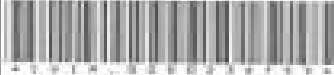


T 41

Name : Mrs. Pramedini Swain	Age : 54 Y	UHID :CVIM.000236753
Address : pune	Sex : F	
Plan : ARCOFEMEMEDIWHEEL, FEMALE, AHC CREDIT PAN INDIA OP AGREEMENT		OP Number :CVIMOPV592317
		Bill No :CVIM-OCR-62983
		Date : 24.02.2024 09:43

Sno	Service Type/Service Name	Department
1	ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2024	
1	GAMMA-GLUTAMYL TRANSFERASE (GGT)	
2	LIVER FUNCTION TEST (LFT)	
3	GLUCOSE - FASTING	
4	HEMOGRAM - PERIPHERAL SMEAR	
5	Gynaecology Consultation - FP (3)	
6	DIET CONSULTATION	
7	COMPLETE URINE EXAMINATION	
8	PERIPHERAL SMEAR	
9	SECRET	
10	CBC PAP TEST - PAPSURE	
11	RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)	
12	RENAL CONSULTATION	
13	HbA1c, GLYCATED HEMOGLOBIN	
14	ENT CONSULTATION - FP (4) - (1)	
15	FITNESS BY GENERAL PHYSICIAN	
16	BLOOD GROUP ABO AND RH FACTOR	
17	LIPID PROFILE	
18	BODY MASS INDEX (BMI)	
19	OPHTHAL BY GENERAL PHYSICIAN	
20	ULTRASOUND - WHOLE ABDOMEN	
21	THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)	

CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

of Prasadini Swain on 24/02/24

After reviewing the medical history and on clinical examination it has been found that he/she is

	Tick
<ul style="list-style-type: none"> • Medically Fit 	<input type="checkbox"/>
<ul style="list-style-type: none"> • Fit with restrictions/recommendations <p>Though following restrictions have been revealed, in my opinion, these are not impediments to the job.</p> <p>1. <u>① my triple eye</u></p> <p>2. <u>HBa1c - 5.9%</u></p> <p>3. <u>↑ LDL, ↑ uric acid</u></p> <p>However the employee should follow the advice/medication that has been communicated to him/her.</p> <p>Review after _____</p>	<input checked="" type="checkbox"/>
<ul style="list-style-type: none"> • Currently Unfit. <p>Review after _____ recommended</p>	<input type="checkbox"/>
<ul style="list-style-type: none"> • Unfit 	<input type="checkbox"/>

Dr. Archana V
 Medical Officer
 The Apollo Clinic, (Location)

This certificate is not meant for medico-legal purposes

Dr. Archana V. MBBS
 Registration No. 103429

Date : 24-02-2024

Department : GENERAL

MR NO : CVIM.0000236753

Doctor :

Name : Mrs. Pramodini Swain

Registration No :

Age/ Gender : 54 Y / Female

Qualification :

Consultation Timing: 09:43

Height : 168	Weight : 73	BMI : 26	Waist Circum : 108
Temp : 97	Pulse : 80	Resp : 18	B.P : 140/80

General Examination / Allergies History

Clinical Diagnosis & Management Plan

U/S
 (L) ovary shows
 a small simple
 cyst.

Kidney DM since
 Othadys.

No specific complaints.

O/E:
 C/O / N/O

Abdo:

- Vitamin D Def.

Ph - 20 = ⊕

CNS - Normal

Dr. Archana V. MBB
 Registration No. 103429



Follow up date:

Doctor Signature

Mrs Pramedini Swamy

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

General Examination / Allergies
History

Clinical Diagnosis & Management Plan

S
SWT] NPH

S

Follow up date:

Doctor Signature

Date: 7/4 Status: rhythm Baseline wander in lead(s) II, III, aVF Normal P axis, V-axis 60-90

