

Patient Name : Mrs.S RAJESHWARI	Collected : 27/Mar/2023 08:51AM
Age/Gender : 43 Y 6 M 0 D/F	Received : 27/Mar/2023 12:43PM
UHID/MR No : CBAS.0000086689	Reported : 27/Mar/2023 02:59PM
Visit ID : CBASOPV90699	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobE35484	

DEPARTMENT OF HAEMATOLOGY

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

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

HAEMOGLOBIN	13.4	g/dL	12-15	Spectrophotometer
PCV	39.40	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.64	Million/cu.mm	3.8-4.8	Electrical Impedance
MCV	84.9	fL	83-101	Calculated
MCH	28.8	pg	27-32	Calculated
MCHC	33.9	g/dL	31.5-34.5	Calculated
R.D.W	14	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	6,670	cells/cu.mm	4000-10000	Electrical Impedance

DIFFERENTIAL LEUCOCYtic COUNT (DLC)

NEUTROPHILS	58.8	%	40-80	Electrical Impedance
LYMPHOCYTES	33.2	%	20-40	Electrical Impedance
EOSINOPHILS	0.7	%	1-6	Electrical Impedance
MONOCYTES	6.8	%	2-10	Electrical Impedance
BASOPHILS	0.5	%	<1-2	Electrical Impedance

ABSOLUTE LEUCOCYte COUNT

NEUTROPHILS	3921.96	Cells/cu.mm	2000-7000	Electrical Impedance
LYMPHOCYTES	2214.44	Cells/cu.mm	1000-3000	Electrical Impedance
EOSINOPHILS	46.69	Cells/cu.mm	20-500	Electrical Impedance
MONOCYTES	453.56	Cells/cu.mm	200-1000	Electrical Impedance
BASOPHILS	33.35	Cells/cu.mm	0-100	Electrical Impedance

PLATELET COUNT	252000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	15	mm at the end of 1 hour	0-20	Modified Westegren method

PERIPHERAL SMEAR

RBCs: are normocytic normochromic

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

PLATELETS: appear adequate in number.

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HEMOPARASITES: negative

IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE



SIN No:BED230077425

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UHID/MR No : CBAS.0000086689	Reported : 27/Mar/2023 03:51PM
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DEPARTMENT OF HAEMATOLOGY

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BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD-EDTA

BLOOD GROUP TYPE	O			Microplate Hemagglutination
Rh TYPE	Positive			Microplate Hemagglutination



Patient Name : Mrs.S RAJESHWARI	Collected : 27/Mar/2023 08:51AM
Age/Gender : 43 Y 6 M 0 D/F	Received : 27/Mar/2023 12:39PM
UHID/MR No : CBAS.0000086689	Reported : 27/Mar/2023 04:32PM
Visit ID : CBASOPV90699	Status : Final Report
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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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GLUCOSE, FASTING , NAF PLASMA	132	mg/dL	70-100	HEXOKINASE
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Comment:

As per American Diabetes Guidelines

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

GLUCOSE, POST PRANDIAL (PP), 2 HOURS , NAF PLASMA	146	mg/dL	70-140	HEXOKINASE
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Comment:

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

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

Ref: Marks medical biochemistry and clinical approach

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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD-EDTA	6.8	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD-EDTA	148	mg/dL		Calculated

Comment:

Reference Range as per American Diabetes Association (ADA):

REFERENCE GROUP	HBA1C IN %
NON DIABETIC ADULTS >18 YEARS	<5.7
AT RISK (PREDIABETES)	5.7 – 6.4
DIAGNOSING DIABETES	≥ 6.5
DIABETICS	
· EXCELLENT CONTROL	6 – 7
· FAIR TO GOOD CONTROL	7 – 8
· UNSATISFACTORY CONTROL	8 – 10
· POOR CONTROL	>10

Note: Dietary preparation or fasting is not required.

1. A1C test should be performed at least two times a year in patients who are meeting treatment goals (and who have stable glycemic control).
2. Lowering A1C to below or around 7% has been shown to reduce microvascular and neuropathic complications of type 1 and type 2 diabetes. When mean annual HbA1c is <1.1 times ULN (upper limit of normal), renal and retinal complications are rare, but complications occur in >70% of cases when HbA1c is >1.7 times ULN.
3. Falsely low HbA1c (below 4%) may be observed in patients with clinical conditions that shorten erythrocyte life span or decrease mean erythrocyte age. HbA1c may not accurately reflect glycemic control when clinical conditions that affect erythrocyte survival are present. Fructosamine may be used as an alternate measurement of glycemic control



