





: Mrs.RAMANI G

Age/Gender

: 49 Y 5 M 15 D/F

UHID/MR No Visit ID

: CKOT.0000084891

: CTNAOPV195468

Ref Doctor

: Dr.SELF

Emp/Auth/TPA ID : EMP ID - 157335 Collected Received

: 11/Mar/2024 12:26PM

: 12/Mar/2024 04:35PM

Reported Status

: 12/Mar/2024 04:46PM

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

# DEPARTMENT OF HAEMATOLOGY

----

#### PERIPHERAL SMEAR, WHOLE BLOOD EDTA

**METHODOLOGY** 

: Microscopic

**RBC MORPHOLOGY** 

: Mild anisocytosis, 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.

NOTE/ COMMENT

: Please correlate clinically.

Page 1 of 18

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

SIN No:BED240065315

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

This test has been performed at Apollo Health and Lifestyle Ltd - RRL ASHOK NAGAR

Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)

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









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## **DEPARTMENT OF HAEMATOLOGY**

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

Test Name	Result	Unit	Bio. Ref. Range	Method
HEMOGRAM, WHOLE BLOOD EDTA			*	
HAEMOGLOBIN	11.3	g/dL	12-15	Spectrophotometer
PCV	34.70	%	36-46	Electronic pulse & Calculation
RBC COUNT	3.97	Million/cu.mm	3.8-4.8	Electrical Impedence
MCV	87.4	fL	83-101	Calculated
MCH	28.6	pg	27-32	Calculated
MCHC	32.7	g/dL	31.5-34.5	Calculated
R.D.W	15.8	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	8,300	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (I	DLC)			
NEUTROPHILS	57.6	%	40-80	Electrical Impedance
LYMPHOCYTES	31.9	%	20-40	Electrical Impedance
EOSINOPHILS	3.0	%	1-6	Electrical Impedance
MONOCYTES	6.7	%	2-10	Electrical Impedance
BASOPHILS	0.8	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	4780.8	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2647.7	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	249	Cells/cu.mm	20-500	Calculated
MONOCYTES	556.1	Cells/cu.mm	200-1000	Calculated
BASOPHILS	66.4	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	1.81		0.78- 3.53	Calculated
PLATELET COUNT	386000	cells/cu.mm	150000-410000	Electrical impedence
ERYTHROCYTE SEDIMENTATION RATE (ESR)	59	mm at the end of 1 hour	0-20	Modified Westergrer
PERIPHERAL SMEAR				
METHODOLOGY · M	ieroscopie			·

METHODOLOGY

: Microscopic

Page 2 of 18

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#### **DEPARTMENT OF HAEMATOLOGY**

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

RBC MORPHOLOGY

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## **DEPARTMENT OF HAEMATOLOGY**

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

Test Name	Result	Unit	Bio. Ref. Range	Method
BLOOD GROUP ABO AND RH FAC	TOR , WHOLE BLOOD EDT.	A		
BLOOD GROUP TYPE	0			Forward & Reverse Grouping with Slide/Tube Aggluti
Rh TYPE	POSITIVE			Forward & Reverse Grouping with Slide/Tube Agglutination

PLEASE NOTE THIS SAMPLE HAS BEEN TESTED ONLY FOR ABO MAJOR GROUPING AND ANTI D ONLY

Page 4 of 18

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: EMP ID - 157335

Collected

: 11/Mar/2024 12:26PM

Received

: 13/Mar/2024 07:38PM

Reported Status : 13/Mar/2024 07:50PM : Final Report

Sponsor Name

: 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
GLUCOSE, FASTING , NAF PLASMA	109	mg/dL	70-100	GOD - POD

#### **Comment:**

As per American Diabetes Guidelines, 2023

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

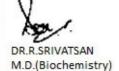
#### Note:

1. The diagnosis of Diabetes requires a fasting plasma glucose of > or = 126 mg/dL and/or a random / 2 hr post glucose value of > or = 200 mg/dL on at least 2 occasions.