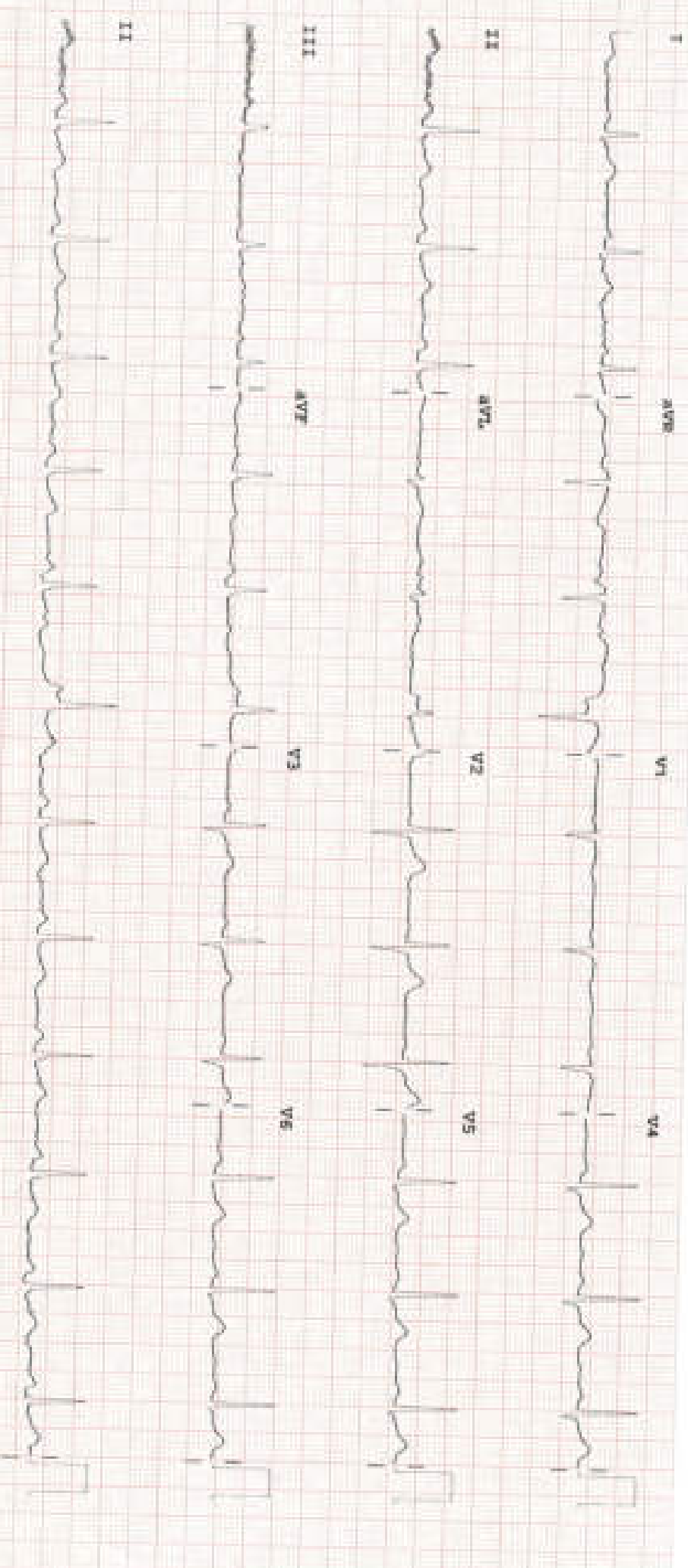
PR 160
QRS 77
QT 366
QTc 409

--AXIS--
P 54
QRS 61
T 28

12 Lead/ Standard Placement

- NORMAL ECG -

(Incontinued Diagnosis)



Device: Speed: 25 mm/sec Limb: 10 mm/mV Chest: 10.0 mm/mV

P 50-0.50-40 Br W PH1008 CS 37

EYE EXAMINATION

DATE: 21/2/20

MOBILE NO: 9

NAME: Aravind S

AGE: 30

CORPORATE: As per

	Right Eye	Left Eye
Distant vision	6/6	6/6
Near vision	N/6	N/6
Color vision	Normal	Normal
Fundus examination	Normal	Normal
Intraocular pressure	Normal	Normal
Slit lamp exam.	Normal	Normal

As per

Impression - Normal Eye Check Up.

(Ophthalmology)

As per
The Apollo Clinic
DR. M. D. ALAVAND
MBBS, D.O.M.S.
Cor. Vign Eye Surgeon
Reg. no. 36310



Patient Name : Mrs. Pramodini Swain
UHID : CVIM.0000236753
Reported on : 24-02-2024 12:23
Adm/Consult Doctor :
Age : 54 Y F
OP Visit No : CVIMOPV592317
Printed on : 25-02-2024 16:11
Ref Doctor : SELF

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.