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DEPARTMENT OF BIOCHEMISTRY

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

TOTAL CHOLESTEROL	206	mg/dL	<200	CHO-POD
TRIGLYCERIDES	341	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	55	mg/dL	40-60	Enzymatic Immuno-inhibition
NON-HDL CHOLESTEROL	151	mg/dL	<130	Calculated
LDL CHOLESTEROL	82.5	mg/dL	<100	Calculated
VLDL CHOLESTEROL	68.2	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.74		0-4.97	Calculated

Comment:

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

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

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

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



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DEPARTMENT OF BIOCHEMISTRY

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LIVER FUNCTION TEST (LFT) , SERUM

BILIRUBIN, TOTAL	0.58	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.04	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.54	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	25	U/L	<35	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	21.0	U/L	<35	IFCC
ALKALINE PHOSPHATASE	54.00	U/L	30-120	IFCC
PROTEIN, TOTAL	7.27	g/dL	6.6-8.3	Biuret
ALBUMIN	4.04	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.23	g/dL	2.0-3.5	Calculated
A/G RATIO	1.25		0.9-2.0	Calculated



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DEPARTMENT OF BIOCHEMISTRY

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

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

CREATININE	0.68	mg/dL	0.72 – 1.18	JAFFE METHOD
UREA	15.90	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	7.4	mg/dL	8.0 - 23.0	Calculated
URIC ACID	4.67	mg/dL	2.6-6.0	Uricase PAP
CALCIUM	9.40	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	3.76	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	138	mmol/L	136–146	ISE (Indirect)
POTASSIUM	4.5	mmol/L	3.5–5.1	ISE (Indirect)
CHLORIDE	104	mmol/L	101–109	ISE (Indirect)



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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	23.00	U/L	<38	IFCC



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DEPARTMENT OF IMMUNOLOGY

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

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

TRI-IODOTHYRONINE (T3, TOTAL)	1.19	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	8.89	µg/dL	6.09-12.23	CLIA
THYROID STIMULATING HORMONE (TSH)	2.213	µIU/mL	0.34-5.60	CLIA

Comment:

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

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

Note:

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



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Age/Gender : 43 Y 6 M 0 D/F	Received : 27/Mar/2023 01:00PM
UHID/MR No : CBAS.0000086689	Reported : 27/Mar/2023 02:24PM
Visit ID : CBASOPV90699	Status : Final Report
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DEPARTMENT OF CLINICAL PATHOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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COMPLETE URINE EXAMINATION , URINE

PHYSICAL EXAMINATION

COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	HAZY		CLEAR	Visual
pH	5.5		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	1.025		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
BLOOD	NEGATIVE		NEGATIVE	Peroxidase
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	POSITIVE +		NEGATIVE	LEUCOCYTE ESTERASE

CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY

PUS CELLS	5-6	/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



SIN No:UR2086479

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DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - 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



SIN No:UPP014480,UF008197

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UHID/MR No : CBAS.0000086689	Reported : 29/Mar/2023 05:44PM
Visit ID : CBASOPV90699	Status : Final Report
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DEPARTMENT OF CYTOLOGY

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


LBC PAP TEST- PAPSURE , LBC FLUID

	CYTOLOGY NO.	6001/23
I	SPECIMEN	
a	SPECIMEN ADEQUACY	ADEQUATE
b	SPECIMEN TYPE	LIQUID-BASED PREPARATION (LBC)
	SPECIMEN NATURE/SOURCE	CERVICAL SMEAR
c	ENDOCERVICAL-TRANSFORMATION ZONE	PRESENT WITH ENDOCERVICAL CELLS
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 *****


Result/s to Follow:
PERIPHERAL SMEAR



DR. K. RAMA KRISHNA REDDY
M.B.B.S, M.D
CONSULTANT PATHOLOGIST



DR. PRASHANTH. R
M.B.B.S, MD
Consultant Pathologist



Dr. Anita Shobha Flynn
M.B.B.S, MD (Pathology)
Consultant Pathologist

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DEPARTMENT OF CYTOLOGY

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



SIN No:CS061820

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

Patient Name : Mrs. S RAJESHWARI

Age/Gender : 43 Y/F

UHID/MR No. : CBAS.0000086689

OP Visit No : CBASOPV90699

Sample Collected on :

Reported on : 27-03-2023 15:03

LRN# : RAD1960466

Specimen :

Ref Doctor : SELF

Emp/Auth/TPA ID : bobE35484

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Both lungs fields appears normal and shows normal bronchovascular markings.

Bilateral hila appears normal.

Cardiac silhouette appears normal.

