

INDIAN UNION DRIVING LICENCE  
TELANGANA STATE

TS00-21150005595

B DEEPIKA  
AJAY KUMAR  
CHOPPAKATLA PALEM  
CHOPPAKATLA PALEM  
507204  
BONAKAL  
KHAMMAM - 507204

Issued On: 05/05/2015

RTA KHAMMAM

भारत सरकार  
Government of India

భారత ప్రభుత్వం  
భారత్

మొలక దినం: 15/04/2015

ధుళిపాలా నీరజ్  
Dhulipalla Neeraj  
పుట్టిన తేదీ / DOB: 03/06/1993  
పురుషుడు / Male

2245 4683 5044

मेरा आधार, मेरी पहचान

The Apollo Clinic - Manikonda  
PHYSICAL EXAMINATION FORM

DATE 30/12/23

UID CCHA 97 613

Name Mrs. B. Deepika Age 30 y / f

Height  cm

Weight  kg

Chest Measurement  (In) cm  (Out) cm

Waist  cm Hip

Pulse  / min HR

BP  mmHg SPO2

Technician:  
Ordering Ph:  
Referring Ph:  
Attending Ph:

QRS : 86 ms  
QT / QTc Baz : 384 / 437 ms  
PR : 142 ms  
P : 116 ms  
RR / PP : 772 / 769 ms  
P / QRS / T : 65 / 69 / 51 degrees

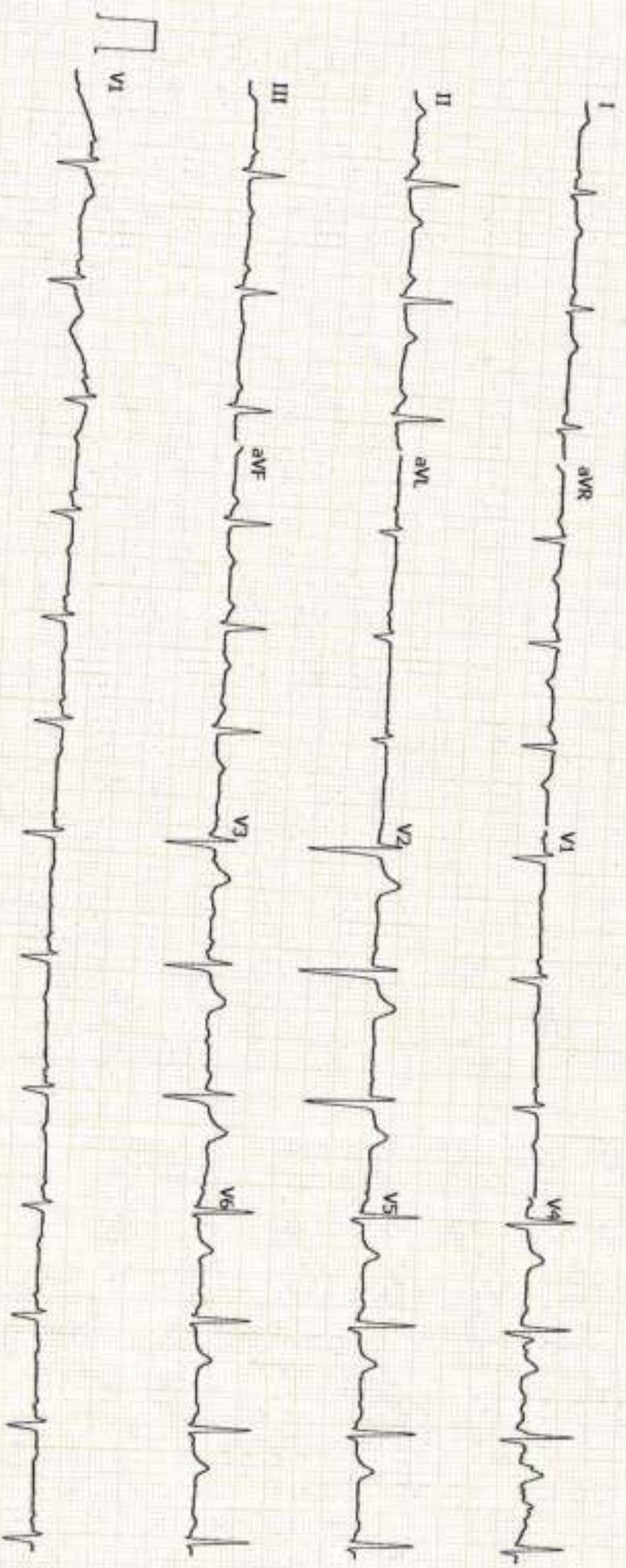
Normal sinus rhythm with sinus arrhythmia  
Normal ECG

Location:  
Order Number:  
Visit:  
Indication:  
Medication 1:  
Medication 2:  
Medication 3:

Room:

78 bpm  
- / - mmHg

*GML*  
*File*



MRS. DEEPIKA,  
Patient ID CCHA.97613  
12/30/2023  
12:30-49pm

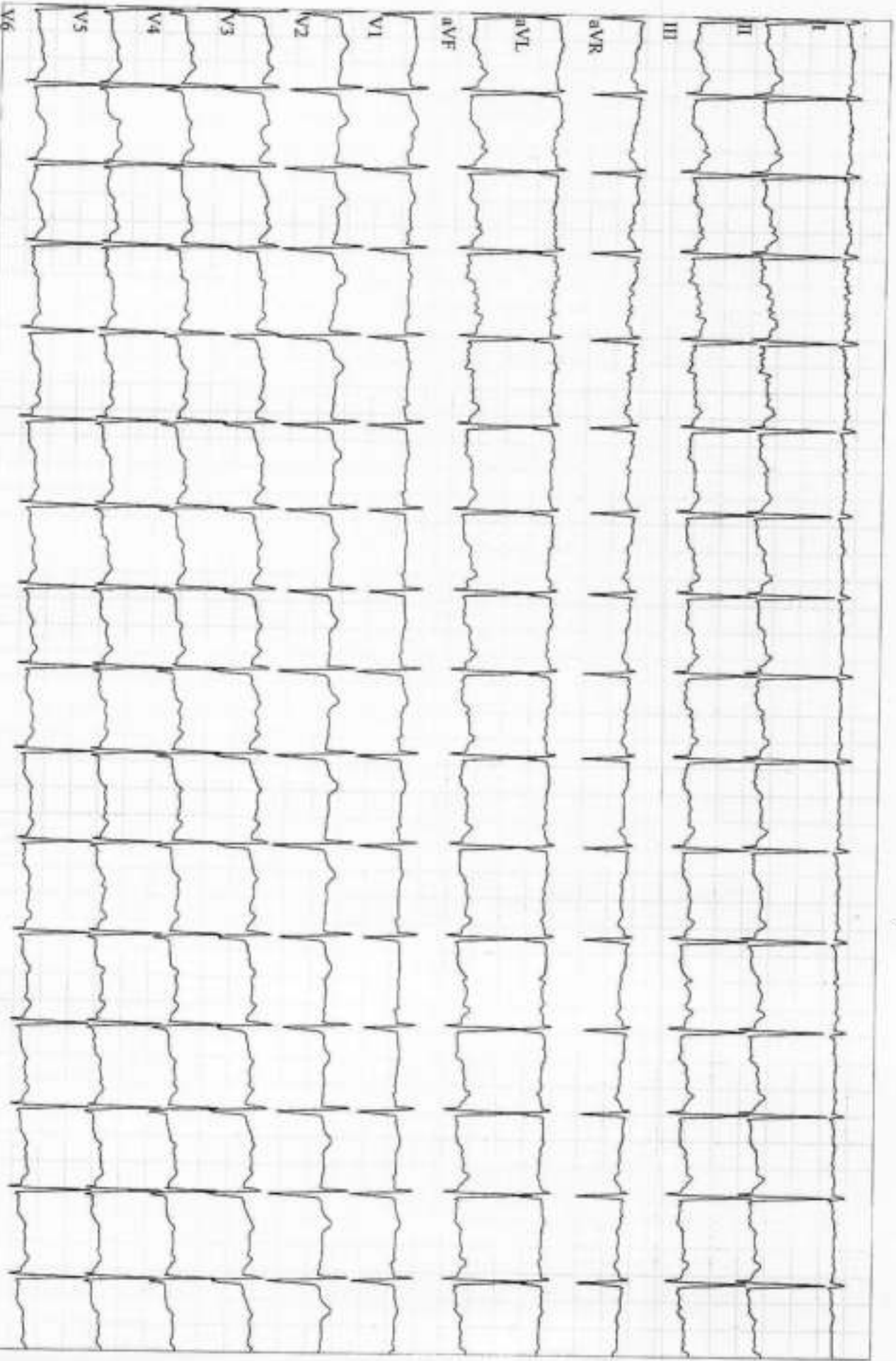
97 bpm

12-Lead Report  
PRETEST  
SUPINE  
00:10

BRUCE  
0.0 mph  
0.0 %

Normal ECG  
Ⓜ

APOLLO CLINIC



GE CardioSoft V6.73 (2)  
25 mm/s 10 mm/mV 50Hz 0.01Us ECG 12/30/2023

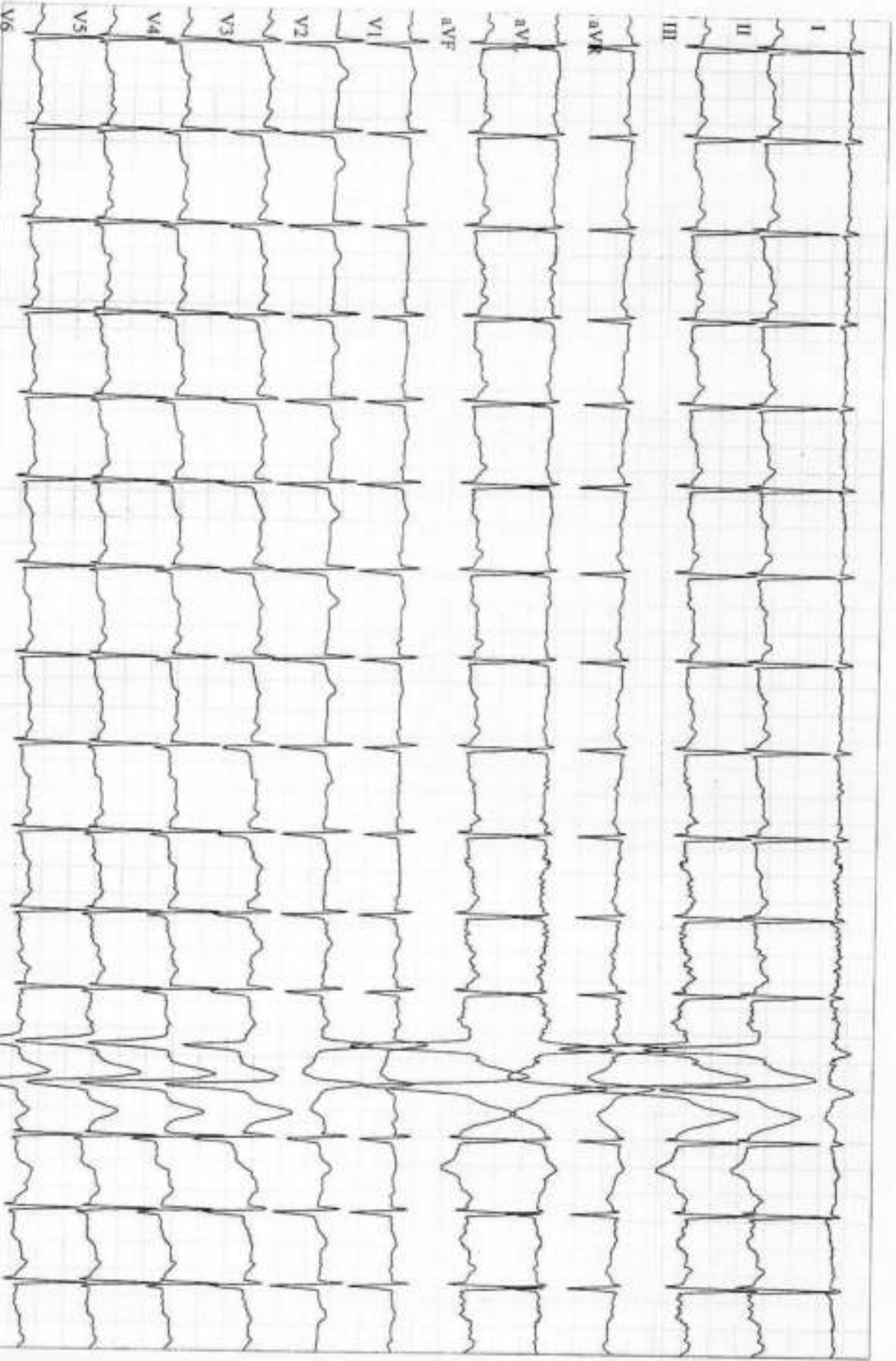
MRS. DEEPIKA,  
Patient ID CCHA.97613  
12/30/2023  
12:30:54pm