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. No evidence of any intrinsic or extrinsic bladder abnormality detected.

Uterus appears normal in size. It shows normal shape & echo pattern. Endometrial echo-complex appears normal and measures 3 mm.

Both ovaries appear normal in size, shape and echotexture. Left ovary shows a small simple cyst measuring 14.8 x 12.6 mm

No evidence of any adnexal pathology noted.

Bowel loops and Retroperitoneum appear normal. Aorta and IVC appear normal. No abnormal lymphadenopathy noted.

IMPRESSION:-

Apollo Health and Lifestyle Limited

ICD - U85110G2000PLC11381H
Regd. Office: 1-10-60/52, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 084.
Ph.No: 040-4904 7777, Fax No: 4904 7744 | Email ID: enquiry@apollohl.com | www.apollohl.com

APOLLO CLINICS NETWORK MAHARASHTRA
Pune (Aundh) | Kharadi | Nigdi Pradhikaran | Viman Nagar | Worli

TO BOOK AN APPOINTMENT

1860 500 777

Patient Name : Mrs. Pramodini Swain Age : 54 Y F
UHID : CVIM.0000236753 OP Visit No : CVIMOPV592317
Reported on : 24-02-2024 12:23 Printed on : 25-02-2024 16:11
Adm/Consult Doctor : Ref Doctor : SELF

Left ovary shows a small simple cyst

(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.

Printed on:24-02-2024 12:23

---End of the Report---

Preeti
Dr. PREETI P KATHE
DMRE, MD, DNB
Radiology



Certificate No: MC-6697

Patient Name	: Mrs. PRAMODINI SWAIN	Collected	: 24/Feb/2024 10:15AM
Age/Gender	: 54 Y 9 M 28 D/F	Received	: 24/Feb/2024 12:52PM
UHID/MR No	: CVM.0000238753	Reported	: 24/Feb/2024 01:42PM
Visit ID	: CVMOPV592317	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 360038		

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324

PERIPHERAL SMEAR , WHOLE BLOOD EDTA

RBC's are Normocytic Normochromic,
 WBC's are normal in number and morphology
 Platelets are Adequate
 No Abnormal cells/hemoparasite seen.



DR. Sanjay Ingle
 M.B.B.S., M.D.(Pathology)
 Consultant Pathologist

STN No: BE2240048676

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab





Certificate No: MC-5587

Patient Name : Mrs PRAMODINI SWAIN	Collected : 24/Feb/2024 10:15AM
Age/Gender : 54 Y 9 M 28 DF	Received : 24/Feb/2024 12:52PM
UPID/MR No : CYIM.0000236753	Reported : 24/Feb/2024 01:42PM
Visit ID : CYMOPV582317	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 360038	

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	13.1	g/dL	12-15	Spectrophotometer
PCV	40.30	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.54	Million/cu.mm	3.8-4.8	Electrical Impedance
MCV	89	fL	83-101	Calculated
MCH	28.8	Pg	27-32	Calculated
MCHC	32.4	g/dL	31.5-34.5	Calculated
R.D.W	13.5	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	9,500	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	62.5	%	40-80	Electrical Impedance
LYMPHOCYTES	30.2	%	20-40	Electrical Impedance
EOSINOPHILS	2.4	%	1-6	Electrical Impedance
MONOCYTES	4.9	%	2-10	Electrical Impedance
BASOPHILS	0	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	5937.5	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2889	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	228	Cells/cu.mm	20-500	Calculated
MONOCYTES	465.5	Cells/cu.mm	200-1000	Calculated
Neutrophil lymphocyte ratio (NLR)	2.07		0.78- 3.53	Calculated
PLATELET COUNT	166000	cells/cu.mm	150000-410000	Electrical Impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	4	mm at the end of 1 hour	0-20	Modified Westergren

RBC's are Normocytic Normochromic,
 WBC's are normal in number and morphology
 Platelets are Adequate
 No Abnormal cells/hemoparasite seen.

