

Patient Name : Mrs.VIDHYA R	Collected : 07/Apr/2023 09:29AM
Age/Gender : 51 Y 8 M 9 D/F	Received : 07/Apr/2023 12:44PM
UHID/MR No : CANN.0000221079	Reported : 07/Apr/2023 03:56PM
Visit ID : CANNOPV349687	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobS36820	

**DEPARTMENT OF HAEMATOLOGY**

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

**PERIPHERAL SMEAR , WHOLE BLOOD-EDTA**

METHODOLOGY	: Microscopic
RBC MORPHOLOGY	: Predominantly normocytic normochromic RBC's noted.
WBC MORPHOLOGY	: Normal in number, morphology and distribution. No abnormal cells seen.
PLATELETS	: Adequate in number.
PARASITES	: No haemoparasites seen
IMPRESSION	: Normocytic Normochromic blood picture
NOTE/ COMMENT	: Please correlate clinically.



SIN No:BED230087668

This test has been performed at Apollo Health and Lifestyle Ltd - Chennai, Diagnostics Laboratory.

**Apollo Health and Lifestyle Limited** (CIN - U85110TG2000PLC115819)

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**APOLLO CLINICS NETWORK**

**Telangana:** Hyderabad (AS Rao Nagar | Chanda Nagar | Kondapur | Nallakunta | Nizampet | Manikonda | Uppal) **Andhra Pradesh:** Vizag (Seethamma Peta) **Karnataka:** Bangalore (Basavanagudi | Bellandur | Electronics City | Fraser Town | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli | Koramangala | Sarjapur Road) **Mysore** (VV Mohalla) **Tamilnadu:** Chennai (Annanagar | Kotturpuram | Mogappair | T Nagar | Valasaravakkam | Velachery) **Maharashtra:** Pune (Aundh | Nigdi Pradhikaran | Viman Nagar | Wanowrie) **Uttar Pradesh:** Ghaziabad (Indrapuram) **Gujarat:** Ahmedabad (Satellite) **Punjab:** Amritsar (Court Road) **Haryana:** Faridabad (Railway Station Road)

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**HEMOGRAM , WHOLE BLOOD-EDTA**

HAEMOGLOBIN	13.6	g/dL	12-15	Spectrophotometer
PCV	40.70	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.77	Million/cu.mm	3.8-4.8	Electrical Impedance
MCV	85.3	fL	83-101	Calculated
MCH	28.6	pg	27-32	Calculated
MCHC	33.5	g/dL	31.5-34.5	Calculated
R.D.W	13.4	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	<b>10,200</b>	cells/cu.mm	4000-10000	Electrical Impedance

**DIFFERENTIAL LEUCOCYTIC COUNT (DLC)**

NEUTROPHILS	72.2	%	40-80	Electrical Impedance
LYMPHOCYTES	<b>16.5</b>	%	20-40	Electrical Impedance
EOSINOPHILS	3.8	%	1-6	Electrical Impedance
MONOCYTES	7.1	%	2-10	Electrical Impedance
BASOPHILS	0.4	%	<1-2	Electrical Impedance

**ABSOLUTE LEUCOCYTE COUNT**

NEUTROPHILS	<b>7364.4</b>	Cells/cu.mm	2000-7000	Electrical Impedance
LYMPHOCYTES	1683	Cells/cu.mm	1000-3000	Electrical Impedance
EOSINOPHILS	387.6	Cells/cu.mm	20-500	Electrical Impedance
MONOCYTES	724.2	Cells/cu.mm	200-1000	Electrical Impedance
BASOPHILS	40.8	Cells/cu.mm	0-100	Electrical Impedance

<b>PLATELET COUNT</b>	277000	cells/cu.mm	150000-410000	Electrical impedance
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<b>ERYTHROCYTE SEDIMENTATION RATE (ESR)</b>	<b>34</b>	mm at the end of 1 hour	0-20	Modified Westergren
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IMPRESSION : Normocytic Normochromic blood picture

NOTE/ COMMENT : Please correlate clinically.