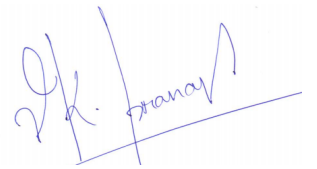
Both costophrenic and cardiophrenic angles are clear.

Both diaphragms are normal in position and contour.

Thoracic wall and soft tissues appear normal.

IMPRESSION:

No obvious abnormality seen in the present study.



Dr. V K PRNAV VENKATESH
MBBS,MD
Radiology

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Age/Gender : 43 Y/F

UHID/MR No. : CBAS.0000086689

OP Visit No : CBASOPV90699

Sample Collected on :

Reported on : 27-03-2023 10:52

LRN# : RAD1960466

Specimen :

Ref Doctor : SELF

Emp/Auth/TPA ID : bobE35484

DEPARTMENT OF RADIOLOGY

SONO MAMOGRAPHY - SCREENING

USG OF BOTH BREASTS

Both breasts show normal echotexture 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.

IMPRESSION

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. V K PRNAV VENKATESH
MBBS,MD
Radiology

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Age/Gender : 43 Y/F

UHID/MR No. : CBAS.0000086689

OP Visit No : CBASOPV90699

Sample Collected on :

Reported on : 27-03-2023 10:48

LRN# : RAD1960466

Specimen :

Ref Doctor : SELF

Emp/Auth/TPA ID : bobE35484

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

Liver: appears enlarged in size (16.6 cm) and increased in echotexture. No focal lesion is seen. Portal vein and Common Bile Duct appear normal. No dilatation of the intrahepatic biliary radicals.

Gall bladder is partially contracted. No evidence of calculus. Wall thickness appears normal. No evidence of periGB collection. No evidence of focal lesion is seen.

Spleen appears normal. No focal lesion seen. Splenic vein appears normal.

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

Right kidney appear normal in size 10.4x1.6 cm, shape and echopattern. Cortical thickness and Cortico-medullary differentiation are maintained.

Left kidney appear normal in size 8.5x1.4 cm, shape and echopattern. Cortical thickness and Cortico-medullary differentiation are maintained.

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 retroverted in size and measuring 7.2x3.6x5.0 cm. It shows normal shape & echopattern. Endometrial echo-complex appears normal and measures 0.9 cm.

Both ovaries appear normal in size, shape and echotexture.
Right ovary measuring 2.5x2.0 cm and left ovary measuring 3.4x2.2 cm .
No evidence of any adnexal pathology noted.

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

IMPRESSION:-

Fatty Hepatomegaly

Suggested clinical correlation.

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



Dr. V K PRNAV VENKATESH

MBBS, MD

Radiology

ECHOCARDIOGRAPHY REPORT

Name: MRS RAJESHWARI Gender: FEMALE Age: 43 years

Consultant: Dr. VISHAL KUMAR HARIJAN Date : 27/03/2023

Findings

2D Echo cardiography

Chambers

- Left Ventricle: Normal, No RWMA'S
- Left Atrium: Normal
- Right Ventricle: Normal
- Right Atrium: Normal

Septa

- IVS: Intact
- IAS: Intact

Valves

- Mitral Valve: Normal
- Tricuspid Valve: Normal
- Aortic Valve: Tricuspid , normal mobility
- Pulmonary Valve: Normal

Great Vessels

- Aorta: Normal
- Pulmonary Artery: Normal

Pericardium: Normal

Doppler echocardiography

Mitral Valve	E	0.81	m/sec	A	0.56	m/sec	No MR
Tricuspid Valve	E	0.74	m/sec	A	0.61	m/sec	TRIVIAL TR
Aortic Valve	Vmax	1.19	m/sec				No AR
Pulmonary Valve	Vmax	0.82	m/sec				No PR
Diastolic Dysfunction							

M-Mode
Measurements


Parameter	Observed Value	Normal Range	
Aorta	2.3	2.6-3.6	cm
Left Atrium	2.9	2.7-3.8	cm
Aortic Cusp Separation	1.4	1.4-1.7	cm
IVS-Diastole	0.9	0.9-1.1	cm
Left Ventricle-Diastole	4.0	4.2-5.9	cm
Posterior wall-Diastole	1.0	0.9-1.1	cm
IVS-Systole	1.1	1.3-1.5	cm
Left Ventricle-Systole	2.5	2.1-4.0	cm
Posterior wall-Systole	1.2	1.3-1.5	cm
Ejection Fraction	60	≥ 50	%
Fractional shortening	30	≥ 20	%
Right Ventricle	2.6	2.0-3.3	cm

Impression

- Normal Sized Cardiac Chambers
- No RWMA'S
- Normal LV & RV Systolic function,LVEF-60%
- TR -TRIVIAL
- No pericardial effusion/Vegetation/Clot.

