







Patient Name : Mrs.SWAPNA P

Age/Gender : 43 Y 5 M 5 D/F

UHID/MR No : CASR.0000181983

Visit ID : CASROPV210623

Ref Doctor : Dr.SELF Emp/Auth/TPA ID : kk176347 Collected : 12/Aug/2023 09:06AM

Received : 12/Aug/2023 03:00PM

Reported : 12/Aug/2023 04:13PM Status : Final Report

Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

Δ	ARCOFEMI - MEDIWHEEL - FULL BODY	ANNUAL PLUS CHE	CK ADVANCED	- FEMALE - 2D ECHO	PAN INDIA - FY2324
	Test Name	Result	Unit	Bio. Ref. Range	Method

HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	11.3	g/dL	12-15	Spectrophotometer
PCV	34.70	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.11	Million/cu.mm	3.8-4.8	Electrical Impedence
MCV	84.3	fL	83-101	Calculated
MCH	27.4	pg	27-32	Calculated
MCHC	32.5	g/dL	31.5-34.5	Calculated
R.D.W	14.8	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	7,490	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (I	DLC)			
NEUTROPHILS	58.5	%	40-80	Electrical Impedance
LYMPHOCYTES	30	%	20-40	Electrical Impedance
EOSINOPHILS	2.1	%	1-6	Electrical Impedance
MONOCYTES	9.3	%	2-10	Electrical Impedance
BASOPHILS	0.1	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	4381.65	Cells/cu.mm	2000-7000	Electrical Impedance
LYMPHOCYTES	2247	Cells/cu.mm	1000-3000	Electrical Impedance
EOSINOPHILS	157.29	Cells/cu.mm	20-500	Electrical Impedance
MONOCYTES	696.57	Cells/cu.mm	200-1000	Electrical Impedance
BASOPHILS	7.49	Cells/cu.mm	0-100	Electrical Impedance
PLATELET COUNT	352000	cells/cu.mm	150000-410000	Electrical impedence
ERYTHROCYTE SEDIMENTATION RATE (ESR)	11	mm at the end of 1 hour	0-20	Modified Westergren
PERIPHERAL SMEAR				

RBC NORMOCYTIC NORMOCHROMIC

WBC WITHIN NORMAL LIMITS

PLATELETS ARE ADEQUATE ON SMEAR

NO HEMOPARASITES SEEN

IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE

Page 1 of 14





Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016 | www.apollohl.com | Email ID: enquiry@apollohl.com, Ph No: 040-4904 7777, Fax No: 4904 7744

A-12, # 1-9-71/A/12/b, Rishab Heights, Rukminipuri Housing Color A S Rao Nagar, Hyderabad, Telangana, India - 500062













: Mrs.SWAPNA P

Age/Gender

: 43 Y 5 M 5 D/F

: Dr.SELF

UHID/MR No

: CASR.0000181983

Visit ID Ref Doctor

: CASROPV210623

Emp/Auth/TPA ID : kk176347 Collected

: 12/Aug/2023 09:06AM

: 12/Aug/2023 03:00PM

Received Reported Status

: 12/Aug/2023 07:17PM

Sponsor Name

: Final Report

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK AI	DVANCED - FEMALE - 2D ECHO - 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 technology		
Rh TYPE	Positive			Microplate technology		

Page 2 of 14













Patient Name : Mrs.SWAPNA P Age/Gender : 43 Y 5 M 5 D/F

UHID/MR No : CASR.0000181983

Visit ID : CASROPV210623

Ref Doctor : Dr.SELF Emp/Auth/TPA ID : kk176347 Collected : 12/Aug/2023 09:06AM

Received : 12/Aug/2023 03:10PM Reported : 12/Aug/2023 06:25PM

Status : Final Report

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY	ANNUAL PLUS CHE	CK ADVANCED	- FEMALE - 2D ECHO -	PAN INDIA - FY2324
Test Name	Result	Unit	Bio. Ref. Range	Method

GLUCOSE, FASTING , NAF PLASMA	87	mg/dL	70-100	GOD - POD	
-------------------------------	----	-------	--------	-----------	--