DR. Sanjay Ingle
 M.B.B.S.M.D(Pathology)
 Consultant Pathologist



SIN No: BBD240948676

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Petli Pune, Diagnostics Lab
 Apollo Health and Lifestyle Limited | 104 - 105/107/108/109/110/111/112/113

Apollu Health and Lifestyle Limited | 104 - 105/107/108/109/110/111/112/113
 Regd. Office: 1-80-80-80, Apollo Highpoint Chambers, 5th Floor, Ring Road, Hyderabad, Telangana - 500 016 |
 www.apollohlt.com | Email: Dr.sanjay@apollohlt.com, Ph: No: 844-8984 7777, Fax No: 4600 7744

Apollu Health and Lifestyle Limited, Apollo Highpoint Chambers, 5th Floor, Ring Road, Hyderabad, Telangana - 500 016 |
 Regd. Office: 1-80-80-80, Apollo Highpoint Chambers, 5th Floor, Ring Road, Hyderabad, Telangana - 500 016 |
 www.apollohlt.com | Email: Dr.sanjay@apollohlt.com, Ph: No: 844-8984 7777, Fax No: 4600 7744



Certificate No: MC-3487

Patient Name	: Mrs. PRAMODINI SWAIN	Collected	: 24/Feb/2024 10:15AM
Age/Gender	: 54 Y 9 M 28 D/F	Received	: 24/Feb/2024 12:52PM
UHID/MR No	: CVM/0000236763	Reported	: 24/Feb/2024 01:42PM
Visit ID	: CVMOPV502317	Status	: Final Report
Ref Doctor	: Dr. SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 360038		

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDHWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324



DR. Sanjay Ingle
M.B.B.S., M.D.(Pathology)
Consultant Pathologist

SNV No: BE20240648676

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab
Apollo Health and Lifestyle Limited (CIN: U65110MH2008PLC158916)

Head Office: 114/40/5A, Ashoka Nighoshali Chambers, 3rd Floor, Ring Road, Hyderabad, Telangana - 500014 |
www.apolloclinic.com | Email: info@apolloclinic.com, PR No: 042-4604 7777, Fax No: 4604 7744

Head Office: Pune, Cooperative Society Limited, Shop No. 11 & 2nd Floor, Building 'C', Shree Nagar, Pune, Maharashtra. 411014





Certificate No: MC-5837

Patient Name : Mrs. PRAMODINI SWAIN	Collected : 24/Feb/2024 10:15AM
Age/Gender : 54 Y 9 M 28 D/F	Received : 24/Feb/2024 12:52PM
UHDNR No : CVIM.0000238753	Reported : 24/Feb/2024 02:26PM
Visit ID : CVIMOPV992317	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 360038	

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA				
BLOOD GROUP TYPE	B			Microplate Hemagglutination
Rh TYPE	Positive			Microplate Hemagglutination



DR. Sanjay Ingle
M.B.B.S, M.D (Pathology)
Consultant Pathologist

SIN No: BEI0340048676

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab





Certificate No: MC-5897

Patient Name : Mrs PRAMODINI SWAIN	Collected : 24/Feb/2024 10:15AM
Age/Gender : 54 Y 9 M 28 D/F	Received : 24/Feb/2024 01:15PM
UHIDMR No : CVWM.0000236753	Reported : 24/Feb/2024 01:47PM
Visit ID : CVIMOPV592317	Status : Final Report
Ref Doctor : Dr SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 360038	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, FASTING , NAF PLASMA	93	mg/dL	70-100	HEXOKINASE

Comment:

As per American Diabetes Guidelines, 2023

Fasting Glucose Values in mg/dL	Interpretation
70-100 mg/dL	Normal
100-125 mg/dL	Pre-diabetes
≥126 mg/dL	Diabetes
<70 mg/dL	Hypoglycemia

Note:

- The diagnosis of Diabetes requires a fasting plasma glucose of \geq or = 126 mg/dL and/or a random / 2 hr post glucose value of \geq or = 200 mg/dL on at least 2 occasions.
- Very high glucose levels ($>$ 150 mg/dL in adults) may result in Diabetic Ketoacidosis & is considered critical.