96 bpm

12-Lead Report  
PRETEST  
STANDING  
00:15

BRUCE  
0.0 mph  
0.0 %

APOLLO CLINIC



GE CardioSoft V6.73 (2)  
25 mm/s 10 mm/mV 50Hz 0.01Us EPR, impactive

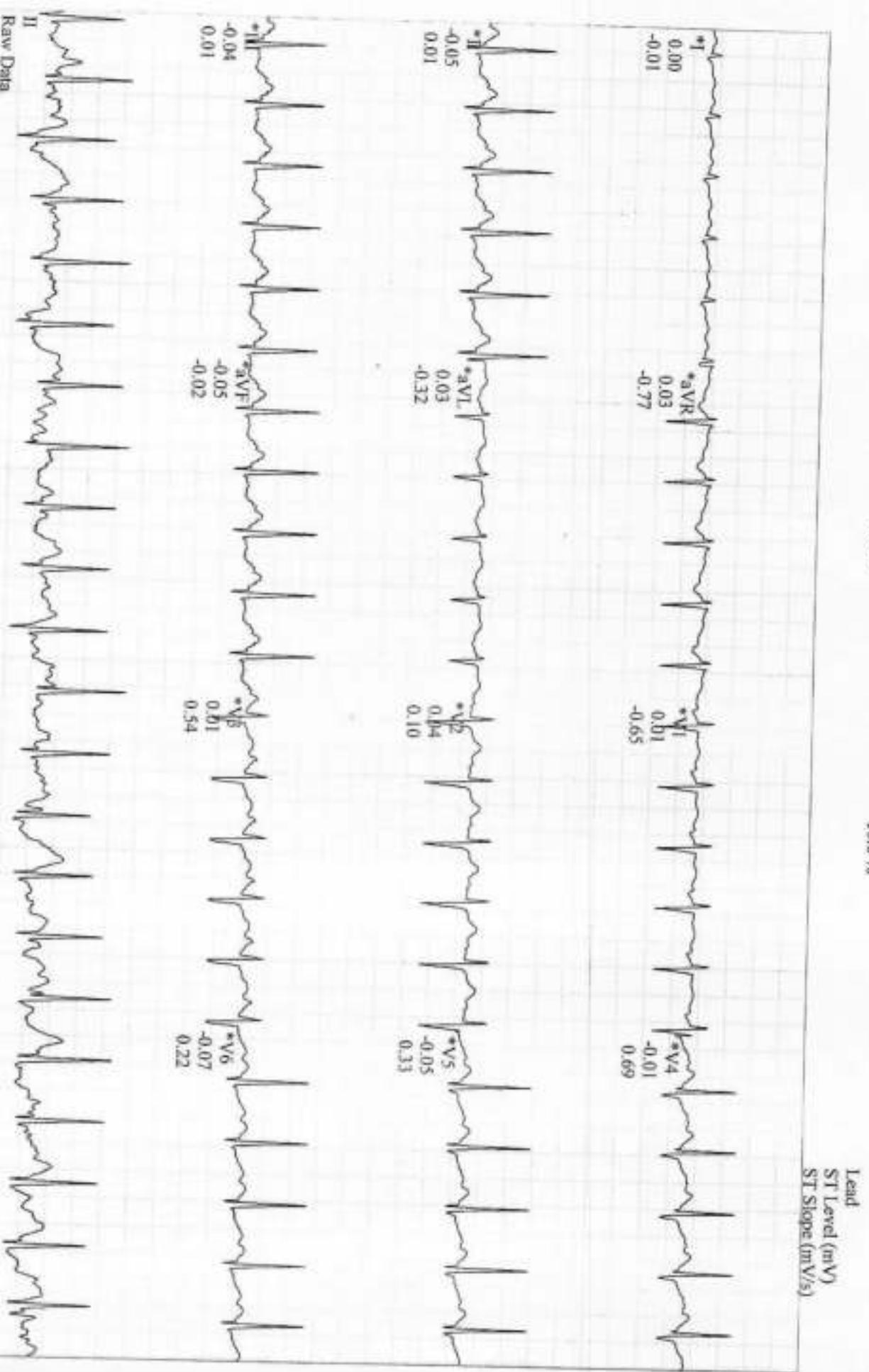
MRS. DELPIKA,  
Patient ID CCHA.97613  
12/30/2023  
12:34:06pm

131 bpm

Linked Medians  
EXERCISE  
STAGE 1  
02:50

BRUCE  
1.7 mph  
10.0 %

APOLLO CLINIC



\*Computer Synthesized Rhythms

MRS. DEEPIKA,  
Patient ID CCHA.97613  
12/30/2023  
12:37:06pm

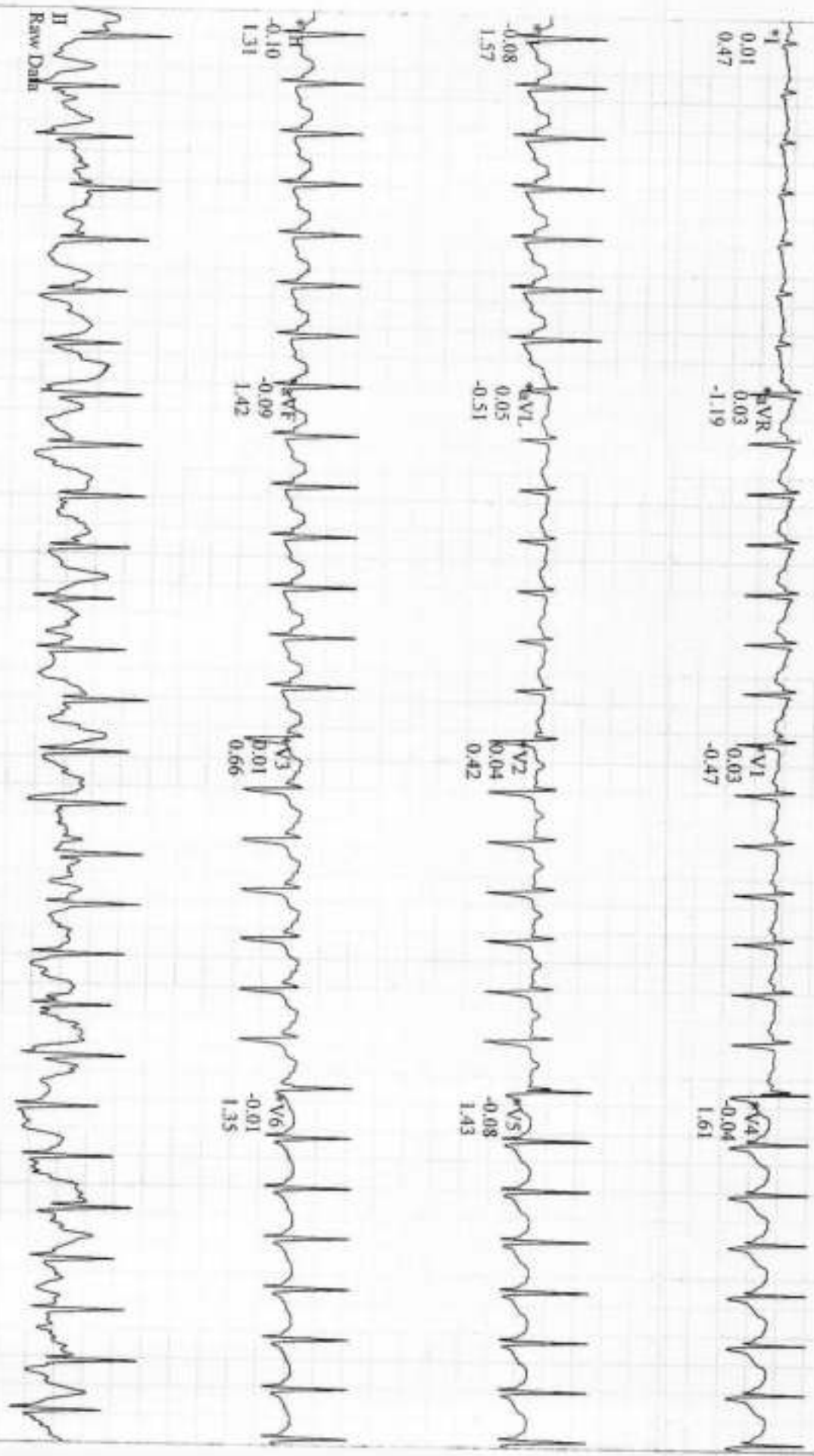
171 bpm  
90/60 mmHg

Linked Medians  
EXERCISE  
STAGE 2  
05:50

BRUCE  
2.5 mph  
12.0 %

APOLLO CLINIC

Lead  
ST Level (mV)  
ST Slope (mV/s)



