

: CVELOPV188533 : 12-08-2023 15:16

Patient Name : Mrs. USHA R J Age/Gender : 32 Y/F

UHID/MR No. :
Sample Collected on :

: CVEL.0000137648

•

LRN#

: RAD2071390

Ref Doctor : SELF

Emp/Auth/TPA ID : 882456310065

DEPARTMENT OF RADIOLOGY

OP Visit No

Reported on

Specimen

ULTRASOUND - WHOLE ABDOMEN

<u>Liver</u> appears normal in size (15.0 cms) with increased echogenecity. 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 (8.8 cms). 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 - 10.9 x 3.6 cms Left kidney - 10.0 x 4.9 cms

<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: Post LSCS elongated uterus and measures 8.5 x 3.5 x 5.1 cms.

.Endometrialecho-complex appears normal and measures 5.8 mm.

Both ovaries are polycystic.

Right ovary - 3.6 x 2.1 x 3.8 cms (vol 15.5 cc) Left ovary - 3.8 x 1.9 x 3.5 cms (vol 14.0 cc)

Early gastritis changes seen.

IMPRESSION:

- * GRADE 1 FATTY LIVER.
- * BILATERAL POLYCYSTIC OVARIES.
- * EARLY GASTRITIS CHANGES.

(The sonography findings should always be considered in correlation with the clinical and other investigation



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finding where applicable.) It is only a professional opinion, Not valid for medico legal purpose.

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

Radiology



: CVELOPV188533

: 12-08-2023 12:33

Patient Name : Mrs. USHA R J Age/Gender : 32 Y/F

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OP Visit No
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: RAD2071390 Specimen

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DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Both lung fields and hila are normal.

No obvious active pleuro-parenchymal lesion seen.

Both costophrenic and cardiophrenic angles are clear.

Both diaphragms are normal in position and contour.

Thoracic wall and soft tissues appear normal.

CONCLUSION:

No obvious abnormality seen

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

Radiology

Name: Mrs. USHA R J 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. V J NIRANJANA BHARATHI

Doctor's Signature

MR No: CVEL.0000137648
Visit ID: CVELOPV188533
Visit Date: 12-08-2023 08:52

Discharge Date:

Referred By: SELF

Name: Mrs. USHA R J 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.0000137648
Visit ID: CVELOPV188533
Visit Date: 12-08-2023 08:52

Discharge Date:

Referred By: SELF

Name: Mrs. USHA R J
Age/Gender: 32 Y/F
Address: CHENNAI
Location: CHENNAI, TAMIL NADU MR No: CVEL.0000137648 CVELOPV188533 Visit ID: Visit Date: 12-08-2023 08:52

Discharge Date:

Doctor: Referred By: SELF

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

Name: Mrs. USHA R J
Age/Gender: 32 Y/F
Address: CHENNAI
Location: CHENNAI, TAMIL NADU MR No: CVEL.0000137648 CVELOPV188533 Visit ID: Visit Date: 12-08-2023 08:52

Discharge Date:

Doctor: Referred By: SELF

Department: GENERAL
Rate Plan: VELACHERY_03122022
Sponsor: ARCOFEMI HEALTHCARE LIMITED

Consulting Doctor: Dr. PAVITHRA RAMAKRISHNAN

HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

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Doctor's Signature

Name: Mrs. USHA R J
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Discharge Date:

Doctor: Referred By: SELF

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

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PHYSICAL EXAMINATION

SYSTEMIC EXAMINATION

IMPRESSION

RECOMMENDATION

Doctor's Signature

II)afe	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
12-08-2023 16:22	Beats/min	110/80 mmHg	_	_	165 cms	73 Kgs	%	%	Years	26.81	cms	cms	cms		AHLL05400

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12-08-2023 16:22	Beats/min	110/80 mmHg	_	_	165 cms	73 Kgs	%	%	Years	26.81	cms	cms	cms		AHLL05400



CERTIFICATE OF MEDICAL FITNESS

Height: 165	Cm We	eight: 73 · kg	BMI: 26.8.	BP: 10 / 80, mmHg
OPTHAL CHECK	: Right Eye	e: 616 .	Left Eye: 6/6.	Colour vision : .

