA

BLOOD GROUP TYPE	AB			Forward & Reverse Grouping with Slide/Tube Aggluti
Rh TYPE	POSITIVE			Forward & Reverse Grouping with Slide/Tube Agglutination



Patient Name : Mrs.G SANDHYA RANI	Collected : 24/Jun/2023 08:39AM
Age/Gender : 30 Y 3 M 20 D/F	Received : 24/Jun/2023 12:11PM
UHID/MR No : CVIS.0000117199	Reported : 24/Jun/2023 02:57PM
Visit ID : CVISOPV111714	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9398096168	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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GLUCOSE, FASTING , NAF PLASMA	98	mg/dL	70-100	GOD - POD
-------------------------------	----	-------	--------	-----------

Comment:

As per American Diabetes Guidelines

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

GLUCOSE, POST PRANDIAL (PP), 2 HOURS , NAF PLASMA	149	mg/dL	70-140	GOD - POD
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Comment:

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

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

Ref: Marks medical biochemistry and clinical approach

Patient Name : Mrs.G SANDHYA RANI	Collected : 24/Jun/2023 08:39AM
Age/Gender : 30 Y 3 M 20 D/F	Received : 24/Jun/2023 12:11PM
UHID/MR No : CVIS.0000117199	Reported : 24/Jun/2023 02:57PM
Visit ID : CVISOPV111714	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9398096168	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD-EDTA	5.8	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD-EDTA	120	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





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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	213	mg/dL	<200	CHE/CHO/POD
TRIGLYCERIDES	218	mg/dL	<150	Enzymatic
HDL CHOLESTEROL	43	mg/dL	>40	CHE/CHO/POD
NON-HDL CHOLESTEROL	170	mg/dL	<130	Calculated
LDL CHOLESTEROL	126.4	mg/dL	<100	Calculated
VLDL CHOLESTEROL	43.6	mg/dL	<30	Calculated
CHOL / HDL RATIO	4.95		0-4.97	Calculated

Comment:

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

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

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

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





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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.70	mg/dL	0.20-1.20	DIAZO METHOD
BILIRUBIN CONJUGATED (DIRECT)	0.10	mg/dL	0.0-0.3	Calculated
BILIRUBIN (INDIRECT)	0.60	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	203	U/L	<35	Visible with P-5-P
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	166.0	U/L	14-36	UV with P-5-P
ALKALINE PHOSPHATASE	78.00	U/L	38-126	p-nitrophenyl phosphate
PROTEIN, TOTAL	8.20	g/dL	6.3-8.2	Biuret
ALBUMIN	4.40	g/dL	3.5 - 5	Bromocresol Green
GLOBULIN	3.80	g/dL	2.0-3.5	Calculated
A/G RATIO	1.16		0.9-2.0	Calculated





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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	0.50	mg/dL	0.5-1.04	Creatinine amidohydrolase
UREA	16.60	mg/dL	15-36	Urease
BLOOD UREA NITROGEN	7.8	mg/dL	8.0 - 23.0	Calculated
URIC ACID	5.10	mg/dL	2.5-6.2	Uricase
CALCIUM	9.10	mg/dL	8.4 - 10.2	Arsenazo-III
PHOSPHORUS, INORGANIC	3.50	mg/dL	2.5-4.5	PMA Phenol
SODIUM	139	mmol/L	135-145	Direct ISE
POTASSIUM	4.6	mmol/L	3.5-5.1	Direct ISE
CHLORIDE	102	mmol/L	98 - 107	Direct ISE



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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	90.00	U/L	12-43	Glycylglycine Nitoranalide





Patient Name : Mrs.G SANDHYA RANI	Collected : 24/Jun/2023 08:39AM
Age/Gender : 30 Y 3 M 20 D/F	Received : 24/Jun/2023 12:11PM
UHID/MR No : CVIS.0000117199	Reported : 24/Jun/2023 02:58PM
Visit ID : CVISOPV111714	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9398096168	

DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - 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)	1.82	ng/ml	0.69-2.15	CLIA
THYROXINE (T4, TOTAL)	102.00	ng/ml	52-127	CLIA
THYROID STIMULATING HORMONE (TSH)	1.750	µIU/mL	0.3-4.5	CLIA

Comment:

Serum TSH concentrations exhibit a diurnal variation with the peak occurring during the night and the nadir occurring between 10 a.m. and 4 p.m. In primary hypothyroidism, thyroid-stimulating hormone (TSH) levels will be elevated. In primary hyperthyroidism, TSH levels will be low. Elevated or low TSH in the context of normal free thyroxine is often referred to as subclinical hypo- or hyperthyroid-ism, respectively. Physiological rise in Total T3 / T4 levels is seen in pregnancy and in patients on steroid therapy.

Recommended test for T3 and T4 is unbound fraction or free levels as it is metabolically active.