\*Computer Synthesized Rhythms

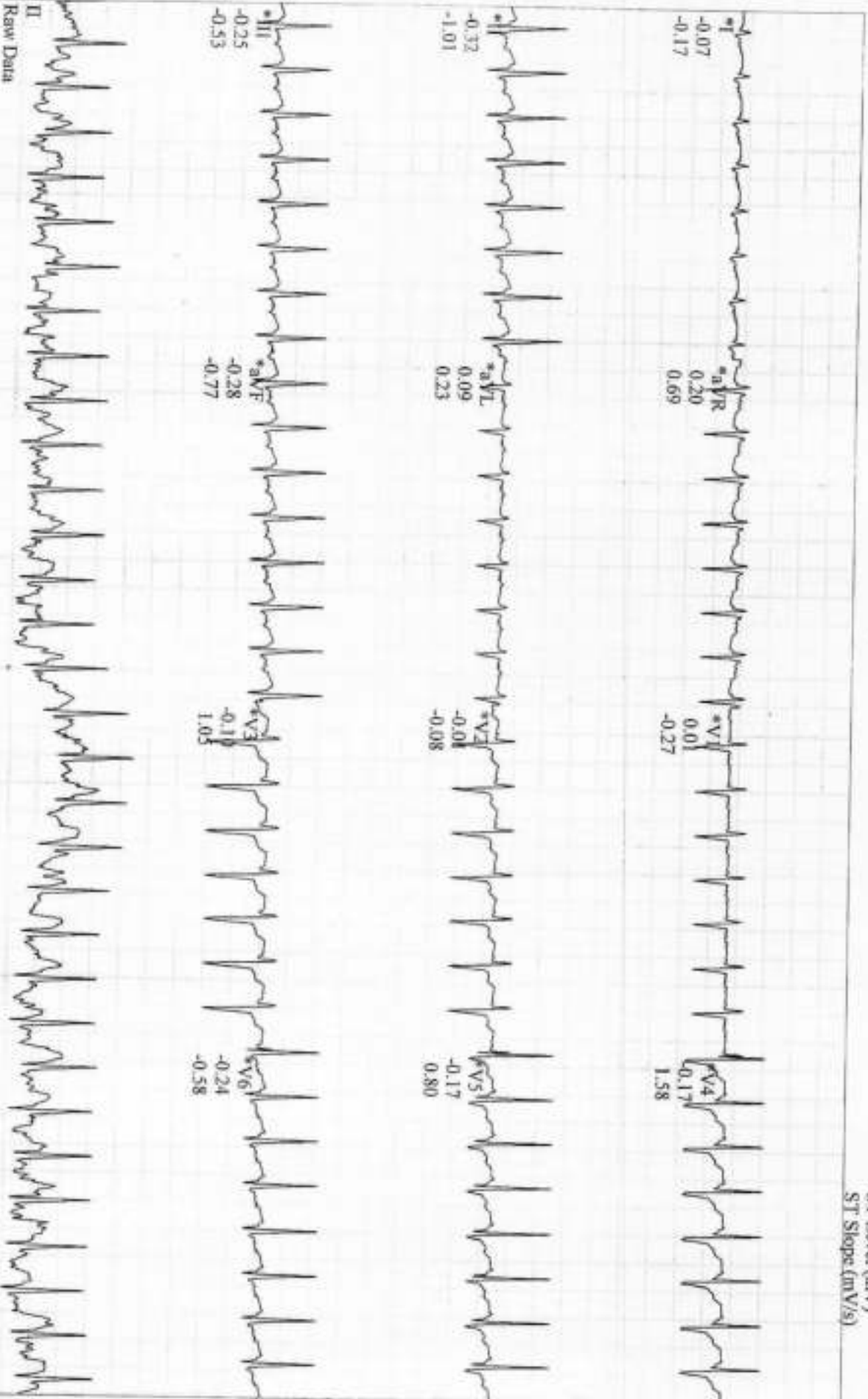
MRS. DEEPIKA,  
Patient ID CCHA.97613  
12/30/2023  
12:39:30pm

187 bpm  
100/80 mmHg

Linked Medians ( PEAK EXERCISE )  
EXERCISE BRUCE  
STAGE 3 3.4 mph  
08:14 14.0 %

APOLLO CLINIC

Lead  
ST Level (mV)  
ST Slope (mV/s)



Raw Data

\*Computer Synthesized Rhythms



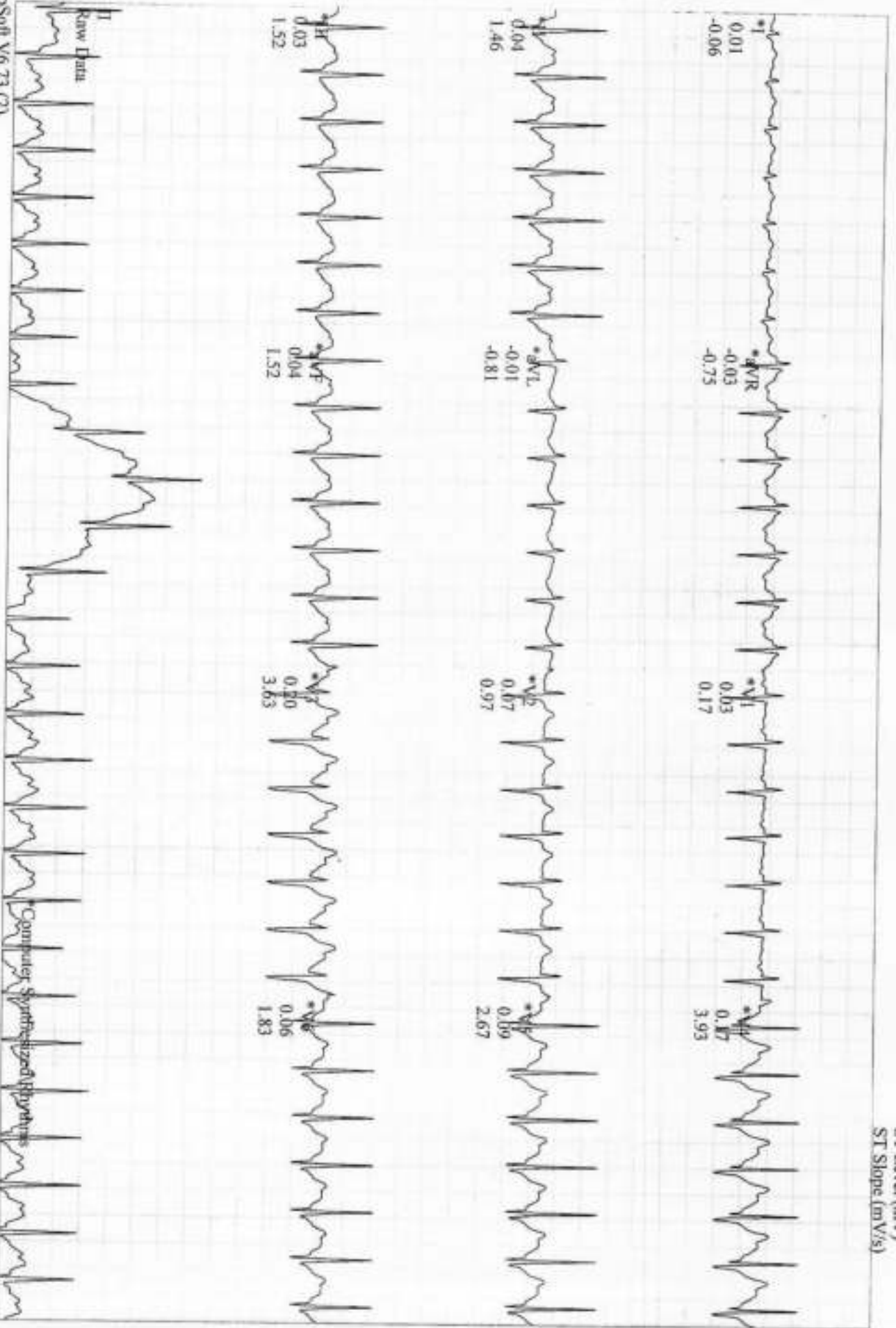
MRS. DEEPIKA,  
Patient ID CCHA.97613  
12/30/2023  
12:40:30pm