 $2. \ Very \ high \ glucose \ levels \ (>450 \ mg/dL \ in \ adults) \ may \ result \ in \ Diabetic \ Ketoacidosis \ \& \ is \ considered \ critical.$ 

Page 5 of 18





SIN No:PLF02122618

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Ref Doctor

Emp/Auth/TPA ID

: Dr.SELF

Collected

: 09/Mar/2024 12:17PM

Received

: 09/Mar/2024 05:43PM

Reported Status : 09/Mar/2024 07:15PM : Final Report

Sponsor Name

: 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
GLUCOSE, POST PRANDIAL (PP), 2 HOURS, SODIUM FLUORIDE PLASMA (2 HR)	112	mg/dL	70-140	HEXOKINASE

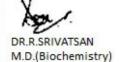
#### **Comment:**

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.

Page 6 of 18





SIN No:PLP1429087

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Collected : 11/Mar/2024 12:26PM

Received : 12/Mar/2024 04:47PM

Reported : 12/Mar/2024 04:56PM Status : Final Report

Sponsor Name : 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
HBA1C (GLYCATED HEMOGLOBIN), W	HOLE BLOOD EDTA			
HBA1C, GLYCATED HEMOGLOBIN	6.7	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	146	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.

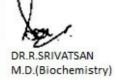
- 1. HbA1C is recommended by American Diabetes Association for Diagnosing Diabetes and monitoring Glycemic Control by American Diabetes Association guidelines 2023.
- 2. Trends in HbA1C values is a better indicator of Glycemic control than a single test.
- 3. Low HbA1C in Non-Diabetic patients are associated 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 >25%

- B: Homozygous Hemoglobinopathy.
- (Hb Electrophoresis is recommended method for detection of Hemoglobinopathy)

Page 7 of 18





SIN No:EDT240029799

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: 11/Mar/2024 12:26PM

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: 13/Mar/2024 07:38PM : 13/Mar/2024 08:00PM

Reported Status

: Final Report

Sponsor Name

: 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
LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	201	mg/dL	<200	CHE/CHO/POD
TRIGLYCERIDES	141	mg/dL	<150	Enzymatic
HDL CHOLESTEROL	41	mg/dL	>40	CHE/CHO/POD
NON-HDL CHOLESTEROL	160	mg/dL	<130	Calculated
LDL CHOLESTEROL	131.8	mg/dL	<100	Calculated
VLDL CHOLESTEROL	28.2	mg/dL	<30	Calculated
CHOL / HDL RATIO	4.90		0-4.97	Calculated
ATHEROGENIC INDEX (AIP)	0.18		<0.11	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
ATHEROGENIC INDEX OF PLASMA (AIP)	<0.11	0.12 - 0.20	>0.21	

# Note:

- 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

Page 8 of 18



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

SIN No:SE04658027

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#### DEPARTMENT OF BIOCHEMISTRY

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

eligibility of drug therapy.

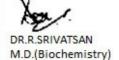
- 4) Low HDL levels are associated with coronary heart disease due to insufficient HDL being available to participate in reverse cholesterol transport, the process by which cholesterol is eliminated from peripheral tissues.
- 5) As per NCEP guidelines, all adults above the age of 20 years should be screened 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.

7) Triglycerides and HDL-cholesterol in Atherogenic index (AIP) reflect the balance between the atherogenic and protective lipoproteins. Clinical studies have shown that AIP (log (TG/HDL) & values used are in mmol/L) predicts cardiovascular risk and a useful measure of response to treatment (pharmacological intervention).