Note:

For pregnant females	Bio Ref Range for TSH in uIU/ml (As per American Thyroid Association)
First trimester	0.1 - 2.5
Second trimester	0.2 – 3.0
Third trimester	0.3 – 3.0





Patient Name : Mrs.G SANDHYA RANI	Collected : 24/Jun/2023 08:39AM
Age/Gender : 30 Y 3 M 20 D/F	Received : 24/Jun/2023 12:59PM
UHID/MR No : CVIS.0000117199	Reported : 24/Jun/2023 01:19PM
Visit ID : CVISOPV111714	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9398096168	

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

URINE GLUCOSE(POST PRANDIAL)	NEGATIVE		NEGATIVE	Dipstick
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URINE GLUCOSE(FASTING)	NEGATIVE		NEGATIVE	Dipstick
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*** End Of Report ***

Result/s to Follow:
LBC PAP TEST (PAPSURE), COMPLETE URINE EXAMINATION (CUE)

DR. V. SNEHAL
M.D (PATH)
Consultant Pathologist



Your Apollo order has been confirmed

noreply@apolloclinics.info <noreply@apolloclinics.info>

Thu 6/15/2023 3:48 PM

To: babu.hari4u@gmail.com <babu.hari4u@gmail.com>

Cc: Vizag Apolloclinic <vizag@apolloclinic.com>; Ramakumar V <ramakumar.v@apolloclinic.com>; Syamsunder M <syamsunder.m@apollohl.com>

Dear Gsndhya Ms,

Namaste Team,

Greetings from Apollo Clinics,

With regards to the below request the below appointment is scheduled at **VIZAG clinic** on **2023-06-24 at 08:30-08:35**.

Corporate Name	ARCOFEMI HEALTHCARE LIMITED
Agreement Name	ARCOFEMI MEDIWHEEL FEMALE AHC CREDIT PAN INDIA OP AGREEMENT
Package Name	[ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324]

"In view of corona virus precautionary measures, you are requested to take a mandatory check for symptoms & self-declaration at centre. Please cooperate. Thank you."

NOTE: We are not providing the breakfast in view of corona virus. And that customers on their own should carry their breakfast.

Note: Also once appointment is booked, based on availability of doctors at clinics tests will happen, any pending test will happen based on doctor availability and clinics will be updating the same to customers.

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.

As per agreement terms please carry all relevant documents such as Confirmation mail, valid id proof, company ID card etc.

For further assistance please call us on our Help Line #: 1860 500 7788.

Clinic Address: 50-81-1/2, PLOT 5, SHEETHAMMAPETA, VISAKHAPATNAM.

Contact No: (0891) 258 5511 - 2.

P.S: Health Check-Up may take 4 - 5hrs for completion on week days & 5 - 6hrs on Saturdays, kindly plan accordingly, Doctor Consultation will be completed after all the Reports are ready.

Note: Speak Freely. Speak Free! Speak to our Doctor from 8:00 PM to 8:00 AM by calling 1860 500 7788 and press #2 on the IVR. Now get all your Health related queries answered by an expert! Service by Apollo Clinic.


Warm Regards,
Apollo Team

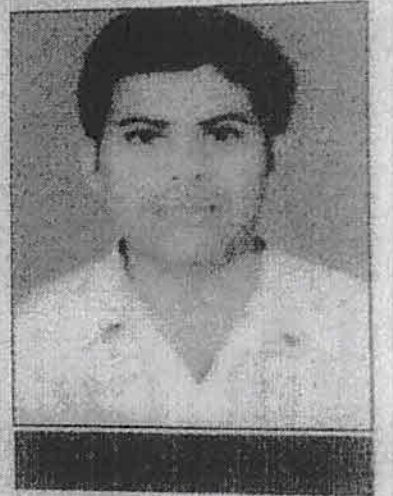



बैंक ऑफ़ बड़ोदा
Bank of Baroda

नाम HARI BABU BALAKA
Name

कर्मचारी कुट क्र 100225
E.C. No.


जारीकर्ता प्राधिकारी
Issuing Authority




धारक का हस्ताक्षर
Signature of Holder



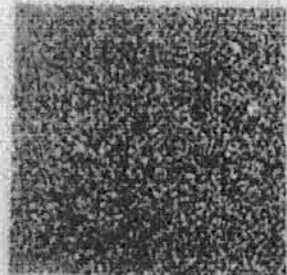
GOVERNMENT OF INDIA

ఆంధ్రప్రదేశ్ ప్రభుత్వం
GOVERNMENT OF ANDHRA PRADESH

సభ్యత్వ/Enrolment No.: 2624/02142/10648

Download Date: 19/10/2020
Issue Date: 04/03/2020

To
గుడిల సత్య లక్ష్మి
Gondela Sandhya Rani
D/O Gondela Purushottam
1-085
Kalinga Street
Kuluma
Rajahmundry
Srisubrahm Andhra Pradesh - 532202
9396066108



మీ ఆధార్ సంఖ్య / Your Aadhaar No. :

9464 7348 7847

VID : 9140 9083 3678 7690

నా ఆధార్, నా గుర్తింపు



ఆంధ్ర ప్రదేశ్ ప్రభుత్వం
GOVERNMENT OF ANDHRA PRADESH



Download Date: 19/10/2020



గుడిల సత్య లక్ష్మి
Gondela Sandhya Rani
పుట్టిన తేదీ/DOB: 04/03/1964
S/ FEMALE

Issue Date: 04/03/2020

9464 7348 7847

VID : 9140 9083 3678 7690

నా ఆధార్, నా గుర్తింపు