166 bpm

Linked Medians  
RECOVERY  
#1  
01:00

BRUCE  
0.0 mph  
0.0 %

APOLLO CLINIC



GE CardioSoft V6.73 (2)  
25 mm/s 10 mm/mV 50Hz FRF ← HR(V6,V2)

Start of Test: 12:30:32pm

Page 6

MRS. DEEPIKA,  
Patient ID CCHA.97613  
12/30/2023  
12:42:30pm

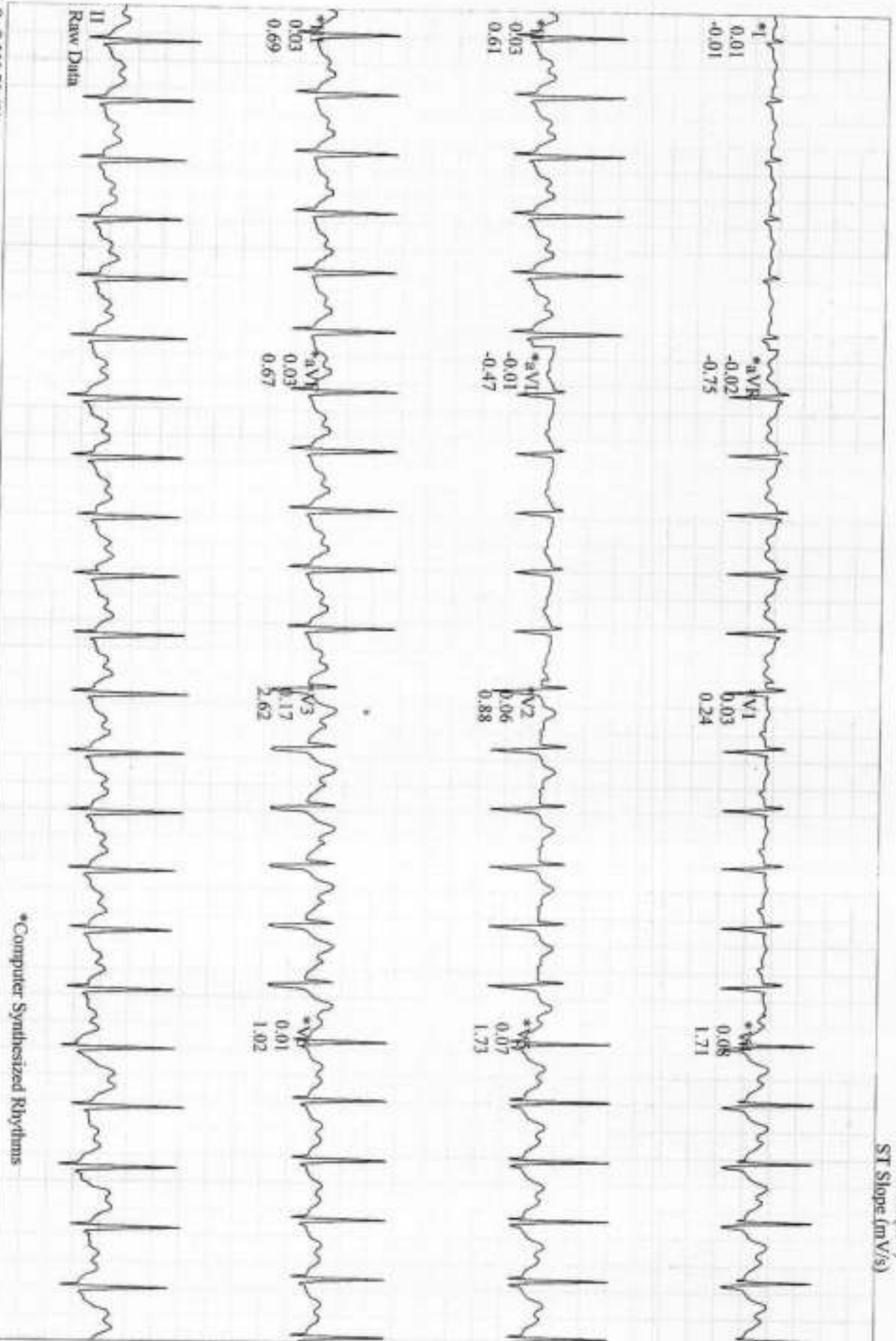
134 bpm  
100/80 mmHg

Linked Medians  
RECOVERY  
#1  
03:00

BRUCE  
0.0 mph  
0.0 %

APOLLO CLINIC

Lead  
ST Level (mV)  
ST Slope (mV/s)



\*Computer Synthesized Rhythms

Tabular Summary

APOLLO CLINIC

**MRS. DEEPIKA,**  
 Patient ID CCHA.97613  
 12/30/2023 Female 160 cm 62.3 kg  
 12:30:32pm 30yrs Asian  
 Meds:

Test Reason:  
 Medical History:  
 Ref. MD: Ordering MD:  
 Technician: Test Type:  
 Comment:

BRUCE: Total Exercise Time 08:14  
 Max HR: 190 bpm 100% of max predicted 190 bpm HR at rest: 114  
 Max BP: 100/80 mmHg BP at rest: 90/60 Max RPP: 19000 mmHg\*bpm  
 Maximum Workload: 10.10 METS  
 Max ST: -0.32 mV, 0.00 mV/s in II; EXERCISE STAGE 3 08:14  
 ST/HR index: 2.91  $\mu$ V/bpm  
**Reasons for Termination:** Target heart rate achieved  
**Summary:** Resting ECG: normal. Functional Capacity: normal. HR Response to Exercise: appropriate. BP Response to Exercise: normal resting BP - appropriate response. Chest Pain: none. Arrhythmias: none. ST Changes: none. Overall impression: Normal stress test.

Phase Name	Stage Name	Time in Stage	Speed (mph)	Grade (%)	Workload (METS)	HR (bpm)	BP (mmHg)	RPP (mmHg*bpm)	VE (l/min)	ST Level (II mV)	Comment
PRETEST	SUPINE	00:12	0.00	0.00	1.0	98			0	-0.07	
	STANDING	00:31	0.50	0.00	1.1	96	90/60	8640	2	-0.05	
	STAGE 1	03:00	1.70	10.00	4.6	134	90/60	12060	0	-0.02	
EXERCISE	STAGE 2	03:00	2.50	12.00	7.0	173	90/60	15570	1	-0.12	
	STAGE 3	02:14			1.0	187	100/80	18700	0	-0.32	
	RECOVERY	03:01	0.00	0.00	1.0	134	100/80	13400	0	0.03	

# POWER PRESCRIPTION

NAME: Deepika?