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

HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD EDTA	5.7	%	HPLC
ESTIMATED AVERAGE GLUCOSE (eAG),	117	mg/dL	Calculated
WHOLE BLOOD EDTA			

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

Page 3 of 14











: Mrs.SWAPNA P

Age/Gender

: 43 Y 5 M 5 D/F

UHID/MR No

: CASR.0000181983

Visit ID Ref Doctor

: CASROPV210623

Emp/Auth/TPA ID

: Dr.SELF : kk176347 Collected

: 12/Aug/2023 09:06AM

Received

: 12/Aug/2023 03:10PM

Reported

: 12/Aug/2023 06:25PM

Status Sponsor Name : Final Report

: ARCOFEMI HEALTHCARE LIMITED

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

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









Patient Name : Mrs.SWAPNA P

Age/Gender : 43 Y 5 M 5 D/F

UHID/MR No : CASR.0000181983

Visit ID : CASROPV210623 Ref Doctor : Dr.SELF

Emp/Auth/TPA ID : kk176347 Collected : 12/Aug/2023 09:06AM

Received : 12/Aug/2023 03:10PM

: Final Report Status

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

: 12/Aug/2023 06:25PM

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

Reported

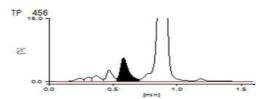
Chromatogram Report

HLG72368 2023-08-12 16:44:55 EDT230074375 ID 08120211 SL 0001 - 04

Sample No. Patient ID

CAL LB Y =1. 1210X + 0. 7280 Area Time A1A 0. 5 0. 24 8. 44 0.6 0.9 1.6 5.7 A1B 0.31 8 96 0. 37 15. 31 25. 04 LA1C+ SA1C 0.58 70 33 AO H-VO 92.9 0.88 H-V1 H-V2

1612.49 Total Area IFCC 38 mmol/mol HbA1c 5.7 % HbA1 6.8 % HbF 0.9 %



12-08-2023 17:44:58 APOLLO

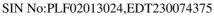
APOLLO DIAGNOSTICS GLOBAL BALANAGER

Page 5 of 14

1/1















Patient Name : Mrs.SWAPNA P

Age/Gender : 43 Y 5 M 5 D/F UHID/MR No : CASR.0000181983

Visit ID : CASROPV210623

Ref Doctor : Dr.SELF

Emp/Auth/TPA ID : kk176347 Collected : 12/Aug/2023 09:06AM

Received : 12/Aug/2023 03:22PM

Reported : 12/Aug/2023 05:35PM

: Final Report Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

Status

ARCOFEMI - MEDIWHEEL - FULL BODY	ANNUAL PLUS CHE	CK ADVANCED	- FEMALE - 2D ECHO	- PAN INDIA - FY2324
Test Name	Result	Unit	Bio. Ref. Range	Method

LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	140	mg/dL	<200	CHO-POD
TRIGLYCERIDES	64	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	45	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	95	mg/dL	<130	Calculated
LDL CHOLESTEROL	82.2	mg/dL	<100	Calculated
VLDL CHOLESTEROL	12.8	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.11		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

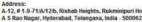
Measurements in the same patient can show physiological and analytical variations.

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

Page 6 of 14



















: Mrs.SWAPNA P

Age/Gender

: 43 Y 5 M 5 D/F

UHID/MR No

: CASR.0000181983

Visit ID Ref Doctor

: CASROPV210623 : Dr.SELF

Emp/Auth/TPA ID : kk176347 Collected

: 12/Aug/2023 09:06AM

Received

: 12/Aug/2023 03:22PM

Reported

Status

: 12/Aug/2023 05:35PM

Sponsor Name

: Final Report

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY	ANNUAL PLUS CHE	CK ADVANCED	- FEMALE - 2D ECHO -	PAN INDIA - FY2324
Test Name	Result	Unit	Bio. Ref. Range	Method

LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.55	mg/dL	0.3–1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.09	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.46	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	8	U/L	<35	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	12.0	U/L	<35	IFCC
ALKALINE PHOSPHATASE	63.00	U/L	30-120	IFCC
PROTEIN, TOTAL	6.36	g/dL	6.6-8.3	Biuret
ALBUMIN	3.76	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.60	g/dL	2.0-3.5	Calculated
A/G RATIO	1.45		0.9-2.0	Calculated

Page 7 of 14















: Mrs.SWAPNA P

Age/Gender

: 43 Y 5 M 5 D/F

UHID/MR No

: CASR.0000181983

Visit ID Ref Doctor

CHLORIDE

: CASROPV210623

: Dr.SELF

Emp/Auth/TPA ID : kk176347

Collected Received

: 12/Aug/2023 09:06AM

: 12/Aug/2023 03:22PM

Reported

Status

: 12/Aug/2023 05:35PM

101-109

Sponsor Name

mmol/L

: Final Report

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY	ANNUAL PLUS CHE	CK ADVANCED	- FEMALE - 2D ECHO -	- PAN INDIA - FY2324
Test Name	Result	Unit	Bio. Ref. Range	Method

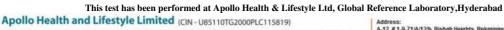
RENAL PROFILE/KIDNEY FUNCTION TES	T (RFT/KFT) , SERUI	М		
CREATININE	0.67	mg/dL	0.66 - 1.09	Modified Jaffe, Kinetic
UREA	15.80	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	7.4	mg/dL	8.0 - 23.0	Calculated
URIC ACID	3.58	mg/dL	2.6-6.0	Uricase PAP
CALCIUM	8.75	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	3.00	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	138	mmol/L	136–146	ISE (Indirect)
POTASSIUM	3.9	mmol/L	3.5–5.1	ISF (Indirect)

106

Page 8 of 14



ISE (Indirect)



SIN No:SE04450003









: Mrs.SWAPNA P

Age/Gender

: 43 Y 5 M 5 D/F

UHID/MR No Visit ID : CASR.0000181983

Ref Doctor

: CASROPV210623

Emp/Auth/TPA ID

: Dr.SELF : kk176347 Collected

: 12/Aug/2023 09:06AM

Received

: 12/Aug/2023 03:22PM

Reported Status : 12/Aug/2023 05:35PM : Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

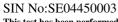
ARCOFEMI - MEDIWHEEL - F	FULL BODY ANNUAL PLUS CHECK ADVANCED -	FEMALE - 2D ECHO - PAN INDIA - FY2324
--------------------------	--	---------------------------------------

Test Name	Result	Unit	Bio. Ref. Range	Method
-----------	--------	------	-----------------	--------

GAMMA GLUTAMYL TRANSPEPTIDASE	11.00	U/L	<38	IFCC	
(GGT), SERUM					

Page 9 of 14















: Mrs.SWAPNA P

Age/Gender

: 43 Y 5 M 5 D/F

UHID/MR No Visit ID

: CASR.0000181983

Ref Doctor

: CASROPV210623

Emp/Auth/TPA ID

: Dr.SELF : kk176347 Collected

: 12/Aug/2023 09:06AM

Received

: 12/Aug/2023 03:23PM

Reported

: 12/Aug/2023 04:44PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY	ANNUAL PLUS CHE	CK ADVANCED	- 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)	0.83	ng/mL	0.87-1.78	CLIA
THYROXINE (T4, TOTAL)	9.93	μg/dL	6.09-12.23	CLIA
THYROID STIMULATING HORMONE (TSH)	2.075	μIU/mL	0.38-5.33	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:

lifor pregnant temales	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

Page 10 of 14









SIN No:SPL23114834









: Mrs.SWAPNA P

Age/Gender

: 43 Y 5 M 5 D/F

UHID/MR No Visit ID : CASR.0000181983 : CASROPV210623

Ref Doctor

: Dr.SELF

Emp/Auth/TPA ID : kk176347

Collected

: 12/Aug/2023 09:06AM

Received

Status

: 12/Aug/2023 04:41PM

Reported

: 12/Aug/2023 09:14PM

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

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

COMPLETE URINE EXAMINATION (CUE)	, URINE			
PHYSICAL EXAMINATION				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	HAZY		CLEAR	Visual
pH	5.5		5-7.5	Bromothymol Blue
SP. GRAVITY	1.010		1.002-1.030	Bromothymol Blue
BIOCHEMICAL EXAMINATION				
URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE		NEGATIVE	GOD - POD
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING
URINE KETONES (RANDOM)	NEGATIVE	題	NEGATIVE	SODIUM NITRO PRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	EHRLICH
BLOOD	NEGATIVE		NEGATIVE	Peroxidase
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	POSITIVE +++		NEGATIVE	PYRROLE HYDROLYSIS
CENTRIFUGED SEDIMENT WET MOUN	T AND MICROSCOPY			
PUS CELLS	30-35	/hpf	0-5	Microscopy
EPITHELIAL CELLS	14-16	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY
OTHERS	BUDDING YEAST PRESENT			MICROSCOPY

Page 11 of 14





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











Patient Name Age/Gender

: Mrs.SWAPNA P

UHID/MR No

: 43 Y 5 M 5 D/F : CASR.0000181983

Visit ID

Ref Doctor

: CASROPV210623 : Dr.SELF

Emp/Auth/TPA ID

: kk176347

Collected

: 12/Aug/2023 09:06AM

Received

: 12/Aug/2023 04:43PM

Reported Status

: 12/Aug/2023 06:37PM

Sponsor Name

: Final Report

: ARCOFEMI HEALTHCARE LIMITED

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(FASTING) NEGATIVE NEGATIVE Dipstick

Page 12 of 14















: Mrs.SWAPNA P

Age/Gender

: 43 Y 5 M 5 D/F

UHID/MR No

: CASR.0000181983

Visit ID Ref Doctor

: CASROPV210623

Emp/Auth/TPA ID

: Dr.SELF

: kk176347

Collected

: 12/Aug/2023 02:49PM

Received

: 12/Aug/2023 07:42PM

Reported

: 14/Aug/2023 05:51PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF CYTOLOGY

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

	CYTOLOGY NO.	13504/23			
I	SPECIMEN				
a	SPECIMEN ADEQUACY	ADEQUATE			
b	SPECIMEN TYPE	CONVENTIONAL SMEAR			
	SPECIMEN NATURE/SOURCE	CERVICAL SMEAR			
c	ENDOCERVICAL-TRANSFORMATION ZONE	PRESENT WITH ENDOCERVICAL CELLS			
d	COMMENTS	SATISFACTORY FOR EVALUATION			
П	MICROSCOPY	Superficial and intermediate squamous epithelial cells with benign morphology.Inflammatory cells, predominantly neutrophils. Negative for intraepithelial lesion/ malignancy.			
Ш	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.Shalini Singh M.B.B.S,M.D(Pathology) Consultant Pathologist

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

Dr. RAJESH BATTINA PhD.(Biochemistry) Consultant Biochemist

Page 13 of 14











Patient Name Age/Gender

: Mrs.SWAPNA P : 43 Y 5 M 5 D/F

UHID/MR No

: CASR.0000181983

Visit ID

: CASROPV210623

Ref Doctor

: Dr.SELF

Emp/Auth/TPA ID : kk176347 Collected

: 12/Aug/2023 02:49PM

Received

: 12/Aug/2023 07:42PM

Reported Status

: 14/Aug/2023 05:51PM : Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF CYTOLOGY

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

M.B.B.S,M.D(Pathology) Consultant Pathologist

M.B.B.S, M.D (Biochemistry) Consultant Biochemist

Page 14 of 14









APOLLO CLINIC

PHYSICAL EXAMINATION FORM

	PULSE 70 BT/MIN BMI KRS.	WAIST CM HIP	CHEST MEASUREMENT (IN) CM (WEIGHT 63.9 KGS	HEIGHT (48 CMS	NAME Mas. SWAPMA	0
967.	Kgs/cm2		(OUT)CM			AGE 43/F	言







POWER PRESCRIPTION

NAME: P. Swapna

GENDER: M/R

DATE: 12/Ang/23

AGE: 43

UHID:

RIGHT EYE

	SPH	CYL	AXIS	VISION
DISTANCE	175	-		6/6
NEAK	+ 1-25	-	-	N6

LEFT EYE

SPH	CYL	AXIS	VISION
1.50	0.75	96	616
+	_	-	Nb

COLOUR VISION : Norm.