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#### **DEPARTMENT OF BIOCHEMISTRY**

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

Test Name	Result	Unit	Bio. Ref. Range	Method
IVER FUNCTION TEST (LFT), SERUM				
BILIRUBIN, TOTAL	0.66	mg/dL	0.20-1.20	Colorimetric
BILIRUBIN CONJUGATED (DIRECT)	0.10	mg/dL	0.0-0.3	Calculated
BILIRUBIN (INDIRECT)	0.56	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	16	U/L	9-52	UV with P-5-P
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	19.0	U/L	14-36	UV with P-5-P
ALKALINE PHOSPHATASE	88.00	U/L	38-126	p-nitrophenyl phosphate
PROTEIN, TOTAL	7.10	g/dL	6.3-8.2	Biuret
ALBUMIN	3.50	g/dL	3.5 - 5	Bromocresol Green
GLOBULIN	3.60	g/dL	2.0-3.5	Calculated
A/G RATIO	0.97		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), cholestasis (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 > 1In Alcoholic Liver Disease AST: ALT usually >2. This ratio is also seen to be increased in NAFLD, Wilsons's diseases, 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.

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Test Name	Result	Unit	Bio. Ref. Range	Method
RENAL PROFILE/KIDNEY FUNCTION	TEST (RFT/KFT), SEF	RUM		
CREATININE	0.58	mg/dL	0.5-1.04	Creatinine amidohydrolase
UREA	25.00	mg/dL	15-36	Urease
BLOOD UREA NITROGEN	11.7	mg/dL	8.0 - 23.0	Calculated
URIC ACID	6.70	mg/dL	2.5-6.2	Uricase
CALCIUM	8.70	mg/dL	8.4 - 10.2	Arsenazo-III
PHOSPHORUS, INORGANIC	3.60	mg/dL	2.5-4.5	PMA Phenol
SODIUM	142	mmol/L	135-145	Direct ISE
POTASSIUM	4.3	mmol/L	3.5-5.1	Direct ISE
CHLORIDE	107	mmol/L	98 - 107	Direct ISE
PROTEIN, TOTAL	7.10	g/dL	6.3-8.2	Biuret
ALBUMIN	3.50	g/dL	3.5 - 5	Bromocresol Green
GLOBULIN	3.60	g/dL	2.0-3.5	Calculated
A/G RATIO	0.97		0.9-2.0	Calculated

Page 11 of 18



M.D.(Biochemistry) SIN No:SE04658027

DR.R.SRIVATSAN

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

This test has been performed at Apollo Health and Lifestyle Ltd - RRL ASHOK NAGAR

Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)

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 10







: Mrs.RAMANI G

Age/Gender

: 49 Y 5 M 15 D/F

UHID/MR No

: CKOT.0000084891

Visit ID

: CTNAOPV195468

Ref Doctor

Emp/Auth/TPA ID

: Dr.SELF

: EMP ID - 157335

Collected

: 11/Mar/2024 12:26PM

Received

: 13/Mar/2024 07:38PM

Reported Status : 13/Mar/2024 07:45PM : Final Report

Sponsor Name

: 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
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	13.00	U/L	12-43	Glyclyclycine Nitoranalide

Page 12 of 18



M.D.(Biochemistry) SIN No:SE04658027

DR.R.SRIVATSAN

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









Patient Name : Mrs.RAMANI G

Age/Gender : 49 Y 5 M 15 D/F UHID/MR No : CKOT.0000084891

Visit ID : CTNAOPV195468

Ref Doctor : Dr.SELF

Emp/Auth/TPA ID : EMP ID - 157335

Collected : 11/Mar/2024 12:26PM

Received : 13/Mar/2024 07:39PM Reported : 13/Mar/2024 08:00PM

Status : Final Report

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

#### **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, T4, TSH)	, SERUM	'		<u>'</u>
TRI-IODOTHYRONINE (T3, TOTAL)	0.79	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	14.24	μg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	2.776	μIU/mL	0.34-5.60	CLIA

#### **Comment:**

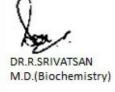
For pregnant females	Bio Ref Range for TSH in uIU/ml (As per American Thyroid Association)		
First trimester	0.1 - 2.5		
Second trimester	0.2 - 3.0		
Third trimester	0.3 - 3.0		