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<b>BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD-EDTA</b>				
BLOOD GROUP TYPE	B			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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**DEPARTMENT OF BIOCHEMISTRY**

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<b>GLUCOSE, FASTING , NAF PLASMA</b>	<b>113</b>	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

<b>GLUCOSE, POST PRANDIAL (PP), 2 HOURS , NAF PLASMA</b>	<b>157</b>	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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Test Name	Result	Unit	Bio. Ref. Range	Method
<b>HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD-EDTA</b>	7.2	%		HPLC
<b>ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD-EDTA</b>	160	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



SIN No:PLF01956691,PLP1320193,EDT230035786

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

TOTAL CHOLESTEROL	158	mg/dL	<200	CHO-POD
TRIGLYCERIDES	<b>268</b>	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	44	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	114	mg/dL	<130	Calculated
LDL CHOLESTEROL	60.4	mg/dL	<100	Calculated
VLDL CHOLESTEROL	<b>53.6</b>	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.59		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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**LIVER FUNCTION TEST (LFT) , SERUM**

BILIRUBIN, TOTAL	0.84	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.13	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.71	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	13	U/L	<35	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	12.0	U/L	<35	IFCC
ALKALINE PHOSPHATASE	83.00	U/L	30-120	IFCC
PROTEIN, TOTAL	7.30	g/dL	6.6-8.3	Biuret
ALBUMIN	4.40	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.90	g/dL	2.0-3.5	Calculated
A/G RATIO	1.52		0.9-2.0	Calculated



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**RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT) , SERUM**

CREATININE	<b>0.49</b>	mg/dL	0.72 – 1.18	JAFFE METHOD
UREA	<b>11.00</b>	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	<b>5.1</b>	mg/dL	8.0 - 23.0	Calculated
URIC ACID	<b>6.60</b>	mg/dL	2.6-6.0	Uricase PAP
CALCIUM	9.60	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	4.30	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	137	mmol/L	136–146	ISE (Indirect)
POTASSIUM	3.9	mmol/L	3.5–5.1	ISE (Indirect)
CHLORIDE	<b>100</b>	mmol/L	101–109	ISE (Indirect)

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<b>GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM</b>	<b>64.00</b>	U/L	<38	IFCC



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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

Address:  
D No.30, F - Block 2nd Avenue, Anna Nagar East, Chennai.600 102,  
Phone - 044-26224504 / 05



**APOLLO CLINICS NETWORK**

**Telangana:** Hyderabad (AS Rao Nagar | Chanda Nagar | Kondapur | Nallakunta | Nizampet | Manikonda | Uppal) **Andhra Pradesh:** Vizag (Seethamma Peta) **Karnataka:** Bangalore (Basavanagudi | Bellandur | Electronics City | Fraser Town | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli | Koramangala | Sarjapur Road) **Mysore** (VV Mohalla) **Tamilnadu:** Chennai (Annanagar | Kotturpuram | Mogappair | T Nagar | Valasaravakkam | Velachery) **Maharashtra:** Pune (Aundh | Nigdi Pradhikaran | Viman Nagar | Wanowrie) **Uttar Pradesh:** Ghaziabad (Indrapuram) **Gujarat:** Ahmedabad (Satellite) **Punjab:** Amritsar (Court Road) **Haryana:** Faridabad (Railway Station Road)

Patient Name : Mrs.VIDHYA R	Collected : 07/Apr/2023 09:29AM
Age/Gender : 51 Y 8 M 9 D/F	Received : 07/Apr/2023 01:40PM
UHID/MR No : CANN.0000221079	Reported : 07/Apr/2023 04:53PM
Visit ID : CANNOPV349687	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobS36820	

**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
-----------	--------	------	-----------------	--------

**THYROID PROFILE (TOTAL T3, TOTAL T4, TSH) , SERUM**

TRI-IODOTHYRONINE (T3, TOTAL)	<b>0.68</b>	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	11.65	µg/dL	6.09-12.23	CLIA
THYROID STIMULATING HORMONE (TSH)	3.542	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



SIN No: SPL23057947

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**1860 500 7788**  
www.apolloclinic.com