DIAGNOSIS

OTHER FINDINGS:

INSTRUCTIONS

SIGNATURE

ollo Health and Lifestyle Limited

- U85110TN2000PLC046089) Regd. Office: 19 Bishop Gardens, R A Puram, Chennai 600 028, Tamil Nadu, India | Email ID: info@apollohl.com



Patient Name : Mrs. SWAPNA P Age/Gender : 43 Y/F

UHID/MR No.

: CASR.0000181983

Sample Collected on

LRN#

: RAD2071410

Ref Doctor : SELF Emp/Auth/TPA ID : kk176347 **OP Visit No**

: CASROPV210623 : 12-08-2023 20:46 Reported on

Specimen

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. PRAVEEN BABU KAJA Radiology



: CASROPV210623

: 12-08-2023 17:05

OP Visit No

Reported on

Specimen

Patient Name : Mrs. SWAPNA P Age/Gender : 43 Y/F

UHID/MR No.

LRN#

: CASR.0000181983

Sample Collected on

Ref Doctor : SELF Emp/Auth/TPA ID : kk176347

: RAD2071410

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

Liver appears normal in size 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. 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.

Right kidney: 97x42mm Left kidney: 100x44mm

Both the kidneys appear normal in size, shape and echopattern. Cortical thickness and CM differentiation are maintained. No calculus / hydronephrosis seen on either side.

Urinary Bladder is well distended and appears normal. No evidence of any wall thickening or abnormality.

Uterus61x45x50mm mildly bulky in size and shows altered myometrial posterior wall intramural firboid measuring 21x18mm

Endometrial echo-complex appears normal and measures 8 mm.

Right ovary: 19x23mm Left ovary: 18x21mm

Both ovaries appear normal in size, shape and echotexture.

No evidence of any adnexal pathology noted.

Cervix bulky

IMPRESSION:-Bulky Uterus With Altered Myometrial Posterior Wall Intramural Fibroid. Cervicitis Changes. Suggested TVS /MRI 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.



Patient Name : Mrs. SWAPNA P Age/Gender : 43 Y/F



Dr. PRAVEEN BABU KAJARadiology



Patient Name : Mrs. SWAPNA P Age/Gender : 43 Y/F

UHID/MR No. : CASR.0000181983 **OP Visit No** : CASROPV210623

Sample Collected on : Reported on : 12-08-2023 15:53

Ref Doctor : SELF **Emp/Auth/TPA ID** : kk176347

DEPARTMENT OF RADIOLOGY

SONO MAMOGRAPHY - 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.

Consultant Radiologist.

(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. PRAVEEN BABU KAJARadiology



Health Check up Booking Confirmed Request(bobS42074), Package Code-PKG10000313, Beneficiary Code-74932

Kumar <esskey441@gmail.com> swapna_p@satven.com

Wed, Aug 9, 2023 at 2:36 PM

Forwarded message -

rom: Mediwheel <wellness@mediwheel.in>

ate: Thu, 13 Jul 2023, 16:29

ubject: Health Check up Booking Confirmed Request(bobS42074),Package Code-PKG10000313, Beneficiary Code-74932

o: <esskey441@gmail.com>

c: <customercare@mediwheel.in>



011-41195959

Email:wellness@mediwheel.in

Dear P SWAPNA,

Please find the confirmation for following request.

Booking Date

: 12-07-2023

Package Name

Arcofemi MediWheel Full Body Annual Plus Check Advanced Female 2D

ECHO (Metro)

Name of

Diagnostic/Hospital: Apollo Clinic - A.S Rao Nagar

Address of

Apollo Clinic, A-12, 1-9-71/A/12/B, Rishab heights, above vodafone store,

Diagnostic/Hospital beside KFC, AS Rao Nagar -500062

Contact Details

: (040) 48522317/6309034666

City

: Hyderabad

State

: Telangana

: 500062

Appointment Date : 12-08-2023

Confirmation Status

: Confirmed

Preferred Time

: 8:00am-8:30am

Comment

: Confirm

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
- 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:

- 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.

