





Patient Name

: Mrs.JERRI PRASANTHI

Age/Gender

: 32 Y 10 M 27 D/F

UHID/MR No

: CVEL.0000138082

Visit ID Ref Doctor : CVELOPV189844

Emp/Auth/TPA ID

: Dr.Dr. SHILFA NIGAR N

: 178498

Collected : 06/Sep/2023 08:42AM

Received

: 06/Sep/2023 12:18PM

Reported

: 06/Sep/2023 02:18PM

Status Sponsor Name : Final Report

: ARCOFEMI HEALTHCARE LIMITED

#### **DEPARTMENT OF HAEMATOLOGY**

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

#### PERIPHERAL SMEAR, WHOLE BLOOD EDTA

METHODOLOGY

: Microscopio

RBC MORPHOLOGY

WBC MORPHOLOGY

: Mild anisocytosis, microcytic hypochromic RBC's admixed with normocytic normochromic

RBC's noted.

: Normal in number, Morphology and distribution. No abnormal cells seen.

**PLATELETS** 

: Adequate in number.

**PARASITES** 

: No haemoparasites seen

NOTE/COMMENT

: Please correlate clinically.

Page 1 of 17





Address: Plot no: 46, 7th Street, Tansinagar, Velacherry, Chennai,Tamil Nadu







Patient Name : Mrs.JERRI PRASANTHI

Age/Gender : 32 Y 10 M 27 D/F

UHID/MR No : CVEL.0000138082 Visit ID : CVELOPV189844

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Emp/Auth/TPA ID : 178498

Collected : 06/Sep/2023 08:42AM Received : 06/Sep/2023 12:18PM

Reported : 06/Sep/2023 02:18PM

: Final Report Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPA	RTMENT	OF HAEN	IOTAL	OGY
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Status

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

3 4 6 2	% on/cu.mm fL pg g/dL % ls/cu.mm	36-46  3.8-4.8  83-101  27-32  31.5-34.5  11.6-14  4000-10000  40-80  20-40	Electronic pulse & Calculation Electrical Impedence Calculated Calculated Calculated Calculated Electrical Impedance Electrical Impedance
3 4 6 6 2 00 cell	fL pg g/dL % ls/cu.mm %	83-101 27-32 31.5-34.5 11.6-14 4000-10000 40-80 20-40	Calculated Calculated Calculated Calculated Electrical Impedance
4 6 2 00 cell 9 8 6	pg g/dL % ls/cu.mm	27-32 31.5-34.5 11.6-14 4000-10000 40-80 20-40	Calculated Calculated Calculated Electrical Impedance
6 2 00 cell	g/dL % ls/cu.mm	31.5-34.5 11.6-14 4000-10000 40-80 20-40	Calculated Calculated Electrical Impedance Electrical Impedance
2 cell 9 8	% Is/cu.mm	11.6-14 4000-10000 40-80 20-40	Calculated  Electrical Impedance  Electrical Impedance
9 8	ls/cu.mm	4000-10000 40-80 20-40	Electrical Impedance
9 B	%	40-80 20-40	Electrical Impedance
8	%	20-40	
8	%	20-40	· · · · · · · · · · · · · · · · · · ·
}			Electrical Impedance
	%		
		1-6	Electrical Impedance
	%	2-10	Electrical Impedance
•	%	<1-2	Electrical Impedance
	•		
.9 Cell	ls/cu.mm	2000-7000	Electrical Impedance
.8 Cell	ls/cu.mm	1000-3000	Electrical Impedance
.8 Cell	ls/cu.mm	20-500	Electrical Impedance
.8 Cell	ls/cu.mm	200-1000	Electrical Impedance
7 Cell	ls/cu.mm	0-100	Electrical Impedance
00 cell	ls/cu.mm	150000-410000	Electrical impedence
		0-20	Modified Westergre
	8.8 Cel 8 Cel 7 Cel 00 cel	8 Cells/cu.mm 8 Cells/cu.mm 8 Cells/cu.mm 7 Cells/cu.mm	6.8         Cells/cu.mm         1000-3000           8         Cells/cu.mm         20-500           8         Cells/cu.mm         200-1000           7         Cells/cu.mm         0-100           00         cells/cu.mm         150000-410000           mm at the end         0-20

METHODOLOGY : Microscopic

: Mild anisocytosis, microcytic hypochromic RBC's admixed with normocytic normochromic RBC MORPHOLOGY

RBC's noted.

