

Patient Name : Mrs.IFFAT SAHER	Collected : 05/Nov/2024 09:58AM
Age/Gender : 41 Y 1 M 3 D/F	Received : 05/Nov/2024 11:55AM
UHID/MR No : CMYS.0000062517	Reported : 05/Nov/2024 12:47PM
Visit ID : CMYSOPV131159	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22S37647	

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY232

PERIPHERAL SMEAR , WHOLE BLOOD EDTA



Dr. PAVAN KUMAR M
M.B.B.S,M.D(Pathology)
Consultant Pathologist

SIN No:MYS241100141



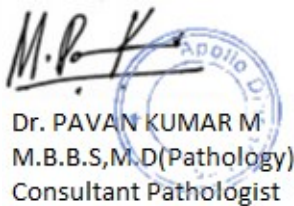
Patient Name : Mrs.IFFAT SAHER	Collected : 05/Nov/2024 09:58AM
Age/Gender : 41 Y 1 M 3 D/F	Received : 05/Nov/2024 11:55AM
UHID/MR No : CMYS.0000062517	Reported : 05/Nov/2024 02:15PM
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DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY232

IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE WITH THROMBOCYTOPENIA.

Note : Suggested clinical correlation



Dr. PAVAN KUMAR M
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Consultant Pathologist

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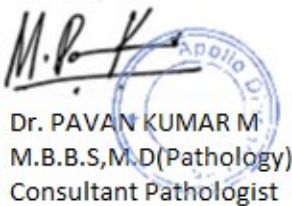


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DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY232

Test Name	Result	Unit	Bio. Ref. Interval	Method
BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA				
BLOOD GROUP TYPE	B			Forward & Reverse Grouping with Slide/Tube Aggluti
Rh TYPE	POSITIVE			Forward & Reverse Grouping with Slide/Tube Agglutination



Dr. PAVAN KUMAR M
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Consultant Pathologist

SIN No: MYS241100141



Patient Name : Mrs.IFFAT SAHER	Collected : 06/Nov/2024 12:06PM
Age/Gender : 41 Y 1 M 3 D/F	Received : 06/Nov/2024 01:39PM
UHID/MR No : CMYS.0000062517	Reported : 06/Nov/2024 02:01PM
Visit ID : CMYSOPV131159	Status : Final Report
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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY232

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, FASTING , NAF PLASMA	90	mg/dl	74-106	GOD, POD

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:

- 1.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.
2. Very high glucose levels (>450 mg/dL in adults) may result in Diabetic Ketoacidosis & is considered critical.

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	99	mg/dl	70-140	GOD, POD

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.



Dr. PAVAN KUMAR M
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Consultant Pathologist

SIN No:MYS241100206



Patient Name : Mrs.IFFAT SAHER	Collected : 05/Nov/2024 09:58AM
Age/Gender : 41 Y 1 M 3 D/F	Received : 05/Nov/2024 11:55AM
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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY232

Test Name	Result	Unit	Bio. Ref. Interval	Method
HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA				
HBA1C, GLYCATED HEMOGLOBIN	4.6	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	85	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.

1. HbA1c is recommended by American Diabetes Association for Diagnosing Diabetes and monitoring Glycemic Control by American Diabetes Association guidelines 2023.

2. Trends in HbA1c values is a better indicator of Glycemic control than a single test.

3. 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.

4. 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.

5. 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. PAVAN KUMAR M
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Consultant Pathologist

SIN No:MYS241100145



Patient Name : Mrs.IFFAT SAHER	Collected : 05/Nov/2024 09:58AM
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Emp/Auth/TPA ID : 22S37647	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY232

Test Name	Result	Unit	Bio. Ref. Interval	Method
LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	173	mg/dl	0-200	CHOD
TRIGLYCERIDES	70	mg/dl	0-150	GPO, Trinder
HDL CHOLESTEROL	61	mg/dL	40-60	CHOD
NON-HDL CHOLESTEROL	112	mg/dL	<130	Calculated
LDL CHOLESTEROL	98.27	mg/dL	<100	Calculated
VLDL CHOLESTEROL	13.9	mg/dL	<30	Calculated
CHOL / HDL RATIO	2.84		0-4.97	Calculated
ATHEROGENIC INDEX (AIP)	0.10		<0.11	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