- 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	Т3	T4	FT4	Conditions	
High	Low	Low	Low	Primary Hypothyroidism, Post Thyroidectomy, Chronic Autoimmune Thyroiditis	
High	N	N	N	oclinical Hypothyroidism, Autoimmune Thyroiditis, Insufficient Hormone Replacement erapy.	
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	

Page 13 of 18





SIN No:SPL24043513

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

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Address:
D No.30, F – Block 2nd Avenue, Anna Nagar East, Chennai.600 102,
Phone . 044.26224504 / 05









: Mrs.RAMANI G

Age/Gender

: 49 Y 5 M 15 D/F

UHID/MR No Visit ID : CKOT.0000084891

Ref Doctor

: CTNAOPV195468

Ref Doctor
Emp/Auth/TPA ID

: Dr.SELF : EMP ID - 157335 Collected

: 11/Mar/2024 12:26PM

Received

: 13/Mar/2024 07:39PM : 13/Mar/2024 08:00PM

Reported Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

#### **DEPARTMENT OF IMMUNOLOGY**

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

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

SIN No:SPL24043513

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

This test has been performed at Apollo Health and Lifestyle Ltd - RRL ASHOK NAGAR

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Page 14 of 18









: Mrs.RAMANI G

Age/Gender

: 49 Y 5 M 15 D/F

UHID/MR No

: CKOT.0000084891

Visit ID

: CTNAOPV195468

Ref Doctor

: Dr.SELF

Emp/Auth/TPA ID

: EMP ID - 157335

Collected

: 11/Mar/2024 12:26PM

Received

: 12/Mar/2024 04:36PM : 12/Mar/2024 04:44PM

Reported Status

: 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	CLEAR		CLEAR	Visual
pH	5.5		5-7.5	Bromothymol Blue
SP. GRAVITY	1.015		1.002-1.030	Dipstick
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		NEGATIVE	NITROPRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	EHRLICH
BLOOD	NEGATIVE		NEGATIVE	Dipstick
NITRITE	NEGATIVE		NEGATIVE	Dipstick
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	PYRROLE HYDROLYSIS
CENTRIFUGED SEDIMENT WET M	OUNT AND MICROSCOP	Y		
PUS CELLS	2-4	/hpf	0-5	Microscopy
EPITHELIAL CELLS	2-4	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	ABSENT		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY

Page 15 of 18

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

SIN No:UR2302968

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

This test has been performed at Apollo Health and Lifestyle Ltd - RRL ASHOK NAGAR

Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)

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







: Mrs.RAMANI G

Age/Gender

: 49 Y 5 M 13 D/F

UHID/MR No Visit ID

: CKOT.0000084891

: CTNAOPV195468

Ref Doctor Emp/Auth/TPA ID : Dr.SELF : EMP ID - 157335 Collected

: 09/Mar/2024 12:17PM

Received

: 09/Mar/2024 04:46PM

Reported

: 09/Mar/2024 08:01PM

Status

: 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
URINE GLUCOSE(POST PRANDIAL)	NEGATIVE		NEGATIVE	Dipstick

Page 16 of 18

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

SIN No:UPP017012

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

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: Mrs.RAMANI G

Age/Gender

: 49 Y 5 M 15 D/F

UHID/MR No Visit ID

: CKOT.0000084891

: CTNAOPV195468

: EMP ID - 157335

Ref Doctor

Emp/Auth/TPA ID

: Dr.SELF

Collected

: 11/Mar/2024 12:26PM

Received

: 12/Mar/2024 04:47PM

Reported Status

: 12/Mar/2024 04:54PM : 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
URINE GLUCOSE(FASTING)	NEGATIVE		NEGATIVE	Dipstick

Page 17 of 18

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

SIN No:UF011154

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

This test has been performed at Apollo Health and Lifestyle Ltd - RRL ASHOK NAGAR

Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)