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

: Adequate in number. **PLATELETS** 

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Patient Name

: Mrs.JERRI PRASANTHI

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: 32 Y 10 M 27 D/F

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Visit ID Ref Doctor

**PARASITES** 

: CVELOPV189844

Emp/Auth/TPA ID

: Dr.Dr. SHILFA NIGAR N

: 178498

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: 06/Sep/2023 08:42AM : 06/Sep/2023 12:18PM

Received

: 06/Sep/2023 02:18PM

Reported Status

Bio. Ref. Range

Sponsor Name

Unit

: Final Report

: ARCOFEMI HEALTHCARE LIMITED

Method

# **DEPARTMENT OF HAEMATOLOGY**

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

**Test Name** Result

NOTE/COMMENT

: Please correlate clinically.

: No haemoparasites seen

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SIN No:BED230214031









Patient Name : 32 Y 10 M 27 D/F

: Mrs.JERRI PRASANTHI

Age/Gender UHID/MR No

: CVEL.0000138082

Visit ID

: CVELOPV189844

Ref Doctor

: Dr.Dr. SHILFA NIGAR N

Emp/Auth/TPA ID : 178498

Collected : 06/Sep/2023 08:42AM Received

: 06/Sep/2023 12:18PM

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: 06/Sep/2023 04:04PM

Status : Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

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

BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA				
BLOOD GROUP TYPE	0	Microplate Hemagglutination		
Rh TYPE	Positive	Microplate Hemagglutination		

PLEASE NOTE THIS SAMPLE HAS BEEN TESTED ONLY FOR ABO MAJOR GROUPING AND ANTI D ONLY.

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SIN No:BED230214031

Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)









Patient Name

: Mrs.JERRI PRASANTHI

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: 32 Y 10 M 27 D/F

UHID/MR No Visit ID

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: CVELOPV189844 : Dr.Dr. SHILFA NIGAR N

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Collected

: 06/Sep/2023 08:42AM

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: 06/Sep/2023 12:18PM

Reported

: 06/Sep/2023 01:11PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

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

GLUCOSE, FASTING, NAF PLASMA 115 mg/dL 70-100 HEXOKINASE

#### **Comment:**

As per American Diabetes Guidelines, 2023

: 178498

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.

GLUCOSE, POST PRANDIAL (PP), 2 HOURS, SODIUM FLUORIDE PLASMA (2	99	mg/dL	70-140	HEXOKINASE
HR)				

#### **Comment:**

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

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

HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD EDTA	6.5	%	HPLC
ESTIMATED AVERAGE GLUCOSE (eAG),	140	mg/dL	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						
WHOLE BLOOD EDTA						

#### **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)

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SIN No:PLF02023430,PLP1365793,EDT230081844









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Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

0 - 4.97

Calculated

DEPARTMENT	OF BIO	CHEMIS	STRY
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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		
LIPID PROFILE , SERUM						
TOTAL CHOLESTEROL	153	mg/dL	<200	CHO-POD		
TRIGLYCERIDES	66	mg/dL	<150	GPO-POD		
HDL CHOLESTEROL	29	mg/dL	40-60	Enzymatic Immunoinhibition		
NON-HDL CHOLESTEROL	124	mg/dL	<130	Calculated		
LDL CHOLESTEROL	110.8	mg/dL	<100	Calculated		
VLDL CHOLESTEROL	13.2	mg/dL	<30	Calculated		

#### **Comment:**

CHOL/HDL RATIO

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

5.28

	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

- 1. Measurements in the same patient on different days can show physiological and analytical variations.
- 2. NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.
- 3. Primary prevention algorithm now includes absolute risk estimation and lower LDL Cholesterol target levels to determine eligibility of drug therapy.
- 4. 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.
- 5. 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.
- 6. VLDL, LDL Cholesterol Non HDL Cholesterol, CHOL/HDL RATIO, LDL/HDL RATIO are calculated parameters when Triglycerides are below 350 mg/dl. When Triglycerides are more than 350 mg/dl LDL cholesterol is a direct measurement.