**APOLLO CLINICS NETWORK**

**Telangana:** Hyderabad (AS Rao Nagar | Chanda Nagar | Kondapur | Nallakunta | Nizampet | Manikonda | Uppal) | **Andhra Pradesh:** Vizag (Seethamma Peta) | **Karnataka:** Bangalore (Basavanagudi | Bellandur | Electronics City | Fraser Town | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli | Koramangala | Sarjapur Road) | **Mysore** (VV Mohalla) | **Tamilnadu:** Chennai (Annanagar | Kotturpuram | Mogappair | T Nagar | Valasaravakkam | Velachery) | **Maharashtra:** Pune (Aundh | Nigdi Pradhikaran | Viman Nagar | Wanowrie) | **Uttar Pradesh:** Ghaziabad (Indrapuram) | **Gujarat:** Ahmedabad (Satellite) | **Punjab:** Amritsar (Court Road) | **Haryana:** Faridabad (Railway Station Road)

Patient Name : Mrs.VIDHYA R	Collected : 07/Apr/2023 09:29AM
Age/Gender : 51 Y 8 M 9 D/F	Received : 07/Apr/2023 02:08PM
UHID/MR No : CANN.0000221079	Reported : 07/Apr/2023 03:58PM
Visit ID : CANNOPV349687	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobS36820	

**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 , URINE**

**PHYSICAL EXAMINATION**

COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pH	7.5		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	1.010		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	NEGATIVE		NEGATIVE	LEUCOCYTE ESTERASE

**CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY**

PUS CELLS	2-4	/hpf	0-5	Microscopy
EPITHELIAL CELLS	3-5	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	ABSENT		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY



SIN No:UR2093871

This test has been performed at Apollo Health and Lifestyle Ltd - Chennai, Diagnostics Laboratory.

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Patient Name : Mrs.VIDHYA R	Collected : 07/Apr/2023 09:29AM
Age/Gender : 51 Y 8 M 9 D/F	Received : 07/Apr/2023 02:07PM
UHID/MR No : CANN.0000221079	Reported : 07/Apr/2023 04:25PM
Visit ID : CANNOPV/349687	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobS36820	

**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


**\*\*\* End Of Report \*\*\***

Result/s to Follow:

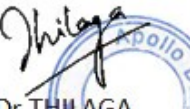
LBC PAP TEST- PAPSURE



**DR. MARQUESS RAJ**  
M.D (PATH), D.N.B (PATH)  
Consultant Pathologist



**DR. R.SRIVATSAN**  
M.D.(Biochemistry)



**Dr THILAGA**  
M.B.B.S, M.D(Pathology)  
Consultant Pathologist



SIN No:UPP014540,UF008271

This test has been performed at Apollo Health and Lifestyle Ltd - Chennai, Diagnostics Laboratory.

**Apollo Health and Lifestyle Limited** (CIN - U85110TG2000PLC115819)

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**1860 500 7788**  
www.apolloclinic.com

**APOLLO CLINICS NETWORK**

**Telangana:** Hyderabad (AS Rao Nagar | Chanda Nagar | Kondapur | Nallakunta | Nizampet | Manikonda | Uppal) **Andhra Pradesh:** Vizag (Seethamma Peta) **Karnataka:** Bangalore (Basavanagudi | Bellandur | Electronics City | Fraser Town | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli | Koramangala | Sarjapur Road) **Mysore** (VV Mohalla) **Tamilnadu:** Chennai (Annanagar | Kotturpuram | Mogappair | T Nagar | Valasaravakkam | Velachery) **Maharashtra:** Pune (Aundh | Nigdi Pradhikaran | Viman Nagar | Wanowrie) **Uttar Pradesh:** Ghaziabad (Indrapuram) **Gujarat:** Ahmedabad (Satellite) **Punjab:** Amritsar (Court Road) **Haryana:** Faridabad (Railway Station Road)

<b>Patient Name</b>	: Mrs. VIDHYA R	<b>Age/Gender</b>	: 51 Y/F
<b>UHID/MR No.</b>	: CANN.0000221079	<b>OP Visit No</b>	: CANNOPV349687
<b>Sample Collected on</b>	:	<b>Reported on</b>	: 08-04-2023 16:50
<b>LRN#</b>	: RAD1970798	<b>Specimen</b>	:
<b>Ref Doctor</b>	: SELF		
<b>Emp/Auth/TPA ID</b>	: bobS36820		

---

**DEPARTMENT OF RADIOLOGY**

---

**ULTRASOUND - WHOLE ABDOMEN**

Liver shows uniform echopattern with no evidence of focal or diffuse pathology.  
Intra and extra hepatic biliary passages are not dilated.