DR.VITHAL D BAGI./ DR VISHAL KUMAR

CARDIOLOGIST.

Name : Mrs. S RAJESHWARI Address : blore Plan : ARCOFEMI MEDIWHEEL FEMALE AHC CREDIT PAN INDIA OP AGREEMENT	Age : 43 Y Sex : F	UHID :CBAS.0000086689  OP Number :CBASOPV90699 Bill No :CBAS-OCR-55114 Date : 27.03.2023 08:49
---	---	--

Sno	Service Type/ServiceName	Department
1	ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY2324	
1	URINE GLUCOSE(FASTING)	
2	GAMMA GLUTAMYL TRANSFERASE (GGT)	
3	SONO MAMOGRAPHY - SCREENING	
4	HbA1c, GLYCATED HEMOGLOBIN	
5	2 D ECHO	- 5 -
6	LIVER FUNCTION TEST (LFT)	- 4 -
7	X-RAY CHEST PA 10:00 AM	- 4 -
8	GLUCOSE, FASTING	
9	HEMOGRAM + PERIPHERAL SMEAR	
10	ENT CONSULTATION	
11	FITNESS BY GENERAL PHYSICIAN	
12	GYNAECOLOGY CONSULTATION	
13	DIET CONSULTATION	
14	COMPLETE URINE EXAMINATION	
15	URINE GLUCOSE(POST PRANDIAL)	
16	PERIPHERAL SMEAR	
17	EKG	- 3 -
18	BLOOD GROUP ABO AND RH FACTOR	
19	LIPID PROFILE	
20	BODY MASS INDEX (BMI)	
21	BC PAP TEST- PAPSURE	
22	OPHTHAL BY GENERAL PHYSICIAN	- 3 -
23	RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)	
24	ULTRASOUND - WHOLE ABDOMEN 10:20 to 10:40 AM	- 5 -
25	THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)	
26	DENTAL CONSULTATION pending	
27	GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL)	

HT - 156 cm
 WT - 76.3 kg
 BP - 155/92 mm
 PR - 87 bpm
 HR - 92 cm
 WAIST - 108 cm

PAP SMEAR CONSENT FORM

PATIENT NAME: Mrs. Rajeshwari . P.
AGE: 43 yrs.

GENDER: F

DATE: 27/08/23

MENSTRUAL AND REPRODUCTIVE HISTORY

AGE OF MENARCHE : 13 yrs

AGE OF MENOPAUSAL IF APPLICABLE : 2

MENSTRUAL REGULARITY : ~~REGULAR~~/IRREGULAR

FIRST DAY OF LAST MENSTRUATION PERIOD: 28/02/23.

AGE AT MARRIAGE :

YEAR'S OF MARRIED LIFE : 23 yrs.

CONTRACEPTION : YES() NO() IF YES WHAT KIND?

HORMONAL TREATMENT : YES() NO() IF YES WHAT KIND?

GRAVIDA (NO OF TIME'S CONCEIVED) :

PARA(NO OF CHILDBIRTH) :

LIVE(NO OF LIVING CHILDREN) : 12 L2, both L5 & 6

ABORTIONS : 1
Tubeculicised

MISCARRIAGES/ABORTION : 1

AGE OF FIRST CHILD : 18 yrs

AGE OF LAST CHILD : 13 yrs

PREVIOUS PAP SMEAR REPORT :

SPECULUM EXAMINATION FINDINGS

EXTERNAL GENITALIA (N)

VAGINA (N)

CERVIX (N)

SMEAR THAKEN FROM - ENDOCERVIX

ECTOCERVIX

POSTERIOR VAGINA

M is menbruating.
LBe taken.

27/3/23

Mm. S. Rajarajawari, 43yr,

Admission → 1600ml night collection
~~dist~~
dist.

Ht → 156cm

Wt, 76.3kg

IDW → 55-60y

BF & DM, no gsk, lym /
Regiment / milk powder.