GENDER: M/F

DATE: 30/12/18

AGE: 20

UHID:

## RIGHT EYE

	SPH	CYL	AXIS	VISION
DISTANCE	-2.50	-0.25	90	6/6
NEAR	—			N/A

## LEFT EYE

	SPH	CYL	AXIS	VISION
DISTANCE	-2.00	—		6/6
NEAR	—			N/A

INSTRUCTIONS:

colour vision - Normal


  
SIGNATURE

**CERTIFICATE OF MEDICAL FITNESS**

This is to certify that I have conducted the clinical examination  
of Mrs. B. Deepika on 31/12/2023

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

<ul style="list-style-type: none"> <li>• Medically Fit</li> </ul>	Tick <input checked="" type="checkbox"/>
<ul style="list-style-type: none"> <li>• Fit with restrictions/recommendations</li> </ul> <p>Though following restrictions have been revealed, in my opinion, these are not impediments to the job.</p> <p>1. _____</p> <p>2. _____</p> <p>3. _____</p> <p>However the employee should follow the advice/medication that has been communicated to him/her.</p> <p>Review after _____</p>	<input type="checkbox"/>
<ul style="list-style-type: none"> <li>• Currently Unfit.</li> </ul> <p>Review after _____ recommended</p>	<input type="checkbox"/>
<ul style="list-style-type: none"> <li>• Unfit</li> </ul>	<input type="checkbox"/>

Dr.   
Medical Officer  
The Apollo Clinic, Manikonda

*This certificate is not meant for medico-legal purposes*

<b>Patient Name</b>	: Mrs. B DEEPIKA	<b>Age/Gender</b>	: 30 Y/F
<b>UHID/MR No.</b>	: CCHA.0000097613	<b>OP Visit No</b>	: CMANOPV190336
<b>Sample Collected on</b>	:	<b>Reported on</b>	: 30-12-2023 18:13
<b>LRN#</b>	: RAD2196343	<b>Specimen</b>	:
<b>Ref Doctor</b>	: SELF		
<b>Emp/Auth/TPA ID</b>	: 3348		

## DEPARTMENT OF RADIOLOGY

### ULTRASOUND - WHOLE ABDOMEN

**Liver** appears normal in size 13.29 cm and echotexture. No focal lesion is seen. PV and CBD normal. No dilatation of the intrahepatic biliary radicals.

**Gall bladder** is well distended. No evidence of calculus. Wall thickness appears normal. No evidence of periGB collection. No evidence of focal lesion is seen.

**Spleen** appears normal in size 11.00 cm . 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 : 10.22 x 4.13 cm .

Left kidney : 10.06 x 4.57 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 abnormality detected.

**Uterus** appears normal in size 6.49 x 3.81 x 2.79 cm . It shows normal shape & echo pattern. Endometrial echo-complex appears normal and measures 0.59 cm .No intra/extra uterine gestational sac seen.

**Both ovaries** appear normal in size, shape and echotexture.

Right ovary : 2.75 x 2.15 cm .

Left ovary : 3.27 x 2.05 cm .

**Multiple small follicles noted arranged at periphery of both ovaries.**

### IMPRESSION:-

- **BILATERAL PCOD.**

**Suggest – clinical correlation.**

**Patient Name** : Mrs. B DEEPIKA

**Age/Gender** : 30 Y/F

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



**Dr. MD RAHEEMUDDIN QURESHI**  
Radiology

<b>Patient Name</b>	: Mrs. B DEEPIKA	<b>Age/Gender</b>	: 30 Y/F
<b>UHID/MR No.</b>	: CCHA.0000097613	<b>OP Visit No</b>	: CMANOPV190336
<b>Sample Collected on</b>	:	<b>Reported on</b>	: 30-12-2023 20:02
<b>LRN#</b>	: RAD2196343	<b>Specimen</b>	:
<b>Ref Doctor</b>	: SELF		
<b>Emp/Auth/TPA ID</b>	: 3348		

**DEPARTMENT OF RADIOLOGY**

**X-RAY CHEST PA**

Cardia is normal .

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. MD RAHEEMUDDIN QURESHI**  
Radiology



<b>Patient Name</b>	: Mrs. B DEEPIKA	<b>Age/Gender</b>	: 30 Y/F
<b>UHID/MR No.</b>	: CCHA.0000097613	<b>OP Visit No</b>	: CMANOPV190336
<b>Sample Collected on</b>	:	<b>Reported on</b>	: 30-12-2023 18:09
<b>LRN#</b>	: RAD2196343	<b>Specimen</b>	:
<b>Ref Doctor</b>	: SELF		
<b>Emp/Auth/TPA ID</b>	: 3348		

**DEPARTMENT OF RADIOLOGY**

**SONO MAMMOGRAPHY - SCREENING**

**USG OF BOTH BREASTS**

**Real time B-Mode USG of both breasts:**

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

No evidence of focal, solid or cystic lesion.

No obvious asymmetry or distortion is noted.

No abnormal axillary lymphadenopathy is detected.

**CONCLUSION:**

No significant abnormality is seen in this study.

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



**Dr. MD RAHEEMUDDIN QURESHI**  
Radiology

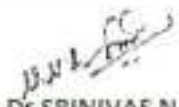
Patient Name : Mrs.B DEEPIKA	Collected : 30/Dec/2023 08:35AM
Age/Gender : 30 Y 9 M 20 D/F	Received : 30/Dec/2023 01:56PM
UHID/MR No : CCHA.0000097613	Reported : 30/Dec/2023 07:05PM
Visit ID : CMANOPV190336	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 3348	

**DEPARTMENT OF HAEMATOLOGY**

**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - TMT - PAN INDIA - FY2324**

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>HEMOGRAM , WHOLE BLOOD EDTA</b>				
<b>HAEMOGLOBIN</b>	12.8	g/dL	12-15	Spectrophotometer
PCV	37.40	%	36-46	Electronic pulse & Calculation
RBC COUNT	<b>4.83</b>	Million/cu.mm	3.8-4.8	Electrical Impedence
MCV	<b>77.5</b>	fL	83-101	Calculated
MCH	<b>26.5</b>	pg	27-32	Calculated
MCHC	34.2	g/dL	31.5-34.5	Calculated
R.D.W	<b>14.8</b>	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	7,740	cells/cu.mm	4000-10000	Electrical Impedence
<b>DIFFERENTIAL LEUCOCYtic COUNT (DLC)</b>				
NEUTROPHILS	54.7	%	40-80	Electrical Impedence
LYMPHOCYTES	37.5	%	20-40	Electrical Impedence
EOSINOPHILS	1.2	%	1-6	Electrical Impedence
MONOCYTES	6.2	%	2-10	Electrical Impedence
BASOPHILS	0.4	%	0-2	Electrical Impedence
<b>ABSOLUTE LEUCOCYTE COUNT</b>				
NEUTROPHILS	4233.78	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2902.5	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	92.88	Cells/cu.mm	20-500	Calculated
MONOCYTES	479.88	Cells/cu.mm	200-1000	Calculated
BASOPHILS	30.96	Cells/cu.mm	0-100	Calculated
<b>PLATELET COUNT</b>	341000	cells/cu.mm	150000-410000	Electrical impedence
<b>ERYTHROCYTE SEDIMENTATION RATE (ESR)</b>	11	mm at the end of 1 hour	0-20	MODIFIED WESTERGRENS
<b>PERIPHERAL SMEAR</b>				

