

Patient Name : Mrs.SIVARANJANI S	Collected : 29/Mar/2024 09:07AM
Age/Gender : 43 Y 4 M 8 D/F	Received : 29/Mar/2024 04:29PM
UHID/MR No : CTNA.0000206688	Reported : 29/Mar/2024 08:20PM
Visit ID : CTNAOPV197294	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : EMP ID 88320	

DEPARTMENT OF HAEMATOLOGY

PERIPHERAL SMEAR , WHOLE BLOOD EDTA

METHODOLOGY	: Microscopic
RBC MORPHOLOGY	: Microcytic hypochromic RBC's admixed with 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.



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

SIN No:BED240086845

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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APOLLO CLINICS NETWORK

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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	12.9	g/dL	12-15	Spectrophotometer
PCV	39.30	%	36-46	Electronic pulse & Calculation
RBC COUNT	5.02	Million/cu.mm	3.8-4.8	Electrical Impedance
MCV	78.3	fL	83-101	Calculated
MCH	25.8	pg	27-32	Calculated
MCHC	32.9	g/dL	31.5-34.5	Calculated
R.D.W	14.1	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	11,800	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	69.6	%	40-80	Electrical Impedance
LYMPHOCYTES	19.2	%	20-40	Electrical Impedance
EOSINOPHILS	4.7	%	1-6	Electrical Impedance
MONOCYTES	5.6	%	2-10	Electrical Impedance
BASOPHILS	0.9	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	8212.8	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2265.6	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	554.6	Cells/cu.mm	20-500	Calculated
MONOCYTES	660.8	Cells/cu.mm	200-1000	Calculated
BASOPHILS	106.2	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	3.63		0.78- 3.53	Calculated
PLATELET COUNT	339000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	21	mm/hour	0-20	Capillary photometry
PERIPHERAL SMEAR				
METHODOLOGY : Microscopic				



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Test Name	Result	Unit	Bio. Ref. Range	Method
BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA				
BLOOD GROUP TYPE	AB			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

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	131	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	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.



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



SIN No:PLF02136554

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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)	165	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.



DR. R. SRIVATSAN
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SIN No:PLP1439757

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Test Name	Result	Unit	Bio. Ref. Range	Method
HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA				
HBA1C, GLYCATED HEMOGLOBIN	7.2	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	160	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.

- HbA1C is recommended by American Diabetes Association for Diagnosing Diabetes and monitoring Glycemic Control by American Diabetes Association guidelines 2023.
- Trends in HbA1C values is a better indicator of Glycemic control than a single test.
- 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.
- 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.
- 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)



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SIN No:EDT240040229

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Test Name	Result	Unit	Bio. Ref. Range	Method
LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	181	mg/dL	<200	CHO-POD
TRIGLYCERIDES	94	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	50	mg/dL	40-60	Enzymatic Immuno-inhibition
NON-HDL CHOLESTEROL	131	mg/dL	<130	Calculated
LDL CHOLESTEROL	112.2	mg/dL	<100	Calculated
VLDL CHOLESTEROL	18.8	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.62		0-4.97	Calculated
ATHEROGENIC INDEX (AIP)	< 0.01		<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(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.

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SIN No:SE04680234

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- 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.
- 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).



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



SIN No:SE04680234

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Patient Name : Mrs.SIVARANJANI S	Collected : 29/Mar/2024 09:07AM
Age/Gender : 43 Y 4 M 8 D/F	Received : 29/Mar/2024 04:29PM
UHID/MR No : CTNA.0000206688	Reported : 29/Mar/2024 06:12PM
Visit ID : CTNAOPV197294	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : EMP ID 88320	