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: ARCOFEMI HEALTHCARE LIMITED

# **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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SIN No:SE04473155







Patient Name : Mrs.JERRI PRASANTHI

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UHID/MR No : CVEL.0000138082 Visit ID : CVELOPV189844

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Status : Final Report

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT	OF E	BIOCHEM	ISTRY
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ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324					
ACCOPEMI - MEDIWITELE - FOLE BODT TILALITI ANNOAL FEOS CHECK - FEMALE - 2D ECHO - FAN INDIA - F12524					
Test Name	Result	Unit	Bio. Ref. Range	Method	

LIVER FUNCTION TEST (LFT), SERUM						
BILIRUBIN, TOTAL	0.98	mg/dL	0.3–1.2	DPD		
BILIRUBIN CONJUGATED (DIRECT)	0.15	mg/dL	<0.2	DPD		
BILIRUBIN (INDIRECT)	0.83	mg/dL	0.0-1.1	Dual Wavelength		
ALANINE AMINOTRANSFERASE (ALT/SGPT)	32	U/L	<35	IFCC		
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	18.0	U/L	<35	IFCC		
ALKALINE PHOSPHATASE	201.00	U/L	30-120	IFCC		
PROTEIN, TOTAL	7.50	g/dL	6.6-8.3	Biuret		
ALBUMIN	4.40	g/dL	3.5-5.2	BROMO CRESOL GREEN		
GLOBULIN	3.10	g/dL	2.0-3.5	Calculated		
A/G RATIO	1.42		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

RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT), SERUM						
CREATININE	0.71	mg/dL	0.72 – 1.18	JAFFE METHOD		
UREA	17.00	mg/dL	17-43	GLDH, Kinetic Assay		
BLOOD UREA NITROGEN	7.9	mg/dL	8.0 - 23.0	Calculated		
URIC ACID	5.70	mg/dL	2.6-6.0	Uricase PAP		
CALCIUM	9.40	mg/dL	8.8-10.6	Arsenazo III		
PHOSPHORUS, INORGANIC	3.30	mg/dL	2.5-4.5	Phosphomolybdate Complex		
SODIUM	138	mmol/L	136–146	ISE (Indirect)		
POTASSIUM	3.5	mmol/L	3.5–5.1	ISE (Indirect)		
CHLORIDE	100	mmol/L	101–109	ISE (Indirect)		

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SIN No:SE04473155

APOLLO CLINICS NETWORK



Visit ID



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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	31.00	U/L	<38	IFCC	

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SIN No:SE04473155







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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	

THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM						
TRI-IODOTHYRONINE (T3, TOTAL)	0.93	ng/mL	0.7-2.04	CLIA		
THYROXINE (T4, TOTAL)	10.19	μg/dL	6.09-12.23	CLIA		
THYROID STIMULATING HORMONE (TSH)	3.374	μIU/mL	0.34-5.60	CLIA		

#### **Comment:**

#### 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

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

TSH	T3	T4	FT4	Conditions
High	Low	Low	Low	Primary Hypothyroidism, Post Thyroidectomy, Chronic Autoimmune Thyroiditis
High	N	N	IN	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

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: ARCOFEMI HEALTHCARE LIMITED

#### **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

High High

High

High

Pituitary Adenoma; TSHoma/Thyrotropinoma

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SIN No:SPL23126787









Patient Name

: Mrs.JERRI PRASANTHI

Age/Gender UHID/MR No : 32 Y 10 M 27 D/F : CVEL.0000138082

Visit ID

: CVELOPV189844

Ref Doctor

: Dr.Dr. SHILFA NIGAR N

Emp/Auth/TPA ID : 178498

Collected Received

: 06/Sep/2023 08:42AM : 06/Sep/2023 12:32PM

: 06/Sep/2023 01:18PM

Reported

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

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

COMPLETE URINE EXAMINATION (C	<b>UE)</b> , <i>URINE</i>			
PHYSICAL EXAMINATION			9	
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
рН	6.0		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	¥1	NEGATIVE	SODIUM NITRO PRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	MODIFED EHRLICH REACTION
BLOOD	NEGATIVE		NEGATIVE	Peroxidase
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	LEUCOCYTE ESTERASE
CENTRIFUGED SEDIMENT WET MO	OUNT AND MICROSCOPY			
PUS CELLS	1-2	/hpf	0-5	Microscopy
EPITHELIAL CELLS	2-4	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	ABSENT		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY

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SIN No:UR2178919







Patient Name : Mrs.JERRI PRASANTHI

Age/Gender : 32 Y 10 M 27 D/F

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Ref Doctor : Dr.Dr. SHILFA NIGAR N

Emp/Auth/TPA ID 178498 Collected : 06/Sep/2023 08:42AM

Received : 06/Sep/2023 12:32PM Reported : 06/Sep/2023 02:20PM

Status : Final Report

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

LITIP/AUII/TFA ID . 170490													
DI	EPARTMENT OF CLI	NICAL PATHOL	OGY										
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									

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SIN No:UPP015425,UF009398









Patient Name : Mrs.JERRI PRASANTHI

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Ref Doctor : Dr.Dr. SHILFA NIGAR N

Emp/Auth/TPA ID : 178498

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Received : 07/Sep/2023 09:54AM Reported : 08/Sep/2023 03:23PM

Status : Final Report

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

#### **DEPARTMENT OF CYTOLOGY**

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

	CYTOLOGY NO.	15021/23
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.
		Inflammatory cells, predominantly neutrophils.
		Negative for intraepithelial lesion/ malignancy.
III	RESULT	
a	EPITHEIAL CELL	
	SQUAMOUS CELL ABNORMALITIES	NOT SEEN
	GLANDULAR CELL ABNORMALITIES	NOT SEEN
b	ORGANISM	FUNGAL ORGANISMS MORPHOLOGICALLY CONSISTENT WITH CANDIDA SPP
IV	INTERPRETATION	NEGATIVE FOR INTRAEPITHELIAL LESION OR MALIGNANCY,FUNGAL ELEMENTS NOTED SUGGESTIVE OF CANDIDIASIS

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.MARQUESS RAJ M.D,DipRCPath,D.N.B(PATH) Consultant Pathologist DR.R.SRIVATSAN M.D.(Biochemistry) Dr THILAGA M.B.B.S,M.D(Pathology)
Consultant Pathologist

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

Page 16 of 17











Patient Name

: Mrs.JERRI PRASANTHI

Age/Gender

: 32 Y 10 M 27 D/F

UHID/MR No Visit ID : CVEL.0000138082

Ref Doctor

: CVELOPV189844 : Dr.Dr. SHILFA NIGAR N

Emp/Auth/TPA ID : 178498

Collected

: 06/Sep/2023 08:42AM

Received

: 07/Sep/2023 09:54AM

Reported Status : 08/Sep/2023 03:23PM

Sponsor Name

: Final Report

.

: ARCOFEMI HEALTHCARE LIMITED

## **DEPARTMENT OF CYTOLOGY**

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

Page 17 of 17

SIN No:CS067482

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





Patient Name : Mrs. JERRI PRASANTHI Age/Gender : 32 Y/F

UHID/MR No.: CVEL.0000138082OP Visit No: CVELOPV189844Sample Collected on: 06-09-2023 17:01

Ref Doctor : Dr. SHILFA NIGAR N

Emp/Auth/TPA ID : 178498

#### DEPARTMENT OF RADIOLOGY

## **ULTRASOUND - WHOLE ABDOMEN**

Liver appears normal in size (14.7 cms) with increased echogenecity. No focal lesion is seen.

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. PV and CBD normal.

**Spleen** appears normal (8.2 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 hydronephrosis seen on either side.

**Right kidney -** 9.4 x 4.0 cms.

Left kidney - 9.5 x 4.2 cms. A calculus measuring 3 mm in lower pole of the left kidney.

<u>Urinary Bladder</u> 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 7.2 x 4.1 x 4.2 cms. It shows normal shape & echo pattern.