Request you to reach half an hour before the scheduled time.

In case of further assistance, Please reach out to Team Mediwheel.





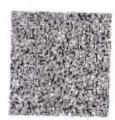
భారత ప్రభుత్వం Government of India

భారత వీశిష్ట గుర్తింపు ప్రాధికార సంస Unique Identification Authority of India

8జిస్ట్రిషన్/ Enrolment No.: 0648/03702/02265

To യടുമുള Pabba Swapna W/O,Kandukuri Sai Kumar 1-5-726/3 Breveni Neger Colony Opposite Lane To B P Bunk Old Alwaii Tirumalagin Hyderabad Telangana - 500010 9392002646





మీ ఆధార్ సంఖ్య / Your Aadhaar No. :

7675 7713 8038 VID: 9197 9186 6167 7887

నా ఆధార్, నా గుర్తింపు



smile galadya Government of India





Der 1995 Pabba Swapna audio 86/1008: 07/03/1980 FEMALE

7675 7713 8038 VID: 9197 9186 6167 7887

ನ್ ಆಧ್ , ನ್ ಗುರ್ಡಿಮ





- to the second se
- to makelijan arjed til i edigti utij un ut i etigti grandetnio austroid להמהלפלגים ולוקנונים
- = ඉති.බවතුරිස් හදුම්ඒ ලැගෑසේය ඒක

INFORMATION

- Andhasi is a proof of identity, not of citizenship.
- Werify identity using Secure QR Code/ Offline XML/ Online Authentication.
- This is electronically generated letter.
 - జ జరాగ్ దేశన్యాప్తంగా చెక్కువాలు అవుతుంది.
 - వినిద స్ట్రామల్య మరియు స్ట్రాప్తలే కిందలను సులువుగా పొందలనికి అగాగ్ మీకం నహాయపడుతుంది.
 - 🜣 ఎళ్లయ్పడూ మీ మొదైలే సెలంగ్ మిరియు. ఇమయిలే ఐడేవ్ ఆధార్ లో అన్ డేట్ చేసే ఉందండే
 - ఎమ్ ఇనార్ ఆఫ్ ఉపయోగించండి మీ అభార్ ను ఎల్లప్పుకూ మ్స్మాఫ్ఫ్ఫోన్లో ఉంచబడి.
 - 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.



్టుంట రాజింగ్లు గ్రాంక్షింగ్లు ప్రాంతాం సంస్థ Unique Identification Authority of India



直接を認るが విరుకామా: W/O కంటుకారి సామి కుమార్, 1-5-726/3, భవాద సూర్ కాలోకు, లైవ్ బు జి పి బుక్ ఎముయగా, ఓల్లే అభ్యాక్, తరుమబగిద, హైదరాబార్, తలుమబగిద, హైదరాబార్, తలుమణగా - 500010

Address: W/O,Kandukuri Sal Kumar, 1-5-726/3, Bruvari Nagar Colony, Opposite Lane To B.₽ Burk, Old Ahval, Tirumalagiri, Hyderabad, Telangana - 500010



7675 7713 8038 VID: 9197 9186 6167 7887







Patient Name : Mrs. SWAPNA P Age : 43 Y/F

 UHID
 : CASR.0000181983
 OP Visit No
 : CASROPV210623

 Reported By:
 : Dr. MRINAL .
 Conducted Date
 : 12-08-2023 19:01

Referred By : SELF

ECG REPORT

Observation:-

- 1. Normal Sinus Rhythm.
- 2. Heart rate is 82 beats per minutes.
- 3. No pathological Q wave or ST-T changes seen.
- 4. Normal P,QRS,T waves and axis.
- 5. No evidence of chamber, hypertrophy or enlargement see

Impression:

NORMAL RESTING ECG.

---- END OF THE REPORT -----



Dr. MRINAL .