Dr. PAVAN KUMAR M
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Consultant Pathologist

SIN No:MYS241100142



Patient Name : Mrs.IFFAT SAHER	Collected : 05/Nov/2024 09:58AM
Age/Gender : 41 Y 1 M 3 D/F	Received : 05/Nov/2024 11:55AM
UHID/MR No : CMYS.0000062517	Reported : 05/Nov/2024 12:57PM
Visit ID : CMYSOPV131159	Status : Final Report
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Emp/Auth/TPA ID : 22S37647	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY232

Test Name	Result	Unit	Bio. Ref. Interval	Method
LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.45	mg/dl	0-1.2	NBD
BILIRUBIN CONJUGATED (DIRECT)	0.16	mg/dl	0-0.2	Diazotized sulfanilic acid
BILIRUBIN (INDIRECT)	0.29	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	17	U/l	0-45	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	23.0	U/l	0-31	IFCC
AST (SGOT) / ALT (SGPT) RATIO (DE RITIS)	1.4		<1.15	Calculated
ALKALINE PHOSPHATASE	74.00	U/l	42-98	IFCC (AMP buffer)
PROTEIN, TOTAL	8.10	g/dl	6.4-8.3	Biuret
ALBUMIN	4.30	g/dl	3.5-5.2	Bromcresol Green
GLOBULIN	3.80	g/dL	2.0-3.5	Calculated
A/G RATIO	1.13		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. 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 diseases, Cirrhosis, but the increase is usually not >2.

2. Cholestatic Pattern:*ALP – Disproportionate increase in ALP compared with AST, ALT. ALP elevation also seen in pregnancy, impacted by age and sex.*Bilirubin elevated- predominantly direct , To establish the hepatic origin correlation with elevated GGT helps.

3. Synthetic function impairment:*Albumin- Liver disease reduces albumin levels, Correlation with PT (Prothrombin Time) helps.

4. Associated tests for assessment of liver fibrosis - Fibrosis-4 and APRI Index.


Dr. PAVAN KUMAR M
 M.B.B.S,M.D(Pathology)
 Consultant Pathologist

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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY232

Test Name	Result	Unit	Bio. Ref. Interval	Method
RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	0.58	mg/dL	0.51-1.04	Enzymatic colorimetric
UREA	20.13	mg/dl	13-43	Urease, UV
BLOOD UREA NITROGEN	9.4	mg/dL	8.0 - 23.0	Calculated
URIC ACID	4.00	mg/dL	2.6-6	Uricase
CALCIUM	9.30	mg/dl	8.6-10.3	Arsenazo III
PHOSPHORUS, INORGANIC	3.19	mg/dl	2.7-4.5	Molybdate
SODIUM	140	mmol/L	135-145	Direct ISE
POTASSIUM	4.7	mmol/L	3.5-5.1	Direct ISE
CHLORIDE	104	mmol/L	98 - 107	Direct ISE
PROTEIN, TOTAL	8.10	g/dl	6.4-8.3	Biuret
ALBUMIN	4.30	g/dl	3.5-5.2	Bromcresol Green
GLOBULIN	3.80	g/dL	2.0-3.5	Calculated
A/G RATIO	1.13		0.9-2.0	Calculated



Dr. PAVAN KUMAR M
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Consultant Pathologist

SIN No: MYS241100142



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DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY232

High	High	High	High	Pituitary Adenoma; TSHoma/Thyrotropinoma
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Dr. PAVAN KUMAR M
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Consultant Pathologist