Gall bladder appears normal with no evidence of calculus. Wall thickness appear normal.

Pancreas appear normal.

Spleen measures 9.5cms.

A small splenunculus ( 1.2 x 1.1cm) at inferior pole of spleen

Portal and splenic veins appear normal.

No evidence of ascites or lymphadenopathy. Diaphragmatic movements are satisfactory.

There is no evidence of sub diaphragmatic pathology or pleural effusion.

Right kidney measures 10.2 x 4.7cms.

Left kidney measures 10.7 x 5.0cms.

Both kidneys show normal echopattern with no evidence of calculi or calyceal dilatation.

Uterus measures 7.6 x 3.3 x 3.0 cms and shows normal endometrial and myometrial echoes.

The endometrial thickness 3.4mm.

**Patient Name** : Mrs. VIDHYA R

**Age/Gender** : 51 Y/F

---

Both ovaries not visualised clearly

No mass lesion seen in the pelvis.

Bladder is normal in contour.

**IMPRESSION**

**\*NO SIGNIFICANT ABNORMALITY IN DETECTED**

**Dr. M SWAPNA**  
MBBS ,DNB(RD)  
Radiology

<b>Patient Name</b>	: Mrs. VIDHYA R	<b>Age/Gender</b>	: 51 Y/F
<b>UHID/MR No.</b>	: CANN.0000221079	<b>OP Visit No</b>	: CANNOPV349687
<b>Sample Collected on</b>	:	<b>Reported on</b>	: 08-04-2023 08:19
<b>LRN#</b>	: RAD1970798	<b>Specimen</b>	:
<b>Ref Doctor</b>	: SELF		
<b>Emp/Auth/TPA ID</b>	: bobS36820		

**DEPARTMENT OF RADIOLOGY**

**SONO MAMMOGRAPHY - SCREENING**

**CH** : Both breast heaviness since 1weeks  
**Family H/O Breast cancer** :No  
**History of breast surgery** :No  
**Previous Mammogram** :No

**REPORT:**

**MAMMOGRAM Both sides Views** : Cranio caudal /oblique mediolateral  
**Special views (if any):**No

**Type of Breast Parenchyma-** Heterogeneously scattered fibroglandular tissue  
**ACR category** :B

**Asymmetry:** No

**MASS /OPACITY:**

No mass/opacity noted in both breasts.

**CALCIFICATION:**

**Scattered round calcification in both breasts**

No Calcification of suspicious Morphology/ Distribution noted in both breast.

**ASSOCIATED FEATURES ( Both Breast ):**

Architectural distortion	:Absent
Intramammary lymph node	: Absent



**Patient Name** : Mrs. VIDHYA R

**Age/Gender**

: 51 Y/F

solitary dilated ducts : Absent  
 Skin lesion : Absent  
 Skin and nipple retraction : Absent  
 Skin/Subcutaneous/trabecular thickening : Absent  
 Axilla : No axillary lymphadenopathy

**ULTRASOUND SCREENING :**

**TISSUE COMPOSITION:** homogenous background echotexture

**MASSES/CYST:**

**No suspicious solid /cystic lesions in both breasts**

**Associated features (Both Breasts )**

Architectural Distortion : Absent  
 Duct changes : Absent  
 Skin changes : Absent  
 Edema : Absent  
 Vascularity : Absent  
 Calcification : Absent  
 Both Axilla : No abnormality

**IMPRESSION :**

**NO SUSPICIOUS ABNORMALITY IN BOTH BREASTS**

**-BIRADS -I**

**SUGGESTION:**

Regular Mammogram screening

Though mammography is the single best method of screening breast cancer, it does not detect all breast cancers. The false negative rate of mammography is approximately 10 % It is important for you to do breast self - examination on a continuing basis .If lump is felt, consult your Doctor.

NB:BIRADS Categories.

I. Normal.

II. Benign finding.

**Patient Name** : Mrs. VIDHYA R

**Age/Gender** : 51 Y/F

---

III. Probably benign to be followed up after 6 months.

IV. Indeterminate lesion further evaluation necessary.

V. Highly suggestive of malignancy

VI. Proven malignancy.

BIRADS is an Imaging based classification. This has to be further correlated clinically and with other investigations including histopathological findings where ever warranted.