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: Mrs.RAMANI G

Age/Gender

: 49 Y 5 M 13 D/F : CKOT.0000084891

UHID/MR No Visit ID

Ref Doctor

: CTNAOPV195468

Emp/Auth/TPA ID

: Dr.SELF : EMP ID - 157335 Collected

: 09/Mar/2024 02:21PM

Received

: 10/Mar/2024 10:30AM : 14/Mar/2024 10:11AM

Reported Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

# **DEPARTMENT OF CYTOLOGY**

ABV/ 44141141 BILLA ALIEAL/ 4BV/441AEB

C PA	AP TEST (PAPSURE) , CERVICAL SAMPLE		
	<b>CYTOLOGY NO.</b> 5469/24		
I	SPECIMEN		
a	SPECIMEN ADEQUACY	ADEQUATE	
b	SPECIMEN TYPE	LIQUID-BASED PREPARATION (LBC)	
	SPECIMEN NATURE/SOURCE	CERVICAL SMEAR	
c	ENDOCERVICAL-TRANSFORMATION ZONE	ABSENT	
d	COMMENTS	SATISFACTORY FOR EVALUATION	
II	MICROSCOPY	Superficial and intermediate squamous epithelial cells with benigr 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 \*\*\*



COLLEGE of AMERICAN PATHOLOGISTS



SIN No:CS076119

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

This test has been performed at Apollo Health and Lifestyle Ltd - RRL ASHOK NAGAR

Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)

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**UHID/MR No.** : CKOT.0000084891 **OP Visit No** : CTNAOPV195468

Sample Collected on : Reported on : 20-03-2024 11:28

LRN# : RAD2262384 Specimen :
Ref Doctor : SELF

Emp/Auth/TPA ID : EMP ID - 157335

# DEPARTMENT OF RADIOLOGY

# SONO MAMOGRAPHY - SCREENING

#### NOT INTERESTED

Dr. KAVITHA S

Dr. KAVITHA S

MBBS,DNB(Radio diagnosis)

Radiology



: 49 Y/F Age/Gender **Patient Name** : Mrs. RAMANI G

UHID/MR No.

: CKOT.0000084891

**OP Visit No** 

**Specimen** 

: CTNAOPV195468

Sample Collected on :

: RAD2262384

Reported on : 11-03-2024 08:44

LRN#

: SELF

**Ref Doctor** Emp/Auth/TPA ID

: EMP ID - 157335

## DEPARTMENT OF RADIOLOGY

#### **ULTRASOUND - WHOLE ABDOMEN**

# Liver shows increase in echogenicity suggestive of fatty changes.

Intra and extra hepatic biliary passages are not dilated.

Gall bladder appears normal with no evidence of calculus.

Wall thickness appear normal.

Pancreas and spleen appear normal. Spleen measures 8.7 cms.

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.

Aorta and IVC appear normal.

Right kidney measures 11.3 cms.

Left kidney measures 9.7 cms.

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

Uterus is anteverted and measures 7.6 x 5.2 x 3.9 cms.

It shows normal endometrial and myometrial echoes.

Endometrium thickness measures 7 mm.

Cervix and vagina appears normal.

Right ovary measures 2.4 x 1.1 cms.

Left ovary measures 2.5 x 1.4 cms.

Both ovaries are normal in size and echotexture.



Both the parametria are free. No mass lesion seen in the pelvis. Bladder is normal in contour.Both iliac fossae appear normal.

**IMPRESSION:** 

Fatty Liver (Grade I).

Dara

Dr. RASHEED ARAFATH HIDAYATHULLAH  $\frac{\text{MBBS, DNB (RD)}}{\text{Radiology}}$ 



Age/Gender : 49 Y/F **Patient Name** : Mrs. RAMANI G

UHID/MR No. : CKOT.0000084891

Sample Collected on

LRN#

: RAD2262384

**Ref Doctor** : SELF

Emp/Auth/TPA ID : EMP ID - 157335

**OP Visit No** : CTNAOPV195468

: 09-03-2024 17:48 Reported on Specimen

#### DEPARTMENT OF RADIOLOGY

#### X-RAY CHEST PA

Both lung fields and hila are normal.

Both costophrenic and cardiophrenic angles are clear.