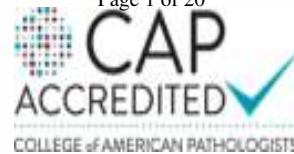
RBC NORMOCYTIC NORMOCHROMIC  
WBC WITHIN NORMAL LIMITS  
PLATELETS ARE ADEQUATE ON SMEAR  
NO HEMOPARASITES SEEN

  
**Dr. SRINIVAS N.S. NORI**  
M.B.B.S, M.D(Pathology)  
CONSULTANT PATHOLOGY

SIN No:BED230326754

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

Page 1 of 20




Patient Name : Mrs.B DEEPIKA  
Age/Gender : 30 Y 9 M 20 D/F  
UHID/MR No : CCHA.0000097613  
Visit ID : CMANOPV190336  
Ref Doctor : Dr.SELF  
Emp/Auth/TPA ID : 3348

Collected : 30/Dec/2023 08:35AM  
Received : 30/Dec/2023 01:56PM  
Reported : 30/Dec/2023 07:05PM  
Status : Final Report  
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

**DEPARTMENT OF HAEMATOLOGY**

**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - TMT - PAN INDIA - FY2324**

IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE



**Dr.SRINIVAS N.S.NORI**  
M.B.B.S,M.D(Pathology)  
CONSULTANT PATHOLOGY

SIN No:BED230326754

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

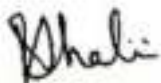


Patient Name : Mrs.B DEEPIKA	Collected : 30/Dec/2023 08:35AM
Age/Gender : 30 Y 9 M 20 D/F	Received : 30/Dec/2023 01:56PM
UHID/MR No : CCHA.0000097613	Reported : 31/Dec/2023 10:19AM
Visit ID : CMANOPV190336	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 3348	

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - TMT - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA</b>				
BLOOD GROUP TYPE	A			Microplate technology
Rh TYPE	Positive			Microplate technology

Dr.R.SHALINI  
M.B.B.S,M.D(Pathology)  
Consultant Pathologist

SIN No:BED230326754

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

Patient Name : Mrs.B DEEPIKA	Collected : 30/Dec/2023 08:35AM
Age/Gender : 30 Y 9 M 20 D/F	Received : 30/Dec/2023 02:09PM
UHID/MR No : CCHA.0000097613	Reported : 30/Dec/2023 03:08PM
Visit ID : CMANOPV190336	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 3348	

**DEPARTMENT OF BIOCHEMISTRY**

**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - TMT - PAN INDIA - FY2324**

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, FASTING , NAF PLASMA	106	mg/dL	70-100	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:**

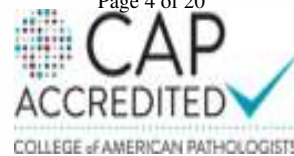
- The diagnosis of Diabetes requires a fasting plasma glucose of  $> \text{ or } = 126 \text{ mg/dL}$  and/or a random / 2 hr post glucose value of  $> \text{ or } = 200 \text{ mg/dL}$  on at least 2 occasions.
- Very high glucose levels ( $>450 \text{ mg/dL}$  in adults) may result in Diabetic Ketoacidosis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

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

SIN No:PLF02082968

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

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Patient Name : Mrs.B DEEPIKA	Collected : 30/Dec/2023 01:47PM
Age/Gender : 30 Y 9 M 20 D/F	Received : 31/Dec/2023 08:57AM
UHID/MR No : CCHA.0000097613	Reported : 31/Dec/2023 09:46AM
Visit ID : CMANOPV190336	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 3348	

**DEPARTMENT OF BIOCHEMISTRY**

**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - TMT - PAN INDIA - FY2324**

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	101	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.



**Dr. RAJESH BATTINA**  
PhD.(Biochemistry)  
Consultant Biochemist

SIN No:PLP1404836

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



Patient Name : Mrs.B DEEPIKA	Collected : 30/Dec/2023 08:35AM
Age/Gender : 30 Y 9 M 20 D/F	Received : 30/Dec/2023 02:11PM
UHID/MR No : CCHA.0000097613	Reported : 30/Dec/2023 05:10PM
Visit ID : CMANOPV190336	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 3348	

**DEPARTMENT OF BIOCHEMISTRY**

**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - TMT - PAN INDIA - FY2324**

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA</b>				
HBA1C, GLYCATED HEMOGLOBIN	<b>5.8</b>	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	120	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. RAJESH BATTINA**  
PhD.(Biochemistry)  
Consultant Biochemist

SIN No:EDT230121187

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



Patient Name : Mrs.B DEEPIKA	Collected : 30/Dec/2023 08:35AM
Age/Gender : 30 Y 9 M 20 D/F	Received : 30/Dec/2023 02:11PM
UHID/MR No : CCHA.0000097613	Reported : 30/Dec/2023 05:10PM
Visit ID : CMANOPV190336	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 3348	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - TMT - PAN INDIA - FY2324

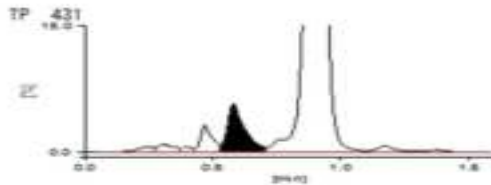
Chromatogram Report

HLCT2208 VS. 28 1 2023-12-30 16:16:55  
 ID EDT230121187  
 Sample No. 12300158 SL 0003 - 08  
 Patient ID  
 Name  
 Comment

CALIB Y = 1.1689X + 0.6048			
Name	%	Time	Area
ATA	0.6	0.24	8.31
A1B	0.7	0.30	13.47
F	0.3	0.40	5.40
LA1C+	1.7	0.47	31.43
SA1C	5.8	0.58	81.84
AO	92.6	0.89	1686.55
H-V0			
H-V1			
H-V2			

Total Area 1827.00

HbA1c 5.8 % IFCC 39 mmol/mol  
 HbA1 7.0 % HbF 0.3 %




Dr. RAJESH BATTINA  
 PhD.(Biochemistry)  
 Consultant Biochemist

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**DEPARTMENT OF BIOCHEMISTRY**

**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - TMT - PAN INDIA - FY2324**

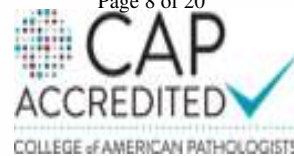


**Dr. RAJESH BATTINA**  
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Page 8 of 20



Patient Name : Mrs.B DEEPIKA	Collected : 30/Dec/2023 08:35AM
Age/Gender : 30 Y 9 M 20 D/F	Received : 30/Dec/2023 01:53PM
UHID/MR No : CCHA.0000097613	Reported : 30/Dec/2023 03:48PM
Visit ID : CMANOPV190336	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 3348	

**DEPARTMENT OF BIOCHEMISTRY**

**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - TMT - PAN INDIA - FY2324**

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>LIPID PROFILE , SERUM</b>				
TOTAL CHOLESTEROL	180	mg/dL	<200	CHO-POD
TRIGLYCERIDES	113	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	48	mg/dL	40-60	Enzymatic Immuno-inhibition
NON-HDL CHOLESTEROL	<b>132</b>	mg/dL	<130	Calculated
LDL CHOLESTEROL	<b>109.4</b>	mg/dL	<100	Calculated
VLDL CHOLESTEROL	22.6	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.75		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. RAJESH BATTINA**  
PhD.(Biochemistry)  
Consultant Biochemist

SIN No:SE04588505

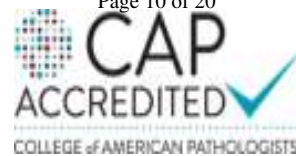
This test has been performed at Apollo Health & Lifestyle Ltd, Global Reference Laboratory,Hyderabad



Patient Name : Mrs.B DEEPIKA	Collected : 30/Dec/2023 08:35AM
Age/Gender : 30 Y 9 M 20 D/F	Received : 30/Dec/2023 01:53PM
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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - TMT - PAN INDIA - FY2324



Dr. RAJESH BATTINA  
PhD.(Biochemistry)  
Consultant Biochemist

SIN No:SE04588505

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**DEPARTMENT OF BIOCHEMISTRY**

**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - TMT - PAN INDIA - FY2324**

- Correlation with PT (Prothrombin Time) helps.