10 days upto 2y

Edly 10.
(3) (2) 8-10

(Inked DM) WATER → inj. chel →

cut parts → manual.

phd 1' bath - 2.5
water 3lit

milk / bundle long - long

Flex seeds → 10hrs / 7.
Fyigely → skip

30-min (7-7am)

- 1 milk = 72y
- 2 milk = 68y
- 3 milk = 65-66y
- 4 milk = 63y
- 5 milk = 60-
- 6 milk = 58-60y

15-20y TI

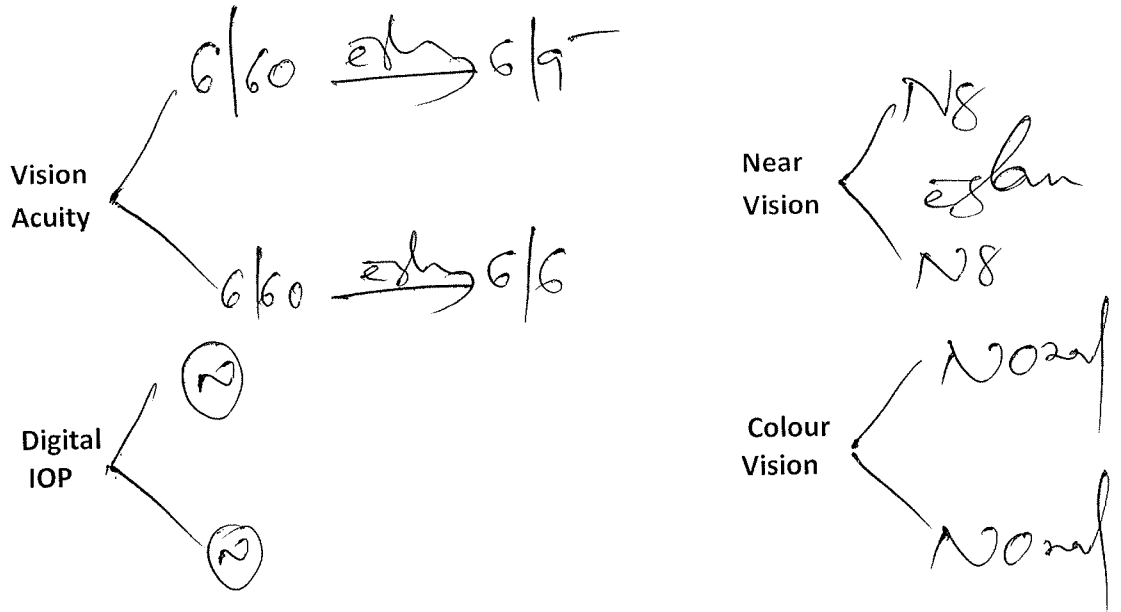
Dist + Examine

Dr. Mohini Arun

9449349833

Mrs Rajeshwari S. 43/R 86689 27/3/23

EYE CHECK UP REPORT



• Fundus:

• Ant. Segment :-

• Media:

• Pupil:

} Read retina & Cornea
Opinion.
normal

RC Central corneal scar, BE Myopic

Presbyopia, partially corrected by glasses.

Adv for dilated refraction & glass for constant wear

CHS



ಭಾರತ ಸರ್ಕಾರ
Government of India

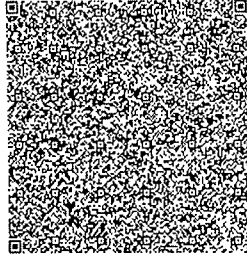
ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ
Unique Identification Authority of India

ನೋಂದಣಿ ಸಂಖ್ಯೆ/ Enrolment No.: 0648/90764/00972

To
ಎಸ್ ರಾಜೇಶ್ವರಿ
S Rajeshwari
W/O: S Srihari
38
1st Main Kathriguppe Road Siddhartha Layout
Vivekananda Nagar Banashankari 3rd Stage
Bangalore South
Bangalore Karnataka - 560085
8217847458

Signature valid

Digitally signed by S Rajeshwari
AUTHORITY: UIDAI, INDIA 05
Date: 2022.11.09 22:01
UTC



ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :

6148 4218 0271

VID : 9159 4477 2940 8715

ನನ್ನ ಆಧಾರ್. ನನ್ನ ಗುರುತು



ಭಾರತ ಸರ್ಕಾರ
Government of India



ಎಸ್ ರಾಜೇಶ್ವರಿ
S Rajeshwari
ಜನ್ಮ ದಿನಾಂಕ/DOB: 02/10/1978
ಸ್ತ್ರೀ/FEMALE

6148 4218 0271

VID : 9159 4477 2940 8715

ನನ್ನ ಆಧಾರ್. ನನ್ನ ಗುರುತು



Government of India



ಮಾಹಿತಿ

- ಆಧಾರ್ ಗುರುತಿನ ಪುರಾವೆಯೇ ಹೊರತು ಪೌರತ್ವದಲ್ಲ
- ಸುರಕ್ಷಿತ ಕ್ಯೂಆರ್ ಕೋಡ್/ಆಫ್ಲೈನ್ XML/ಆನ್ಲೈನ್ ದೃಢೀಕರಣ ಬಳಸಿ ಗುರುತನ್ನು ಪರಿಶೀಲಿಸಿ
- ಎಲೆಕ್ಟ್ರಾನಿಕ್ ಪ್ರಕ್ರಿಯೆ ಮೂಲಕ ಮುದ್ರಿತವಾದ ವಿಷಯವನ್ನು ದಾಖಲೆ ಇದಾಗಿದೆ