Both diaphragms are normal in position and contour.

Thoracic wall and soft tissues appear normal.

# **CONCLUSION:**

Normal study.

Dr. RASHEED ARAFATH HIDAYATHULLAH MBBS, DNB (RD) Radiology Name: Mrs. RAMANI G
Age/Gender: 49 Y/F
Address: CHENNAI
Location:

CHENNAI, TAMIL NADU

Doctor:

Department: GENERAL Rate Plan: T NAGAR\_0

T NAGAR\_06042023

ARCOFEMI HEALTHCARE LIMITED Sponsor:

Consulting Doctor: Dr. HARI K

# HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

SYSTEMIC REVIEW

**HT-HISTORY** 

PHYSICAL EXAMINATION

SYSTEMIC EXAMINATION

**IMPRESSION** 

RECOMMENDATION

**Doctor's Signature** 

MR No: CKOT.0000084891 CTNAOPV195468 Visit ID: Visit Date: 09-03-2024 12:15

Discharge Date:

Name: Mrs. RAMANI G
Age/Gender: 49 Y/F
Address: CHENNAI
Location:

CHENNAI, TAMIL NADU

Doctor:

Department: GENERAL
Rate Plan: T NAGAR\_06042023

ARCOFEMI HEALTHCARE LIMITED Sponsor:

Consulting Doctor: Dr. REKHA SANJAY

# HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

SYSTEMIC REVIEW

**HT-HISTORY** 

PHYSICAL EXAMINATION

SYSTEMIC EXAMINATION

**IMPRESSION** 

RECOMMENDATION

**Doctor's Signature** 

MR No: CKOT.0000084891 CTNAOPV195468 Visit ID: Visit Date: 09-03-2024 12:15

SELF

Discharge Date:

Referred By:

Name: Mrs. RAMANI G

Age/Gender: 49 Y/F Address: CHENNAI

Location: CHENNAI, TAMIL NADU

Doctor:

Department: GENERAL

Rate Plan: T NAGAR\_06042023

Sponsor: ARCOFEMI HEALTHCARE LIMITED Consulting Doctor: Dr. T DEVI SHANMUGA PRIYA

**Doctor's Signature** 

MR No: CKOT.0000084891
Visit ID: CTNAOPV195468
Visit Date: 09-03-2024 12:15

Discharge Date:

Name: Mrs. RAMANI G
Age/Gender: 49 Y/F
Address: CHENNAI
Location:

CHENNAI, TAMIL NADU

Doctor:

Department: GENERAL Rate Plan: T NAGAR\_0

T NAGAR\_06042023

ARCOFEMI HEALTHCARE LIMITED Sponsor:

Consulting Doctor: Dr. USHA V

# HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

SYSTEMIC REVIEW

**HT-HISTORY** 

PHYSICAL EXAMINATION

SYSTEMIC EXAMINATION

**IMPRESSION** 

RECOMMENDATION

**Doctor's Signature** 

MR No: CKOT.0000084891 CTNAOPV195468 Visit ID: Visit Date: 09-03-2024 12:15

Discharge Date:

Referred By:

SELF

Name: Mrs. RAMANI G
Age/Gender: 49 Y/F
Address: CHENNAI
Location:

CHENNAI, TAMIL NADU

Doctor:

Department: GENERAL Rate Plan: T NAGAR\_0

T NAGAR\_06042023

ARCOFEMI HEALTHCARE LIMITED Sponsor:

Consulting Doctor: Dr. HARI K

# HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

SYSTEMIC REVIEW

**HT-HISTORY** 

PHYSICAL EXAMINATION

SYSTEMIC EXAMINATION

**IMPRESSION** 

RECOMMENDATION

**Doctor's Signature** 

MR No: CKOT.0000084891 CTNAOPV195468 Visit ID: Visit Date: 09-03-2024 12:15

Discharge Date:





# Health Check up Booking Request(bobE12522), Beneficiary Code-156649

1 message

Mediwheel <wellness@mediwheel.in>

To: ramgfive@gmail.com

Cc: customercare@mediwheel.in

Fri, Mar 1, 2024 at 4:15



011-41195959

Dear MS. G RAMANI,

We have received your booking request for the following health checkup, please upload your approval letter as soon as possible to enable us to confirm your booking.