Disclaimer :Please note that this report is a radiological profesional opinion. It has to be correlated clinically and interpreted along with other investigations for comprehensive Health care management.

**Dr. M SWAPNA**  
MBBS ,DNB(RD)  
Radiology

<b>Patient Name</b>	: Mrs. VIDHYA R	<b>Age/Gender</b>	: 51 Y/F
<b>UHID/MR No.</b>	: CANN.0000221079	<b>OP Visit No</b>	: CANNOPV349687
<b>Sample Collected on</b>	:	<b>Reported on</b>	: 07-04-2023 13:18
<b>LRN#</b>	: RAD1970798	<b>Specimen</b>	:
<b>Ref Doctor</b>	: SELF		
<b>Emp/Auth/TPA ID</b>	: bobS36820		

**DEPARTMENT OF RADIOLOGY**

**X-RAY CHEST PA**

Lung fields are clear.

Cardio thoracic ratio is normal.

Apices, costo and cardiophrenic angles are free.

Cardio vascular shadow and hila show no abnormal feature.

Bony thorax shows no significant abnormality.

Domes of diaphragm are well delineated.

**IMPRESSION:**

**\*NO SIGNIFICANT ABNORMALITY DETECTED.**

**Dr. M SWAPNA**  
**MBBS ,DNB(RD)**  
Radiology

# Apollo Clinic

## CONSENT FORM

Patient Name: ..... R. Vidhya ..... Age: .....  
 UHID Number: ..... 220179 ..... Company Name: ..... BOB .....

I Mr/Mrs/Ms ..... Vidhya ..... Employee of ..... BOB .....  
 (Company) Want to inform you that I am not interested in getting ..... Dental .....

Tests done which is a part of my routine health check package.

And I claim the above statement in my full consciousness.

Patient Signature: ..... [Signature] ..... Date: ..... 7/4/23 .....

**Apollo Medical Centre**  
 No. 30, F-Block, 2nd Avenue,  
 Anna Nagar East, Chennai-600 102  
 Ph.: 2620 6666 / 2622 4805  
 Toll free No. 1860 500 7788



Name: Mrs. Vidhya  
 Occupation: .....  
 Age: 51 Sex: Male  Female   
 Address: .....  
 Ph: .....

Date: 07/04/23 Reg. No.: 221079  
 Ref. Physician: .....  
 Copies to: .....

**REPORT ON OPHTHALMIC EXAMINATION**

History: NU Dm x 10 yrs  
Thyroid x 15 yrs  
cholesterol x 10 yrs

Present Complaint: NU

**ON EXAMINATION:**

	RE	LE
Ocular Movements :	full	full
Anterior Segment :	N	N
Intra-Ocular-Pressure :		
Visual Acuity: D.V. :		
Without Glass :	6/9	6/6 <sup>-2</sup>
With Glass :	6/6	-
N.V. :	Nb	Nb
Visual Fields :	full	full
Fundus :		
Impression :		
Advice :	<u>OUT scan to mb out DR</u>	
Colour Vision :	<u>OV. normal</u>	<u>broth</u>

**OPHTHALMOLOGY / OPTOMETRIST**

ENT check up

Mrs. Vidhya A R

S/F

7/4/23

Height:	Weight:	BMI:	Waist Circum:
Temp:	Pulse:	Resp:	B.P:

General Examination / Allergies  
History

No complaints

O/E

DSL

ENT - WNL



Follow up date:

Doctor Signature & Stamp

Convenient & reliable. Complete diagnostic services for the entire family. All under one roof.