Endometrial echo-complex appears normal and measures 8.5 mm.

## Both ovaries are polycystic.

**Right ovary** -2.9 x 2.4 x 3.2 cms Vol 11.1 ml.

**Left ovary -** 3.2 x 1.8 x 3.9 cms Vol 10.8 ml.

No evidence of any adnexal pathology noted.

## **IMPRESSION:-**

- \* GRADE I FATTY LIVER.
- \* LEFT RENAL CALCULUS.
- \* BILATERAL POLYCYSTIC OVARIES.

(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.



Patient Name : Mrs. JERRI PRASANTHI Age/Gender : 32 Y/F

Dr. PASUPULETI SANTOSH KUMAR

Radiology

M.B.B.S., DNB (RADIODIAGNOSIS)



Patient Name : Mrs. JERRI PRASANTHI Age/Gender : 32 Y/F

**UHID/MR No.** : CVEL.0000138082 **OP Visit No** : CVELOPV189844

Sample Collected on : Reported on : 06-09-2023 13:18

Emp/Auth/TPA ID : 178498

**Ref Doctor** 

#### 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.

: Dr. SHILFA NIGAR N

Both diaphragms are normal in position and contour.

Thoracic wall and soft tissues appear normal.

# **CONCLUSION:**

No obvious abnormality seen

Dr. PASUPULETI SANTOSH KUMAR M.B.B.S., DNB (RADIODIAGNOSIS)

Radiology

Mrs. JERRI PRASANTHI

Age/Gender: 32 Y/F Address: CHENNAI

CHENNAI, TAMIL NADU Location:

Doctor:

Department: GENERAL

VELACHERY\_03122022 Rate Plan:

Sponsor: ARCOFEMI HEALTHCARE LIMITED Consulting Doctor: Dr. V J NIRANJANA BHARATHI

**Doctor's Signature** 

MR No: CVEL.0000138082 Visit ID: CVELOPV189844 Visit Date: 06-09-2023 08:36

Discharge Date:

Name: Mrs. JERRI PRASANTHI

Age/Gender: 32 Y/F Address: CHENNAI

Location: CHENNAI, TAMIL NADU

Doctor:

Department: GENERAL

Rate Plan: VELACHERY\_03122022

Sponsor: ARCOFEMI HEALTHCARE LIMITED

Consulting Doctor: Dr. BENITA JAYACHANDRAN

#### **Doctor's Signature**

MR No: CVEL.0000138082
Visit ID: CVELOPV189844
Visit Date: 06-09-2023 08:36

Discharge Date:

Name: Mrs. JERRI PRASANTHI
Age/Gender: 32 Y/F
Address: CHENNAI
Location: CHENNAI, TAMIL NADU

Doctor:

Department: GENERAL
Rate Plan: VELACHERY\_03122022
Sponsor: ARCOFEMI HEALTHCARE LIMITED Consulting Doctor: Dr. YASODHA KUMARA REDDY MOKKALA

## HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

SYSTEMIC REVIEW

**HT-HISTORY** 

PHYSICAL EXAMINATION

SYSTEMIC EXAMINATION

**IMPRESSION** 

RECOMMENDATION

**Doctor's Signature** 

MR No: CVEL.0000138082 Visit ID: CVELOPV189844 Visit Date: 06-09-2023 08:36

Discharge Date:

Name: Mrs. JERRI PRASANTHI
Age/Gender: 32 Y/F
Address: CHENNAI
Location: CHENNAI, TAMIL NADU

Doctor:

Department: GENERAL
Rate Plan: VELACHERY\_03122022
Sponsor: ARCOFEMI HEALTHCARE LIMITED Consulting Doctor: Dr. PAVITHRA RAMAKRISHNAN

## HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

SYSTEMIC REVIEW

**HT-HISTORY** 

PHYSICAL EXAMINATION

SYSTEMIC EXAMINATION

**IMPRESSION** 

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MR No: CVEL.0000138082 Visit ID: CVELOPV189844 Visit Date: 06-09-2023 08:36

Discharge Date:

Name: Mrs. JERRI PRASANTHI
Age/Gender: 32 Y/F
Address: CHENNAI
Location: CHENNAI, TAMIL NADU

Doctor:

Department: GENERAL
Rate Plan: VELACHERY\_03122022
Sponsor: ARCOFEMI HEALTHCARE LIMITED

Consulting Doctor: Dr. SHILFA NIGAR N

## HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

SYSTEMIC REVIEW

**HT-HISTORY** 

PHYSICAL EXAMINATION

SYSTEMIC EXAMINATION

**IMPRESSION** 

RECOMMENDATION

**Doctor's Signature** 

MR No: CVEL.0000138082 Visit ID: CVELOPV189844 Visit Date: 06-09-2023 08:36

Discharge Date:

II)ate	Pulse (Beats/min)	-	Resp (Rate/min)	Temp (F)	Height (cms)	Weight	Percentage	Fat Level	Body Age (Years)	BMI	Circum	Hip (cms)	(cms)	Waist & Hip Ratio	User
06-09-2023 16:22		110/80 mmHg	Rate/min	_	158 cms	73 Kgs	%	%	Years	29.24	cms	cms	cms		AHLL05400

II)ate	Pulse (Beats/min)	-	Resp (Rate/min)	Temp (F)	Height (cms)	Weight	Percentage	Fat Level	Body Age (Years)	BMI	Circum	Hip (cms)	(cms)	Waist & Hip Ratio	User
06-09-2023 16:22		110/80 mmHg	Rate/min	_	158 cms	73 Kgs	%	%	Years	29.24	cms	cms	cms		AHLL05400

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06-09-2023 16:22		110/80 mmHg	Rate/min	_	158 cms	73 Kgs	%	%	Years	29.24	cms	cms	cms		AHLL05400

II)ate	Pulse (Beats/min)	-	Resp (Rate/min)	Temp (F)	Height (cms)	Weight	Percentage	Fat Level	Body Age (Years)	BMI	Circum	Hip (cms)	(cms)	Waist & Hip Ratio	User
06-09-2023 16:22		110/80 mmHg	Rate/min	_	158 cms	73 Kgs	%	%	Years	29.24	cms	cms	cms		AHLL05400

II)ate	Pulse (Beats/min)	-	Resp (Rate/min)	Temp (F)	Height (cms)	Weight	Percentage	Fat Level	Body Age (Years)	BMI	Circum	Hip (cms)	(cms)	Waist & Hip Ratio	User
06-09-2023 16:22		110/80 mmHg	Rate/min	_	158 cms	73 Kgs	%	%	Years	29.24	cms	cms	cms		AHLL05400



## **CERTIFICATE OF MEDICAL FITNESS**

Height	t: 158 Cm	Weight: 73.7	kg	BMI: 29.5	BP: 110 / 80 . mmH
ОРТН	AL CHECK : Righ	nt Eye: 6/6.		Left Eye: 6/6	Colour vision : 🕑-
			d the	clinical examination	
Of	Us Jerri	prasanthi		on <u>b</u> [9]	23
After r	eviewing the medica	al history and on clir	nical e	examination it has been f	ound that he/she is
•	Medically Fit	. to do 11	RoM	Shep e'kur	
•	Fit with restrictions	s/recommendations			
	the job.	restrictions have be			ese are not impediments to
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	Review after	a"			
٠	Currently Unfit. Review after			recommend	led
٠	Unfit NI			Dr.	<b>M</b>
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				Apono ga	mc(Location)

2

This certificate is not meant for medico-legal purposes

M.B.B.S., F sp Diabetologis
CLIN - Cardiology
Reg. No: 93787
Apollo Family Physician

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surement Results				Interpretation			
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# **OPTHALMOLOGY**



Name Mes. Terri prasanthi	Date 06 09 2013.
	UHID No. 1 38082
Sex: Male Female	

# **OPHTHAL FITNESS CERTIFICATE**

RE

LE

**DV-UCVA** 

**DV-BCVA** 

**NEAR VISION** 

ANTERIOR SEGMENT

IOP

**FIELDS OF VISION** 

EOM

**COLOUR VISION** 

**FUNDUS** 

**IMPRESSION** 

Noinel

BE Refractine Error.