User Package Name Mediwheel Full Body Health Checkup Female Above 40

Diagnostic/Hospital: Apollo Clinic - T Nagar

Address of

Apollo Clinic, Door No 11, 4, Sivaprakasam St, opposite to Brilliant Tutorial,

Diagnostic/Hospital- Pondy Bazaar, Parthasarathi Puram, T Nagar - 600017

Appointment Date : 09-03-2024

**Preferred Time** 

: 9:00am

Member Information					
Booked Member Name	Age	Gender			
MS. G RAMANI	49 year	Female			

# Tests included in this Package

- Mammography
- Stool Test
- **Gynae Consultation**
- Thyroid Profile
- **ESR**
- Blood Glucose (Fasting)
- General Physician Consultation
- TMT OR 2D ECHO
- Blood Group
- · Blood Glucose (Post Prandial)
- Chest X-ray
- **ECG**
- USG Whole Abdomen
- Eye Check-up consultation
- Urine Sugar Fasting
- Urine Sugar PP
- · Dental Consultation

UHID : CKOT.0000084891 OP Visit No : CTNAOPV195468 Conducted By: : Dr. KIRUBAKARAN . Conducted Date : 09-03-2024 13:18

Referred By : SELF

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

Dimensions:

Ao (ed) 3.0 CM LA (es) 3.2 CM LVID (ed) 4.0 CM LVID (es) 2.5 CM 1.0 CM IVS (Ed) LVPW (Ed) 1.0 CM EF 67.00% %FD 36.00%

MITRAL VALVE: NORMAL

AML NORMAL PML 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

UHID : CKOT.0000084891 OP Visit No : CTNAOPV195468 Conducted By: : Dr. KIRUBAKARAN . Conducted Date : 09-03-2024 13:18

Referred By : SELF

## **DOPPLER STUDIES**

PWD: A>E AT MITRAL INFLOW

E/A-E: 0.8m/sec A: 0.8m/sec

VELOCITY ACROSS THE PULMONIC VALVE UPTO 1.2m/sec

VELOCITY ACROSS THE AV UPTO 1.0m/sec

#### **IMPRESSION:**

NO REGIONAL WALL MOTION ABNORMALITIES

NORMAL LEFT VENTRICULAR SYSTOLIC FUNCTION

NORMAL LEFT VENTRICULAR IN SIZE

NO: PE/PAH

DONE BY

UHID : CKOT.0000084891 OP Visit No : CTNAOPV195468 Conducted By: : Dr. KIRUBAKARAN . Conducted Date : 09-03-2024 13:18

Referred By : SELF

NIRMALA



Dr.KIRUBAKARAN.

UHID : CKOT.0000084891 OP Visit No : CTNAOPV195468 Conducted By: : Dr. KIRUBAKARAN . Conducted Date : 09-03-2024 13:18

UHID : CKOT.0000084891 OP Visit No : CTNAOPV195468 Conducted By: : Dr. KIRUBAKARAN . Conducted Date : 09-03-2024 13:18

UHID : CKOT.0000084891 OP Visit No : CTNAOPV195468 Conducted By: : Dr. KIRUBAKARAN . Conducted Date : 09-03-2024 13:18

UHID : CKOT.0000084891 OP Visit No : CTNAOPV195468 Conducted By: : Dr. KIRUBAKARAN . Conducted Date : 09-03-2024 13:18

UHID : CKOT.0000084891 OP Visit No : CTNAOPV195468
Reported By: : Dr. HARI K Conducted Date : 09-03-2024 17:29

Referred By : SELF

Impression:

NORMAL ECG.

# **ECG REPORT**

NORMAL SINUS RHYTHM

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

Dr. HARI K