SIN No:MYS241100144



Patient Name : Mrs.IFFAT SAHER	Collected : 05/Nov/2024 09:58AM
Age/Gender : 41 Y 1 M 3 D/F	Received : 05/Nov/2024 12:40PM
UHID/MR No : CMYS.0000062517	Reported : 05/Nov/2024 12:58PM
Visit ID : CMYSOPV131159	Status : Final Report
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DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY232

Test Name	Result	Unit	Bio. Ref. Interval	Method
COMPLETE URINE EXAMINATION (CUE) , URINE				
PHYSICAL EXAMINATION				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Physical Measurement
pH	6.5		5-7.5	Double Indicator
SP. GRAVITY	1.020		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	Modified Ehrlich Reaction
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	Leucocyte Esterase
CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY				
PUS CELLS	4 - 6	/hpf	0-5	Microscopy
EPITHELIAL CELLS	1 - 2	/hpf	<10	Microscopy
RBC	NIL	/hpf	0-2	Microscopy
CASTS	NIL		0-2 Hyaline Cast	Microscopy
CRYSTALS	ABSENT		ABSENT	Microscopy

Comment:

All urine samples are checked for adequacy and suitability before examination. All abnormal chemical examination are rechecked and verified by manual methods. Microscopy findings are reported as an average of 10 high power fields.



Dr. PAVAN KUMAR M
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Consultant Pathologist

SIN No:MYS241100143



Patient Name	: Mrs.IFFAT SAHER	Collected	: 05/Nov/2024 10:12AM
Age/Gender	: 41 Y 1 M 3 D/F	Received	: 05/Nov/2024 12:40PM
UHID/MR No	: CMYS.0000062517	Reported	: 05/Nov/2024 12:58PM
Visit ID	: CMYSOPV131159	Status	: Final Report
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DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY232

Test Name	Result	Unit	Bio. Ref. Interval	Method
URINE GLUCOSE(POST PRANDIAL)	NEGATIVE		NEGATIVE	GOD-POD



Dr. PAVAN KUMAR M
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Consultant Pathologist

SIN No:MYS241100153




Patient Name : Mrs.IFFAT SAHER	Collected : 06/Nov/2024 08:53AM
Age/Gender : 41 Y 1 M 3 D/F	Received : 06/Nov/2024 03:31PM
UHID/MR No : CMYS.0000062517	Reported : 06/Nov/2024 04:15PM
Visit ID : CMYSOPV131159	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22S37647	

DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY232

Test Name	Result	Unit	Bio. Ref. Interval	Method
URINE GLUCOSE(FASTING)	NEGATIVE		NEGATIVE	GOD-POD



Dr. PAVAN KUMAR M
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Consultant Pathologist

SIN No:MYS241100188



Patient Name	: Mrs.IFFAT SAHER	Collected	: 05/Nov/2024 12:50PM
Age/Gender	: 41 Y 1 M 3 D/F	Received	: 06/Nov/2024 11:25AM
UHID/MR No	: CMYS.0000062517	Reported	: 07/Nov/2024 11:26AM
Visit ID	: CMYSOPV131159	Status	: Final Report
Ref Doctor	: Self	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 22S37647		

DEPARTMENT OF CYTOLOGY

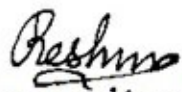
ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY232

LBC PAP SMEAR , CERVICAL SAMPLE

	CYTOLOGY NO.	24260/24
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	EPITHEIAL CELL	
	SQUAMOUS CELL ABNORMALITIES	NOT SEEN
	GLANDULAR CELL ABNORMALITIES	NOT SEEN
b	ORGANISM	NIL
IV	INTERPRETATION	NEGATIVE FOR INTRAEPITHELIAL LESION OR MALIGNANCY

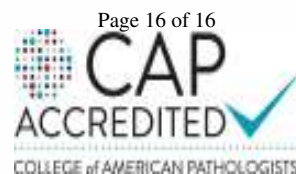
Pap Test is a screening test for cervical cancer with inherent false negative results. Regular screening and follow-up is recommended (Bethesda-TBS-2014) revised