First for work | R/A- Smouths

**ADVICE** 

# **DEPT. OF APOLLO HEALTH CHECK**



# **GYNAECOLOGY CONSULT**

Name: Mrs. Juri

UHID: 1380 82

Date:

6 9 23.

Consultant Gynaecologist:

Re. Pavi thing

DRUG ALLERGIES

Complaints (related to Gynaec) - NIL SPECIFIC / YES

Known to have Diabetes / Hypertension / IHD / Asthma / Thyroid / Others | Milling |

Past Medical / Surgical History:

Family History:

OTHER SYSTEMS:

**GYNAEC HISTORY:** 

Marital Status - S/M/Others

Children

**Deliveries** 

L.C.B.

Abortion

Mdx Syrs. Pul/203-3/12/NUD.

Contraception -

Periods

Lmf-10/8/23.

L.M.P.

Menopause

**GYNAEC EXAMINATION:** 

P/A

S/E Cn & ragins healthy

P/R

PAP SMEAR: Taken / Not Taken (Reason)

**OPINION & ADVICE:** 

**Present Medication:** 

**GENERAL EXAMINATION:** 

Height:

Weight:

BMI:

General Condition:

**Blood Pressure:** 

Thyroid:

Others:

**REVIEW DETAILS:** (with date) With Patient / With reports only

Your Apollo order has been confirmed

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

Sat 9/2/2023 1:51 PM

To:wellness@mediwheel.in <wellness@mediwheel.in>

Cc:Velachery Apolloclinic <velachery@apolloclinic.com>;Martin Amalraj I H <martin.amalraj@apolloclinic.com>;Syamsunder M <syamsunder.m@apollohl.com>

## Dear MS. PRASANTHI JERRI,

Namaste Team,

Greetings from Apollo Clinics,

With regards to the below request the below appointment is scheduled at **VELACHERY** clinic on 2023-09-06 at 08:55-09:00.

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: THE APOLLO CLINIC – VELACHERY, PLOT NO 46, 7TH STREET, TANSI NAGAR, VELACHERY – 600 042.

Contact No: 044 -22435370,.

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



Patient Name : Mrs. JERRI PRASANTHI Age : 32 Y/F

UHID : CVEL.0000138082 OP Visit No : CVELOPV189844
Conducted By: : Dr. SHANMUGA SUNDARAM D Conducted Date : 08-09-2023 10:11

Referred By : Dr. SHILFA NIGAR N

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

Dimensions:

Ao (ed) 2.7 CM 3.3 CM LA (es) LVID (ed) 4.4 CM LVID (es) 2.8 CM IVS (Ed) 1.1 CM 1.2 CM LVPW (Ed) EF 64.00% %FD 34.00%

MITRAL VALVE: NORMAL

AML NORMAL 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:

Patient Name : Mrs. JERRI PRASANTHI Age : 32 Y/F

UHID : CVEL.0000138082 OP Visit No : CVELOPV189844
Conducted By: : Dr. SHANMUGA SUNDARAM D Conducted Date : 08-09-2023 10:11

Referred By : Dr. SHILFA NIGAR N

# **Doppler studies**

AV max 1.0 m/s; PG 4.6 mmHg;

PV max 0.9 m/s; PG 2.7 mmHg;

MV E 0.6 m/s; MV A 0.5 m/s;

TV E 0. 27 m/s; TV A 0. 23 m/s.

## **Impression**

\*NO REGIONAL WALL MOTION ABNORMALITY;

\*NORMAL LEFT VENTRICULAR IN SIZE AND SYSTOLIC FUNCTION;

\* NO PERICARDIAL EFFUSION/PULMONARY ARTERY HYPERTENSION;



DR SHANMUGA SUNDARAM

CONSULTANT CARDIOLOGIST

Patient Name : Mrs. JERRI PRASANTHI Age : 32 Y/F

UHID : CVEL.0000138082 OP Visit No : CVELOPV189844
Conducted By: : Dr. SHANMUGA SUNDARAM D Conducted Date : 08-09-2023 10:11