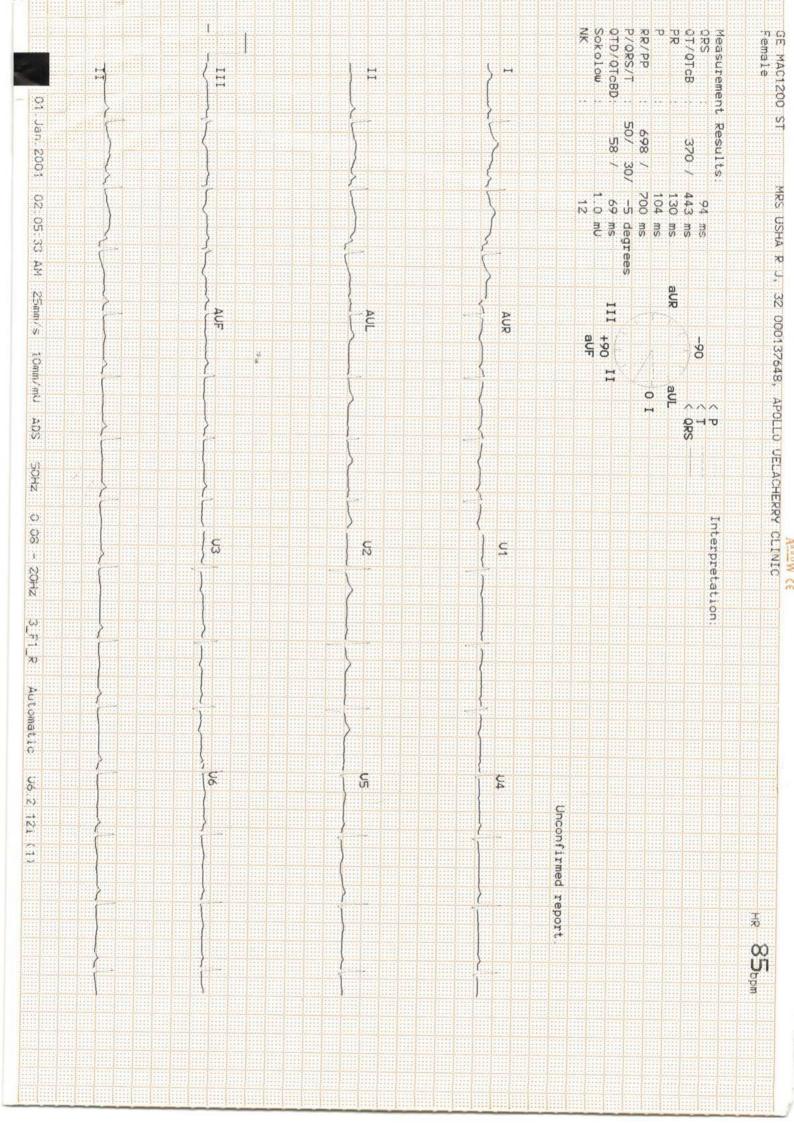
This is to certify that I have conducted the	clinical examination
of My Usha P. I	00 13/6: 22
After reviewing the medical history and on clinical	examination it has been found that he/she is
Medically Fit To do Uno? FIT FOR WORK Fit with restrictions/recommendations	examination it has been found that he/she is On 18.8.23. Part Roul Open Manual Open Manual
Though following restrictions have been rethe job.	evealed, in my opinion, these are not impediments to
1	
2	
However the employee should follow the advicemmunicated to him/her.	
Review after	
Currently Unfit. Review after NIL.	recommended
• Unfit NIC.	Dr. Medical officer

Apollo clinic(Location)