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



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

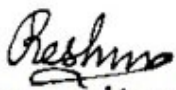
SIN No:MYS241100165



Patient Name	: Mrs.IFFAT SAHER	Collected	: 05/Nov/2024 12:50PM
Age/Gender	: 41 Y 1 M 3 D/F	Received	: 06/Nov/2024 11:25AM
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Emp/Auth/TPA ID	: 22S37647		

TERMS AND CONDITIONS GOVERNING THIS REPORT

1. Reported results are for information and interpretation of the referring doctor or such other medical professionals, who understand reporting units, reference ranges and limitation of technologies. Laboratories not be responsible for any interpretation whatsoever.
2. It is presumed that the tests performed are, on the specimen / sample being to the patient named or identified and the verifications of particulars have been confirmed by the patient or his / her representative at the point of generation of said specimen.
3. The reported results are restricted to the given specimen only. Results may vary from lab to lab and from time to time for the same parameter for the same patient (within subject biological variation).
4. The patient details along with their results in certain cases like notifiable diseases and as per local regulatory requirements will be communicated to the assigned regulatory bodies.
5. The patient samples can be used as part of internal quality control, test verification, data analysis purposes within the testing scope of the laboratory.
6. This report is not valid for medico legal purposes. It is performed to facilitate medical diagnosis only.



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



SIN No: MYS241100165

Patient Name	: Mrs. Iffat saher	Age	: 41Yrs 1Mths 7Days
UHID	: CMYS.0000062517	OP Visit No.	: CMYSOPV131159
Printed On	: 08-11-2024 10:26 AM	Advised/Pres Doctor	: --
Department	: Radiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employeer Id	: 22S37647		

DEPARTMENT OF RADIOLOGY

LIVER: It is normal in size and in increase echotexture. No focal lesions seen. IHBR are not dilated. CBD and Portal vein are normal.

GALL BLADDER: It is well distended and normal. No calculi seen.

SPLEEN: It is normal in size, outline and echopattern. No e/o focal lesions.

PANCREAS: It is normal.

RIGHT KIDNEY: It measures 9.7 cm with parenchymal thickness of 1.2 cm. It is normal in size, outline and echotexture. No e/o calculus or hydronephrosis seen.

LEFT KIDNEY: It measures 10.7 cm with parenchymal thickness of 1.5 cm. It is normal in size, outline and echotexture. A **Echogenic calculus 7.7mm is noted in lower pole calyx of left kidney**

URINARY BLADDER: It is well distended. The UB wall is normal. No calculi seen.

UTERUS: It is anteverted and measures 9.3x3.5x5.7 cm with ET = 8.5mm. It is normal in size, outline and echotexture. No mass lesion.

Rt. OVARY: It measures 2.3x1.5cm. It is normal. No mass lesion seen.

Lt. OVARY: It measures 2.7x1.9 cm. It is normal. No mass lesion seen.

OTHERS: No e/o free fluid in the abdomen. No e/o lymphadenopathy. No e/o gut wall thickening. No mass lesion seen in the abdomen.

IMPRESSION:

-GRADE I FATTY LIVER .

-NON OBSTRUCTIVE LEFT RENAL CALCULUS .

---End Of The Report---



Dr.CHETAN HOLEPPAGOL

MBBS, DNB(RADIO DIAGNOSIS)
90037
Radiology

Patient Name	: Mrs. Iffat saher	Age	: 41Yrs 1Mths 5Days
UHID	: CMYS.0000062517	OP Visit No.	: CMYSOPV131159
Printed On	: 06-11-2024 11:07 AM	Advised/Pres Doctor	: --
Department	: Radiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employer Id	: 22S37647		

DEPARTMENT OF RADIOLOGY

Lung fields are clear.

Cardio thoracic ratio is normal.

Apices, costo and cardio phrenic 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: NORMAL STUDY .