INFORMATION

- Aadhaar is a proof of identity, not of citizenship.
- Verify identity using Secure QR Code/ Offline XML/ Online Authentication.
- This is electronically generated letter.

- ಆಧಾರ್ ದೇಶದಾದ್ಯಂತ ಮಾನ್ಯತೆಯನ್ನು ಪಡೆದಿದೆ
- ಸುಲಭವಾಗಿ ಸರ್ಕಾರಿ ಹಾಗೂ ಸರ್ಕಾರೇತರ ಸೇವೆಗಳನ್ನು ಪಡೆಯಲು ಆಧಾರ್ ಸಹಾಯವಾಗಲಿದೆ.
- ನಿಮ್ಮ ಮೊಬೈಲ್ ಸಂಖ್ಯೆ ಮತ್ತು ಇ-ಮೇಲ್ ಐಡಿ ಅನ್ನು ಆಧಾರ್ ನಲ್ಲಿ ನವೀಕರಿಸಿ
- ಆಧಾರ್ ನ್ನು ನಿಮ್ಮ ಸ್ಮಾರ್ಟ್ ಫೋನ್ ನಲ್ಲಿ ಕೊಂಡೊಯ್ಯಿರಿ-mAadhaar ಅಪ್ಲಿಕೇಶನ್ ಬಳಸಿ

- Aadhaar is valid throughout the country.
- Aadhaar helps you avail various Government and non-Government services easily.
- Keep your mobile number & email ID updated in Aadhaar.
- Carry Aadhaar in your smart phone – use mAadhaar App.



ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ
Unique Identification Authority of India

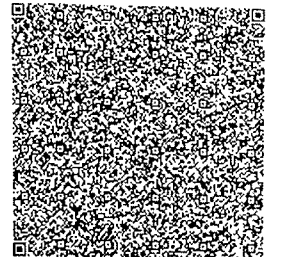


ವಿಳಾಸ:

W/O: ಎಸ್ ಶ್ರೀಹರಿ, # 38, 1ನೇ ಮುಖ್ಯರಸ್ತೆ ಕೃತ್ರಿಗುಪ್ಪೆ ರಸ್ತೆ ಸಿದ್ಧಾರ್ಥ ಲೇಔಟ್, ವಿವೇಕಾನಂದ ನಗರ ಬನಶಂಕರಿ 3ನೇ ಹಂತ, ಬೆಂಗಳೂರು ದಕ್ಷಿಣ, ಬೆಂಗಳೂರು, ಕರ್ನಾಟಕ - 560085

Address:

W/O: S Srihari, # 38, 1st Main Kathriguppe Road Siddhartha Layout, Vivekananda Nagar Banashankari 3rd Stage, Bangalore, Karnataka - 560085



6148 4218 0271

VID : 9159 4477 2940 8715



1947



help@uidai.gov.in



www.uidai.gov.in

RE: Booking Appointment no. of 35

Corporate Apollo Clinic <corporate@apolloclinic.com>

Sat 3/25/2023 7:42 PM

To: Wellness : Mediwheel : New Delhi <wellness@mediwheel.in>

Cc: Network : Mediwheel : New Delhi <network@mediwheel.in>;deepak <deepak.c@apolloclinic.com>;Customer Care :Mediwheel : New Delhi <customercare@mediwheel.in>;Vimannagar Apolloclinic <vimannagar@apolloclinic.com>;guntur@apolloclinic.com <guntur@apolloclinic.com>;'The Apollo Clinic Nashik' <nashik.apolloclinic@gmail.com>;'nashik@theapolloclinic.com' <nashik@theapolloclinic.com>;Apollo Clinic Vashi <apolloclinicvashi@gmail.com>;cmvashiapollo@gmail.com <cmvashiapollo@gmail.com>;Nigdi Apolloclinic <nigdi@apolloclinic.com>;Chandanagar Apolloclinic <chandanagar@apolloclinic.com>;Mysore Apolloclinic <mysore@apolloclinic.com>;Koramangala Apolloclinic <koramangala@apolloclinic.com>;colaba@theapolloclinic.com <colaba@theapolloclinic.com>;apollocliniccolaba@gmail.com <apollocliniccolaba@gmail.com>;Basavanagudi Apolloclinic <basavanagudi@apolloclinic.com>;Panvel MH <panvel.mh@apolloclinic.com>;Vizag Apolloclinic <vizag@apolloclinic.com>;madipakkam@apolloclinic.com <madipakkam@apolloclinic.com>

📎 1 attachments (21 KB)

24032023 Booking.xlsx;

Namaste Team,

Greetings from Apollo clinics.