This certificate is not meant for medico-legal purposes



CLIN - Cardiology
Reg. No: 93787



OPTHALMOLOGY



					portion. Global to you
Name MRS. Usha	R.J.		1	Date 12/08/20	D23 ·
Age 3244.			1	Date 12 08 20 UHID No. 13 76	48
Sex: Male Pema	ale				
	ОРНТН	AL FITNESS	CERTIFIC	CATE	
		RE		LE	
DV-UCVA	:	6/6		6/6.	
DV-BCVA	:				
NEAR VISION	:	Nb		Nb.	
ANTERIOR SEGMENT	:	ю			
IOP	:				
FIELDS OF VISION	:			(\sim)	
EOM	:				
COLOUR VISION	:	Normal		Normal	
FUNDUS	:				
IMPRESSION	:				
ADVICE	: fijt	for work	R/A-	6 months.	200
			1		

DEPT. OF APOLLO HEALTH CHECK



GYNAECOLOGY CONSULT

Name: MIS. UKMA R

137648 Date: 2.8.2023. UHID:

Age: 32 4.

Consultant Gynaecologist: Do pavidha

DRUG ALLERGIES

Complaints (related to Gynaec) - NIL SPECIFIC / YES

Known to have Diabetes / Hypertension / IHD / Asthma / Thyroid / Others —

Past Medical / Surgical History: 2 SCS.

Family History:

OTHER SYSTEMS:

GYNAEC HISTORY:

Marital Status - S/M/Others

Children

- Maxbuss

Deliveries

L.C.B.

Prylices-syns/eses

Abortion

dul- baloslas. Contraception -

Present Medication:

Periods

L.M.P.

Menopause

GYNAEC EXAMINATION:

on Svagna-healthy

P/R

PAP SMEAR: Taken / Not Taken (Reason)

OPINION & ADVICE:

GENERAL EXAMINATION:

Height:

Weight:

BMI:

General Condition:

Blood Pressure:

Thyroid:

Others:

BREASTS:

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

Your Apollo order has been confirmed

CVEL'. 137648

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

Sat 7/29/2023 12:58 PM

To:ushakrishnan91@gmail.com <ushakrishnan91@gmail.com> Cc:Velachery Apolloclinic <velachery@apolloclinic.com>;Martin Amalraj I H <martin.amalraj@apolloclinic.com>;Syamsunder M <syamsunder.m@apollohl.com>

Dear MS. J USHA R,

Namaste Team,

Greetings from Apollo Clinics,

With regards to the below request the below appointment is scheduled at VELACHERY clinic on 2023-08-12 at 08:25-08:30.

Corporate Name	ARCOFEMI HEALTHCARE LIMITED
Agreement	ARCOFEMI MEDIWHEEL FEMALE AHC CREDIT PAN INDIA OP
Name	AGREEMENT
Package	[ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS
Name	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:



ஆச் ஜெ உஷா R J Usha

பிறந்த நான் / DOB : 30/07/1991 பெண் / FEMALE

ஆதார் - சா**தாரண மனிதனின் அதிகாரம்**

Patient Name : Mrs. USHA R J Age : 32 Y/F

UHID : CVEL.0000137648 OP Visit No : CVELOPV188533 Conducted By: : Dr. SHANMUGA SUNDARAM D Conducted Date : 12-08-2023 14:31

Referred By : SELF

2D-ECHO WITH COLOUR DOPPLER

Dimensions:

Ao (ed) 2.6 CM 3.1 CM LA (es) LVID (ed) 5.0 CM LVID (es) 3.3 CM IVS (Ed) 1.0 CM LVPW (Ed) 1.0 CM EF 62.00% %FD 32.00%

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:

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NO REGIONAL WALL MOTION ABNORMALITY

COLOUR AND DOPPLER STUDIES

AV max 0.8 m/s; PG 3.2 mmHg;

PV max 0.8 m/s; PG 2.9 mmHg;

MV E 0.5 m/s; MV A 0.4 m/s;

TV E 0.3 m/s; TV A 0.2 m/s.

IMPRESSION;

*NO REGIONAL WALL MOTION ABNORMALITY;

*NORMAL LEFT VENTRICULAR IN SIZE & SYSTOLIC FUNCTION;

*NO PERICARDIAL EFFUSION/ PULMONARY ARTERY HYPERTENSION.



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DR.SHANMUGA SUNDRAM

CONSULTANT CARDIOLOGIST