---End Of The Report---



Dr.CHETAN HOLEPPAGOL
MBBS, DNB(RADIO DIAGNOSIS)
90037
Radiology

Patient Name	: Mrs. Iffat saher	Age	: 41Yrs 1Mths 13Days
UHID	: CMYS.0000062517	OP Visit No.	: CMYSOPV131159
Printed On	: 14-11-2024 07:42 AM	Advised/Pres Doctor	: --
Department	: Cardiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employer Id	: 22S37647		

DEPARTMENT OF CARDIOLOGY

2D ECHOCARDIOGRAPHY STUDY

Impression:

Normal chambers and valves
No regional wall motion abnormality
Normal left ventricular systolic function. EF 60 %
No clots. No pericardial effusion

??????

Findings

Left Ventricle: No RWMA
Right Ventricle Normal
Left Atrium Normal
Right Atrium Normal
Aorta Normal
Pulmonary Artery Normal
IAS Intact
IVS Intact
Valves Normal
Pericardium Normal
Doppler Normal

Patient's Name : Mrs Iffat Saher Age & Sex; 41Yrs /Female

Date :07.11.2024

UHID No:62517

Measurements

AO: cm

LA : cm

RV : cm

LVIDd cm

LVIDs : cm

IVSd : cm

IVSs : cm

PWd : cm

PWs : cm

EF : 60.0 %

FS : 32.0 %

Doppler

MV TV AV PV

E : 1.07 m/s E --- m/s V max 1.52 m/s V max 1.11 m/s

A : 0.60 m/s A --- m/s

MR Nil TR Nil AR Nil PR Nil

---End Of The Report---



Dr. GURU PRASAD B V
MBBS, PGDCC
69949
Cardiology

Patient Name	: Mrs. Iffat saher	Age	: 41Yrs 1Mths 5Days
UHID	: CMYS.0000062517	OP Visit No.	: CMYSOPV131159
Printed On	: 06-11-2024 02:29 PM	Advised/Pres Doctor	: --
Department	: Cardiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employeer Id	: 22S37647		

DEPARTMENT OF CARDIOLOGY

Observation :-

1. Sinus Rhythm.
2. Heart rate is 79 beats per minutes.

Impression:

NORMAL RESTING ECG.

---End Of The Report---



Dr. GURU PRASAD B V
MBBS, PGDCC
69949
Cardiology

आयकर विभाग
INCOME TAX DEPARTMENT

भारत सरकार
GOVT. OF INDIA



स्थायी लेखा संख्या कार्ड
Permanent Account Number Card



IBGPS2679L



नाम / Name
IFFAT SAHER

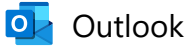
पिता का नाम / Father's Name
SYED ILYAS ALI

जन्म की तारीख / Date of Birth
25/09/1983

Iffat
हस्ताक्षर / Signature



09052017



Your appointment is confirmed

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

Date Mon 04-11-2024 15:29

To rehaanbukhsh@gmail.com <rehaanbukhsh@gmail.com>

Cc Mysore Apolloclinic <mysore@apolloclinic.com>; Yogeesh KV <mkt.mysore@apolloclinic.com>; Syamsunder M <syamsunder.m@apollohl.com>



Dear Iffat saher,

Greetings from Apollo Clinics,

Your corporate health check appointment is confirmed at **KALIDASA RAOD clinic** on **2024-11-05** at **08:00-08:15**.

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

"Kindly carry with you relevant documents such as HR issued authorization letter and or appointment confirmation mail and or valid government ID proof and or company ID card and or voucher as per our agreement with your company or sponsor."

Note: Video recording or taking photos inside the clinic premises or during camps is not allowed and would attract legal consequences.

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 be followed for a 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 alcohol, cigarettes, tobacco or any other liquids (except Water) in the morning. If any medications taken, pls inform our staff before health check.

3. Please bring all your medical prescriptions and previous health medical records with you.
4. Kindly inform our staff, 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.

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

Clinic Address: 23, KALIDASA ROAD, VV MOHLLA, MYSORE.

Contact No: (0821) 400 6040 - 41.

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.

Warm Regards,
Apollo Clinic