DR. Sanjay Ingle
M.B.B.S, M.D(Pedology)
Consultant Pathologist

SEN No:PL.F021(255)

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab

Apollo Health and Lifestyle Limited (CIN: UAC110002000113896)

Regd. Office: 1-10-0002, Apollo Engineering Chambers, 10th Floor, Begunpeta, Hyderabad, Telangana - 500 019

www.apolloclinic.com | Email ID: enquiry@apolloclinic.com, Ph: No: 020-4991 7777, Fax No: 020-4991 7044

Apollo Reference Permits, Corporation, Apollo
Limited, 10th Floor, 10 & 11th Floor, Building 'C',
Vijaya Nagar, Pune, Maharashtra, India - 411014



Patient Name	Mrs. PRAMODINI SWAIN	Collected	: 24/Feb/2024 10:15AM
Age/Gender	54 Y 2 M 28 D/F	Received	: 24/Feb/2024 12:47PM
UHD/IR No	CVIM.0000236753	Reported	: 24/Feb/2024 02:58PM
Visit ID	CVIMOPVSB2317	Status	: Final Report
Ref Doctor	: Dr. SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 366038		

DEPARTMENT OF BIOCHEMISTRY
ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA				
HBA1C, GLYCATED HEMOGLOBIN	5.9	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	123	mg/dL		Calculated

Comment:

Reference Range as per American Diabetes Association (ADA) 2023 Guidelines:

REFERENCE GROUP	HBA1C %
NON DIABETIC	<5.7
PREDIABETES	5.7 - 6.4
DIABETES	≥ 6.5
DIABETICS	
EXCELLENT CONTROL	6 - 7
FAIR TO GOOD CONTROL	7 - 8
UNSATISFACTORY CONTROL	8 - 10
POOR CONTROL	>10

Note: Dietary preparation or fasting is not required.

1. HbA1C is recommended by American Diabetes Association for Diagnosing Diabetes and monitoring Glycemic Control by American Diabetes Association guidelines 2023.

2. Trends in HbA1C values is a better indicator of Glycemic control than a single test.

3. Low HbA1C in Non-Diabetic patients are associated with Anemia (Iron Deficiency/Hemolytic), Liver Disorders, Chronic Kidney Disease. Clinical Correlation is advised in interpretation of low Values.

4. Falsely low HbA1c (below 4%) may be observed in patients with clinical conditions that shorten erythrocyte life span or decrease mean erythrocyte age. HbA1c may not accurately reflect glycemic control when clinical conditions that affect erythrocyte survival are present.

5. In cases of interference of Hemoglobin variants in HbA1C, alternative methods (Fructosamine) estimation is recommended for Glycemic Control

A- HbF >23%

B- Heterozygous Hemoglobinopathy.

(Hb Electrophoresis is recommended method for detection of Hemoglobinopathy)




 Dr Sneha Shah
 MBBS, MD (Pathology)
 Consultant Pathologist

SIN No:EDT240021911

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Park Pune, Diagnostics Lab-

Patient Name : Mrs. PRAMODINI SWAIN Age/Gender : 84 Y 9 M 28 DF UHID/MR No : CVIM.0000236753 Visit ID : CVIMOPV5B2317 Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 360038	Collected : 24/Feb/2024 10:15AM Received : 24/Feb/2024 01:06PM Reported : 24/Feb/2024 04:59PM Status : Final Report Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
--	--

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	190	mg/dL	<200	CHO-POD
TRIGLYCERIDES	136	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	62	mg/dL	40-80	Enzymatic Immuno-inhibition
NON-HDL CHOLESTEROL	128	mg/dL	<130	Calculated
LDL CHOLESTEROL	100.57	mg/dL	<100	Calculated
VLDL CHOLESTEROL	27.28	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.06		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

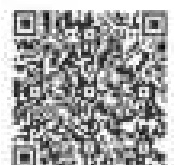
1. Measurements in the same patient on different days can show physiological and analytical variations.
2. NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.
3. Primary prevention algorithm now includes absolute risk estimation and lower LDL Cholesterol target levels to determine eligibility of drug therapy.
4. Low HDL levels are associated with Coronary Heart Disease due to insufficient HDL being available to participate in reverse cholesterol transport, the process by which cholesterol is eliminated from peripheral tissues.
5. As per NCEP guidelines, all adults above the age of 20 years should be screened for lipid status. Selective screening of children above the age of 2 years with a family history of premature cardiovascular disease or those with at least one parent with high total cholesterol is recommended.
6. VLDL, LDL Cholesterol Non HDL Cholesterol, CHOL/HDL RATIO, LDL/HDL RATIO are calculated parameters when Triglycerides are below 400 mg/dL. When Triglycerides are more than 400 mg/dL LDL cholesterol is a direct measurement.