PFA.

Thanks & Regards,

Rani N | Apollo Clinics | Pan India Toll No: 1860 500 7788 | Contact E-Mail: corporate@apolloclinic.com | www.apolloclinic.com |

From: Wellness : Mediwheel : New Delhi <wellness@mediwheel.in>

Sent: 25 March 2023 17:32

To: Corporate Apollo Clinic <corporate@apolloclinic.com>

Cc: Network : Mediwheel : New Delhi <network@mediwheel.in>; deepak <deepak.c@apolloclinic.com>; Customer Care :Mediwheel : New Delhi <customercare@mediwheel.in>

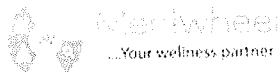
Subject: Re: Booking Appointment no. of 35

Dear Team

Please note the following booking and confirm the same

Thanks & Regards

Lav Gupta



Arcofemi Health Care Ltd. | F-701 A, Lado Sarai, Mehrauli | New Delhi – 110 030
M. 8800465156 Email : wellness@mediwheel.in; | Web: www.mediwheel.in

From: Corporate Apollo Clinic <corporate@apolloclinic.com>

Sent: Saturday, March 25, 2023 5:18 PM

To: Wellness : Mediwheel : New Delhi <wellness@mediwheel.in>

Cc: Network : Mediwheel : New Delhi <network@mediwheel.in>; deepak <deepak.c@apolloclinic.com>; Customer Care :Mediwheel : New Delhi <customercare@mediwheel.in>

Subject: RE: Booking Appointment no. of 35

Namaste Team,

Greetings from Apollo clinics,

Please mentioned the Gender which is mandatory field to select the package.

Thanks & Regards,

Rani N | Apollo Clinics | Pan India Toll No: 1860 500 7788 | Contact E-Mail: corporate@apolloclinic.com | www.apolloclinic.com |

From: Wellness : Mediwheel : New Delhi <wellness@mediwheel.in>

Sent: 25 March 2023 14:24

To: Corporate Apollo Clinic <corporate@apolloclinic.com>

Cc: Network : Mediwheel : New Delhi <network@mediwheel.in>; deepak <deepak.c@apolloclinic.com>; Customer Care :Mediwheel : New Delhi <customercare@mediwheel.in>

Subject: Booking Appointment no. of 35

Date: IST: 2023-03-27 09:58:11

Personal Details
UHID: 01P3FGAT6JR0R02
PatientID: 86689
Name: MRS S RAJESHWARI
Age: 43
Gender: Female
Mobile: 6355556666666

**Pre-Existing Medical-
Conditions**

Vitals

Measurements

HR : 80 BPM
PR: 144 ms
PD: 116 ms
QRS: 90 ms
QRS Axis: 139 deg
QT/QTc: 370/427 ms