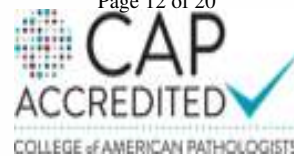


**Dr. RAJESH BATTINA**  
PhD.(Biochemistry)  
Consultant Biochemist

SIN No:SE04588505

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

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Patient Name : Mrs.B DEEPIKA	Collected : 30/Dec/2023 08:35AM
Age/Gender : 30 Y 9 M 20 D/F	Received : 30/Dec/2023 01:53PM
UHID/MR No : CCHA.0000097613	Reported : 30/Dec/2023 02:51PM
Visit ID : CMANOPV190336	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 3348	

**DEPARTMENT OF IMMUNOLOGY**

**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - TMT - PAN INDIA - FY2324**

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM</b>				
TRI-IODOTHYRONINE (T3, TOTAL)	0.88	ng/mL	0.87-1.78	CLIA
THYROXINE (T4, TOTAL)	9.05	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	1.393	µIU/mL	0.38-5.33	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

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



**Dr. RAJESH BATTINA**  
PhD.(Biochemistry)  
Consultant Biochemist

SIN No:SPL23194261

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





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UHID/MR No : CCHA.0000097613	Reported : 30/Dec/2023 02:51PM
Visit ID : CMANOPV190336	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 3348	

DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - TMT - PAN INDIA - FY2324

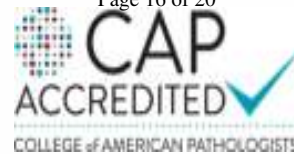


Dr. RAJESH BATTINA  
PhD.(Biochemistry)  
Consultant Biochemist

SIN No:SPL23194261

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

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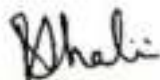
Patient Name : Mrs.B DEEPIKA	Collected : 30/Dec/2023 08:35AM
Age/Gender : 30 Y 9 M 20 D/F	Received : 30/Dec/2023 01:52PM
UHID/MR No : CCHA.0000097613	Reported : 30/Dec/2023 05:05PM
Visit ID : CMANOPV190336	Status : Final Report
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Emp/Auth/TPA ID : 3348	

DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - TMT - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>COMPLETE URINE EXAMINATION (CUE) , URINE</b>				
<b>PHYSICAL EXAMINATION</b>				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	HAZY		CLEAR	Visual
pH	6.0		5-7.5	Bromothymol Blue
SP. GRAVITY	1.010		1.002-1.030	Bromothymol Blue
<b>BIOCHEMICAL EXAMINATION</b>				
URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE		NEGATIVE	GOD - POD
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	SODIUM NITRO PRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	EHRlich
BLOOD	NEGATIVE		NEGATIVE	Peroxidase
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	TRACE		NEGATIVE	PYRROLE HYDROLYSIS
<b>CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY</b>				
PUS CELLS	4-6	/hpf	0-5	Microscopy
EPITHELIAL CELLS	3-4	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY



  
Dr. R. SHALINI  
M.B.B.S, M.D (Pathology)  
Consultant Pathologist

SIN No:UR2254511

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

Patient Name : Mrs.B DEEPIKA	Collected : 30/Dec/2023 01:47PM
Age/Gender : 30 Y 9 M 20 D/F	Received : 31/Dec/2023 10:40AM
UHID/MR No : CCHA.0000097613	Reported : 31/Dec/2023 06:11PM
Visit ID : CMANOPV190336	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 3348	

**DEPARTMENT OF CLINICAL PATHOLOGY**

**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - TMT - PAN INDIA - FY2324**

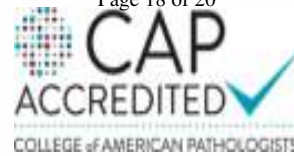
Test Name	Result	Unit	Bio. Ref. Range	Method
URINE GLUCOSE(POST PRANDIAL)	NEGATIVE		NEGATIVE	Dipstick

*Dr. Srinivas N.S. Nori*  
**Dr.SRINIVAS N.S.NORI**  
**M.B.B.S,M.D(Pathology)**  
**CONSULTANT PATHOLOGY**

SIN No:UPP016113

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

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Patient Name : Mrs.B DEEPIKA	Collected : 30/Dec/2023 08:35AM
Age/Gender : 30 Y 9 M 20 D/F	Received : 30/Dec/2023 01:52PM
UHID/MR No : CCHA.0000097613	Reported : 30/Dec/2023 07:55PM
Visit ID : CMANOPV190336	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
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**DEPARTMENT OF CLINICAL PATHOLOGY**

**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - TMT - PAN INDIA - FY2324**

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

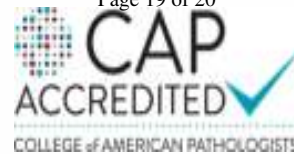


**Dr.SRINIVAS N.S.NORI**  
M.B.B.S,M.D(Pathology)  
CONSULTANT PATHOLOGY

SIN No:UF010115

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

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Patient Name : Mrs.B DEEPIKA	Collected : 18/Jan/2024 07:11PM
Age/Gender : 30 Y 10 M 8 D/F	Received : 19/Jan/2024 11:03AM
UHID/MR No : CCHA.0000097613	Reported : 20/Jan/2024 11:36AM
Visit ID : CMANOPV190336	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
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**DEPARTMENT OF CYTOLOGY**

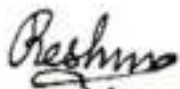
**LBC PAP TEST (PAPSURE) , CERVICAL SAMPLE**

	<b>CYTOLOGY NO.</b>	1084/24
<b>I</b>	<b>SPECIMEN</b>	
<b>a</b>	SPECIMEN ADEQUACY	ADEQUATE
<b>b</b>	<b>SPECIMEN TYPE</b>	LIQUID-BASED PREPARATION (LBC)
	SPECIMEN NATURE/SOURCE	CERVICAL SMEAR
<b>c</b>	ENDOCERVICAL-TRANSFORMATION ZONE	PRESENT WITH ENDOCERVICAL CELLS
<b>d</b>	COMMENTS	SATISFACTORY FOR EVALUATION
<b>II</b>	<b>MICROSCOPY</b>	Superficial and intermediate squamous epithelial cells with benign morphology.  Inflammatory cells, predominantly neutrophils.  Negative for intraepithelial lesion/malignancy.
<b>III</b>	<b>RESULT</b>	
<b>a</b>	<b>EPITHELIAL CELL</b>	
	SQUAMOUS CELL ABNORMALITIES	NOT SEEN
	GLANDULAR CELL ABNORMALITIES	NOT SEEN
<b>b</b>	<b>ORGANISM</b>	NIL
<b>IV</b>	<b>INTERPRETATION</b>	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:CS073187

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