Sushma Shah

Dr Sushma Shah
 MBBS, MD (Pathology)
 Consultant Pathologist

SIN No:SE04640564

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peeth Pune, Diagnostics Lab



Patient Name : Mrs. PRAMODINI SWAIN Age/Gender : 54 Y 9 M 28 DF UHID/MPR No : CVIM.0000236753 Visit ID : CVIMOPV582317 Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 360038	Collected : 24/Feb/2024 10:15AM Received : 24/Feb/2024 01:06PM Reported : 24/Feb/2024 04:59PM Status : Final Report Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
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DEPARTMENT OF BIOCHEMISTRY
ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.43	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.08	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.35	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	22.78	U/L	<35	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	30.3	U/L	<35	IFCC
ALKALINE PHOSPHATASE	72.51	U/L	30-120	IFCC
PROTEIN, TOTAL	8.05	g/dL	6.6-8.3	Biuret
ALBUMIN	4.60	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.45	g/dL	2.0-3.5	Calculated
A/G RATIO	1.33		0.9-2.0	Calculated

Comment:

LFT results reflect different aspects of the health of the liver, i.e., hepatocyte integrity (AST & ALT), synthesis and secretion of bile (Bilirubin, ALP), cholesterol (ALP, GGT), protein synthesis (Albumin)

Common patterns seen:

1. Hepatocellular Injury:

- AST - Elevated levels can be seen. However, it is not specific to liver and can be raised in cardiac and skeletal injuries.
- ALT - Elevated levels indicate hepatocellular damage. It is considered to be most specific lab test for hepatocellular injury. Values also correlate well with increasing BMI → Disproportionate increase in AST, ALT compared with ALP. • Bilirubin may be elevated.
- AST: ALT (ratio) - In case of hepatocellular injury AST: ALT > 1 in Alcoholic Liver Disease AST: ALT usually >2. This ratio is also seen to be increased in NAFLD, Wilson's disease, Cirrhosis, but the increase is usually not >2.

2. Cholestatic Pattern:

- ALP - Disproportionate increase in ALP compared with AST, ALT.
- Bilirubin may be elevated. • ALP elevation also seen in pregnancy, impacted by age and sex.
- To establish the hepatic origin correlation with GGT helps. If GGT elevated indicates hepatic cause of increased ALP.

3. Synthetic function impairment: • Albumin- Liver disease reduces albumin levels. • Correlation with PT (Prothrombin Time) helps.



Dr. Sneha Shah
 MBBCh, MD (Pathology)
 Consultant Pathologist

SIN No:SD04640564

This test has been performed at Apollo Health and Lifestyle (ul- Sadaashiv Peth Pune, Diagnostics Lab



Certificate No: MC-5637

Patient Name	: Mrs. PRAMODINI SWAIN	Collected	: 24/Feb/2024 10:15AM
Age/Gender	: 54 Y 9 M 28 DF	Received	: 24/Feb/2024 01:06PM
UHD/IR No	: CVIM 0000236753	Reported	: 24/Feb/2024 04:59PM
Visit ID	: CVIMOPV582317	Status	: Final Report
Ref Doctor	: Dr SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 360038		

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	0.76	mg/dL	0.55-1.02	Modified Jaffe, Kinetic
UREA	27.51	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	12.9	mg/dL	8.0 - 23.0	Calculated
URIC ACID	7.31	mg/dL	2.6-6.0	Uricase PAP
CALCIUM	9.69	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	3.17	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	141.18	mmol/L	136-146	ISE (Indirect)
POTASSIUM	4.9	mmol/L	3.5-5.1	ISE (Indirect)
CHLORIDE	104.53	mmol/L	101-109	ISE (Indirect)

Sneha Shah
Dr Sneha Shah
 MBBS, MD (Pathology)
 Consultant Pathologist

SIN No:SD04640564

This test has been performed at Apollo Health and Lifestyle hd- Sadashiv Peth Pune, Diagnostics Lab