Interpretation

Positive Deflection in aVR Suggestive of lead reversal

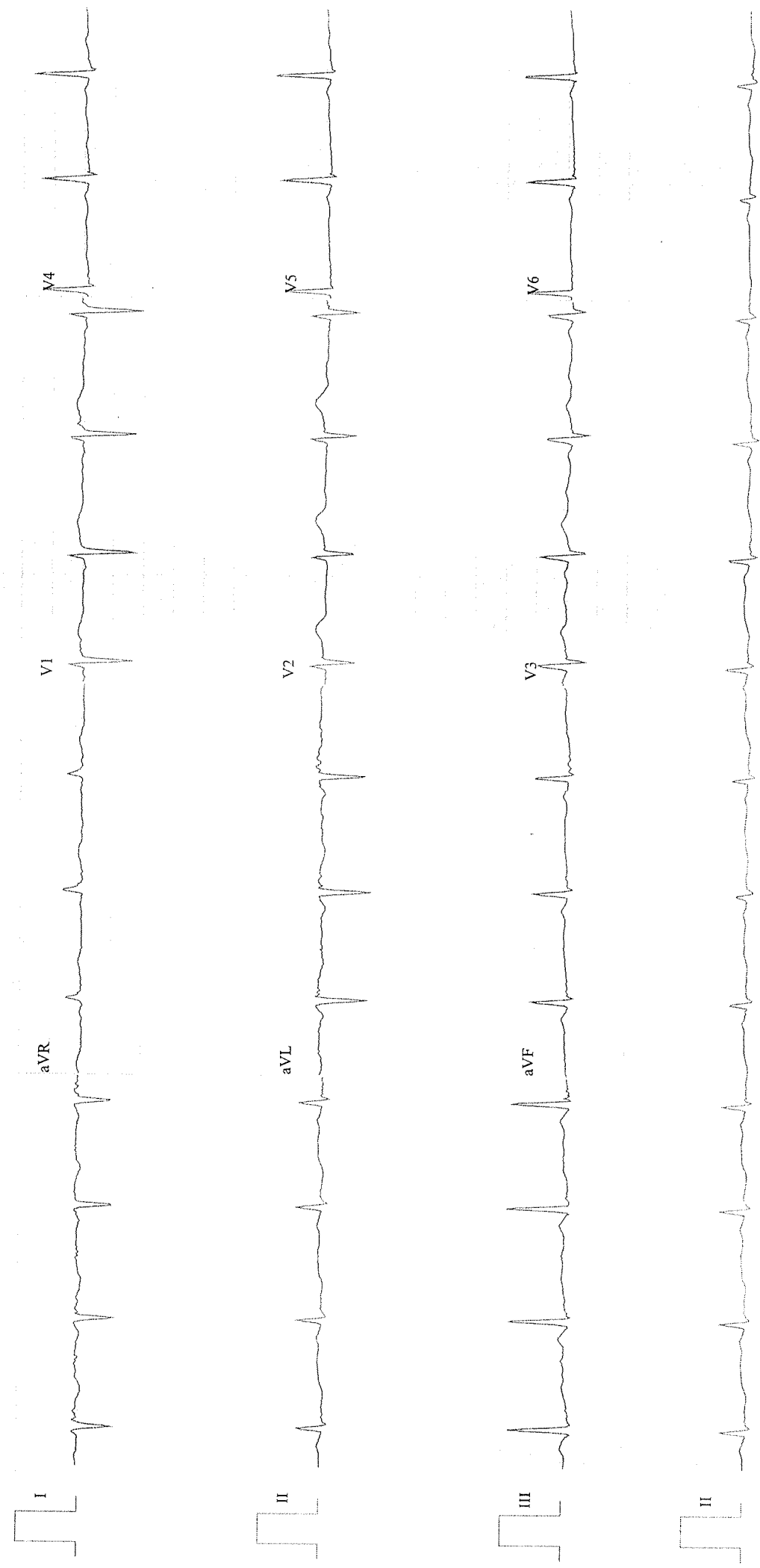
Report ID: AHLLP_01P3FGAT6JR0R02_V6JR0R0Z

Apollis

Authoriz
yes

Dr.Yogesh
MD,DNB,II
Reg No- K

This trace is generated by *KardiaScreen*: Cloud-Connected, Portable, Digital, 6-12 Lead, Single ECG Platform from *IMEDIX*





LETTER OF APPROVAL / RECOMMENDATION

To,

The Coordinator,
Mediwheel (Arcofemi Healthcare Limited)
Helpline number: 011- 41195959

Dear Sir / Madam,

Sub: Annual Health Checkup for the employees of Bank of Baroda

This is to inform you that the following employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS	EMPLOYEE DETAILS
NAME	MS. S RAJESHWARI
EC NO.	158183
DESIGNATION	SINGLE WINDOW OPERATOR B
PLACE OF WORK	BANGALORE, JAYANAGAR
BIRTHDATE	02-10-1978
PROPOSED DATE OF HEALTH CHECKUP	27-03-2023
BOOKING REFERENCE NO.	22M158183100052430E

This letter of approval / recommendation is valid if submitted along with copy of the Bank of Baroda employee id card. This approval is valid from **23-03-2023** till **31-03-2023**. The list of medical tests to be conducted is provided in the annexure to this letter. Please note that the said health checkup is a **cashless facility** as per our tie up arrangement. We request you to attend to the health checkup requirement of our employee and accord your top priority and best resources in this regard. The EC Number and the booking reference number as given in the above table shall be mentioned in the invoice, invariably.

We solicit your co-operation in this regard.

Yours faithfully,

Sd/-

**Chief General Manager
HRM Department
Bank of Baroda**

(Note: This is a computer generated letter. No Signature required. For any clarification, please contact Mediwheel (Arcofemi Healthcare Limited))