MRS VIDHYA R  
ID: 221079 RMC

51 Years

Female

Technician:  
Ordering Ph:  
Referring Ph:  
Attending Ph:

QRS : 76 ms  
QT / QTcBaz : 398 / 420 ms  
PR : 152 ms  
P : 92 ms  
RR / PP : 892 / 895 ms  
P / QRS / T : 65 / 46 / 24 degrees

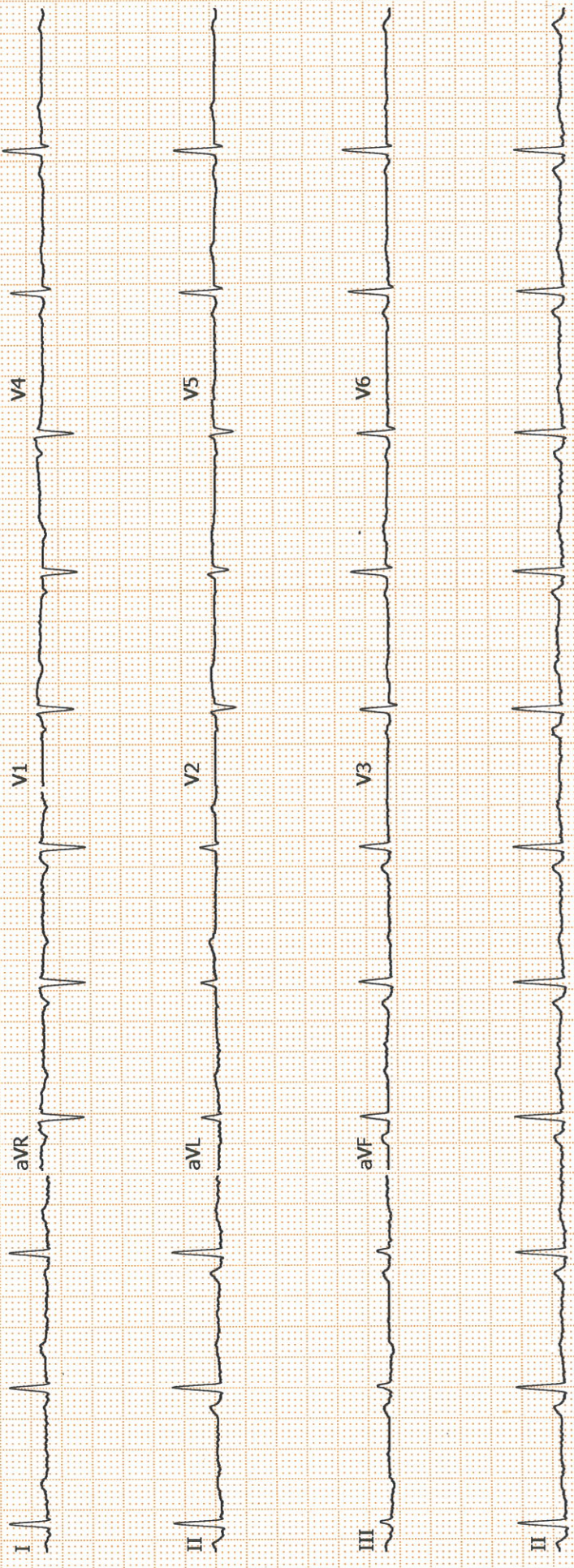
07.04.2023 1:35:10 PM  
APOLLO MEDICAL CENTER  
ANNA NAGAR  
CHENNAI

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

Room:

67 bpm  
-- / -- mmHg

*[Handwritten signature]*



*[Handwritten signature]*



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 spouse of our employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS OF HEALTH CHECK UP BENEFICIARY	
NAME	VIDHYA RENGARAJAN
DATE OF BIRTH	29-07-1971
PROPOSED DATE OF HEALTH CHECKUP FOR EMPLOYEE SPOUSE	31-03-2023
BOOKING REFERENCE NO.	22M53819100055418S
SPOUSE DETAILS	
EMPLOYEE NAME	MR. S RENGARAJAN
EMPLOYEE EC NO.	53819
EMPLOYEE DESIGNATION	MID - CORPORATE CLUSTER HEAD- SOUTH
EMPLOYEE PLACE OF WORK	MID CORPORATE CLUSTER OFFICE S
EMPLOYEE BIRTHDATE	28-04-1964

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 **30-03-2023** 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's spouse 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))

Patient Name : Mrs. VIDHYA R Age : 51 Y/F  
UHID : CANN.0000221079 OP Visit No : CANNOPV349687  
Conducted By: : Dr. RAKESH P GOPAL Conducted Date : 07-04-2023 15:50  
Referred By : SELF