Certificate No: NC-5697

Patient Name : Mrs. PRAMODINI SWAIN	Collected : 24/Feb/2024 10:15AM
Age/Gender : 54 Y 9 M 28 D/F	Received : 24/Feb/2024 01:06PM
UHIDMR No : CVIM.0000236753	Reported : 24/Feb/2024 04:59PM
Visit ID : CVIMOPV592317	Status : Final Report
Ref Doctor : Dr. SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 360038	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324

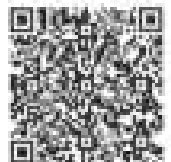
Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	14.56	U/L	<38	IFCC

Sneha Shah

Dr. Sneha Shah
 MBBS, MD (Pathology)
 Consultant Pathologist

SIN No: SH04640564

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab





Certificate No: MC-3487

Patient Name	Mrs. PRAMODINI SWAIN	Collected	: 24/Feb/2024 10:15AM
Age/Gender	: 54 Y 5 M 28 DF	Received	: 24/Feb/2024 01:16PM
UHD/IR No	: CVIM.0000238753	Reported	: 24/Feb/2024 02:38PM
Visit ID	: CVIMOPV52317	Status	: Final Report
Ref Doctor	: Dr. SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 360038		

DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM				
TRI-IODOETHYRONINE (T3, TOTAL)	0.51	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	8.72	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	2.345	µIU/mL	0.34-5.60	CLIA

Comment:

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

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

TSH	T3	T4	FT4	Conditions
High	Low	Low	Low	Primary Hypothyroidism, Post Thyroidectomy, Chronic Autoimmune Thyroiditis
High	N	N	N	Subclinical Hypothyroidism, Autoimmune Thyroiditis, Insufficient Hormone Replacement Therapy.
N/Low	Low	Low	Low	Secondary and Tertiary Hypothyroidism
Low	High	High	High	Primary Hyperthyroidism, Goitre, Thyroiditis, Drug effects, Early Pregnancy
Low	N	N	N	Subclinical Hyperthyroidism
Low	Low	Low	Low	Central Hypothyroidism, Treatment with Hyperthyroidism
Low	N	High	High	Thyroiditis, Interfering Antibodies
N/Low	High	N	N	T3 Thyrotoxicosis, Non thyroidal causes
High	High	High	High	Pituitary Adenoma; TSHoma/Thyrotropinoma



DR. Sanjay Ingle
M.B.B.S.M.D(Pathology)
Consultant Pathologist

SIN No: SPL24032113

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab
Apollo Health and Lifestyle Limited (CA - 08) 10702009111 1070

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Regd. Member, Pradhan, Cooperative Society Limited, Shop No. 11 & 10th Floor, Building 'C', Viman Nagar, Pune, Maharashtra, India - 411014



Patient Name : Mrs.PRAMODINI SWAIN Age/Gender : 54 Y 9 M 28 D/F UHID/MR No : CVIM.0000236753 Visit ID : CVIMOPV982317 Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 360038	Collected : 24/Feb/2024 10:15AM Received : 24/Feb/2024 02:54PM Reported : 24/Feb/2024 03:20PM Status : Final Report Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
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DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - 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	DOUBLE INDICATOR
SP. GRAVITY	1.020		1.002-1.030	Bromothymol Blue
BIOCHEMICAL EXAMINATION				
URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE		NEGATIVE	GLUCOSE OXIDASE
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING REACTION
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	SODIUM NITRO PRUSSIDE
UROBLINOGEN	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	6 - 8	/hpf	0-5	Microscopy
EPITHELIAL CELLS	3 - 4	/hpf	<10	MICROSCOPY
RBC	NL	/hpf	0-2	MICROSCOPY
CASTS	NL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY

*** End Of Report ***

Results to Follow:
LBC PAP TEST (PAPSURE)

Page 12 of 12



DR. Sanjay Ingle
M.B.B.S, M.D (Pathology)
Consultant Pathologist

SIN No:LR1290752

This test has been performed at Apollo Health and Lifestyle 4th-Sadarshiv Peth Pune, Diagnostics Lab
Apollo Health and Lifestyle Limited (CIN - L8110202009PLC115819)

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