---

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

#### **Dimensions:**

<b>Ao (ed)</b>	<b>2.5 CM</b>
<b>LA (es)</b>	<b>2.9 CM</b>
<b>RVID(ed)</b>	<b>1.9 CM</b>
<b>LVID (ed)</b>	<b>4.6 CM</b>
<b>LVID (es)</b>	<b>2.2 CM</b>
<b>IVS (Ed)</b>	<b>0.6/0.8 CM</b>
<b>LVPW (Ed)</b>	<b>0.7/1.1 CM</b>
<b>EF</b>	<b>64.00%</b>
<b>%FS</b>	<b>34.00%</b>
<b>MITRAL VALVE :</b>	<b>NORMAL</b>
<b>AML</b>	<b>NORMAL</b>
<b>PML</b>	<b>NORMAL</b>
<b>AORTIC VALVE</b>	<b>NORMAL</b>
<b>TRICUSPID VALVE</b>	<b>NORMAL</b>
<b>RIGHT VENTRICLE</b>	<b>NORMAL</b>



Patient Name : Mrs. VIDHYA R Age : 51 Y/F  
UHID : CANN.0000221079 OP Visit No : CANNOPV349687  
Conducted By: : Dr. RAKESH P GOPAL Conducted Date : 07-04-2023 15:50  
Referred By : SELF

---

**INTER ATRIAL SEPTUM INTACT**

**INTER VENTRICULAR SEPTUM INTACT**

**AORTA NORMAL**

**RIGHT ATRIUM NORMAL**

**LEFT ATRIUM NORMAL**

**Pulmonary Valve NORMAL**

**PERICARDIUM NORMAL**

**LEFT VENTRICLE:**

**NO REGIONAL WALL MOTION ABNORMALITY**

**NORMAL LEFT VENTRICULAR SYSTOLIC FUNCTION**

**COLOUR AND DOPPLER STUDIES**

**E/A-E: 0.9m/sec A: 0.7m/sec**

**VELOCITY ACROSS THE PULMONIC VALVE 0.9m/sec**

**VELOCITY ACROSS THE AV 1.4m/sec**

**TR VELOCITY 0.7m/sec**

**IMPRESSION**

Patient Name	: Mrs. VIDHYA R	Age	: 51 Y/F
UHID	: CANN.0000221079	OP Visit No	: CANNOPV349687
Conducted By:	: Dr. RAKESH P GOPAL	Conducted Date	: 07-04-2023 15:50
Referred By	: SELF		

---

**NORMAL CHAMBER DIMENSION**  
**NO REGIONAL WALL MOTION ABNORMALITY**  
**NORMAL LV SYSTOLIC FUNCTION ( EF 64 %)**  
**STRUCTURALLY VALVES ARE NORMAL**  
**TRIVIAL MITRAL REGURGITATION**  
**TRIVIAL TRICUSPID REGURGITATION**  
**NO PAH/ CLOT / PE**

*Rakesh Gopal*

Dr. RAKESH P  
GOPAL

Patient Name	: Mrs. VIDHYA R	Age	: 51 Y/F
UHID	: CANN.0000221079	OP Visit No	: CANNOPV349687
Reported By:	: DR ARULNIDHI	Conducted Date	: 07-04-2023 16:46
Referred By	: SELF		

---

## **ECG REPORT**

### **Observation :-**

- 1. Normal Sinus Rhythm.**
- 2. Heart rate is 67 beats per minutes.**

### **Impression:**

**NORMAL RESTING ECG.**

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

DR ARULNIDHI

Patient Name : Mrs. VIDHYA R  
UHID : CANN.0000221079  
Conducted By: :  
Referred By : SELF

Age : 51 Y/F  
OP Visit No : CANNOPV349687  
Conducted Date :

Patient Name : Mrs. VIDHYA R  
UHID : CANN.0000221079  
Conducted By :  
Referred By : SELF

Age : 51 Y/F  
OP Visit No : CANNOPV349687  
Conducted Date :

---

Patient Name : Mrs. VIDHYA R  
UHID : CANN.0000221079  
Conducted By: :  
Referred By : SELF

Age : 51 Y/F  
OP Visit No : CANNOPV349687  
Conducted Date :

Patient Name : Mrs. VIDHYA R  
UHID : CANN.0000221079  
Conducted By :  
Referred By : SELF

Age : 51 Y/F  
OP Visit No : CANNOPV349687  
Conducted Date :

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