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
LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.66	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.13	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.53	mg/dL	0.0-1.1	CALCULATED
ALANINE AMINOTRANSFERASE (ALT/SGPT)	21	U/L	<35	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	17.0	U/L	<35	IFCC
ALKALINE PHOSPHATASE	73.00	U/L	30-120	IFCC
PROTEIN, TOTAL	7.30	g/dL	6.6-8.3	Biuret
ALBUMIN	3.90	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.40	g/dL	2.0-3.5	Calculated
A/G RATIO	1.15		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 > 1 In Alcoholic Liver Disease AST: ALT usually >2. This ratio is also seen to be increased in NAFLD, Wilson's'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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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
RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	0.38	mg/dL	0.72 – 1.18	JAFFE METHOD
UREA	19.00	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	8.9	mg/dL	8.0 - 23.0	Calculated
URIC ACID	3.30	mg/dL	2.6-6.0	Uricase PAP
CALCIUM	8.90	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	3.80	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	140	mmol/L	136–146	ISE (Indirect)
POTASSIUM	3.9	mmol/L	3.5–5.1	ISE (Indirect)
CHLORIDE	106	mmol/L	101–109	ISE (Indirect)
PROTEIN, TOTAL	7.30	g/dL	6.6-8.3	Biuret
ALBUMIN	3.90	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.40	g/dL	2.0-3.5	Calculated
A/G RATIO	1.15		0.9-2.0	Calculated



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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
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	17.00	U/L	<38	IFCC



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Patient Name : Mrs.SIVARANJANI S	Collected : 29/Mar/2024 09:07AM
Age/Gender : 43 Y 4 M 8 D/F	Received : 29/Mar/2024 04:54PM
UHID/MR No : CTNA.0000206688	Reported : 29/Mar/2024 05:38PM
Visit ID : CTNAOPV197294	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : EMP ID 88320	

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				
TRI-iodothyronine (T3, TOTAL)	0.84	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	9.09	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	1.713	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	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. R. SRIVATSAN
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SIN No: SPL24058768

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Patient Name : Mrs.SIVARANJANI S	Collected : 29/Mar/2024 09:07AM
Age/Gender : 43 Y 4 M 8 D/F	Received : 29/Mar/2024 04:54PM
UHID/MR No : CTNA.0000206688	Reported : 29/Mar/2024 05:38PM
Visit ID : CTNAOPV197294	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : EMP ID 88320	

DEPARTMENT OF IMMUNOLOGY

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



DR.R.SRIVATSAN
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Patient Name : Mrs.SIVARANJANI S	Collected : 29/Mar/2024 09:07AM
Age/Gender : 43 Y 4 M 8 D/F	Received : 29/Mar/2024 05:44PM
UHID/MR No : CTNA.0000206688	Reported : 29/Mar/2024 06:09PM
Visit ID : CTNAOPV197294	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : EMP ID 88320	

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	DOUBLE INDICATOR
SP. GRAVITY	1.025		1.002-1.030	Bromothymol Blue
BIOCHEMICAL EXAMINATION				
URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	POSITIVE ++++		NEGATIVE	GLUCOSE OXIDASE
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING REACTION
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	SODIUM NITRO PRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	MODIFIED EHRlich REACTION
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	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 16



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

SIN No:UR2319712

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Patient Name : Mrs.SIVARANJANI S	Collected : 29/Mar/2024 09:07AM
Age/Gender : 43 Y 4 M 8 D/F	Received : 29/Mar/2024 05:46PM
UHID/MR No : CTNA.0000206688	Reported : 29/Mar/2024 06:07PM
Visit ID : CTNAOPV197294	Status : Final Report
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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)	POSITIVE (++++)		NEGATIVE	Dipstick

Test Name	Result	Unit	Bio. Ref. Range	Method
URINE GLUCOSE(FASTING)	POSITIVE (++++)		NEGATIVE	Dipstick

*** End Of Report ***



Dr THILAGA
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Consultant Pathologist

SIN No:UF011525

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Name <i>SIVARAMAN TAWI S</i>	Date <i>29/03/24</i>
Age <i>43</i>	UHID No. <i>206688</i>
Sex: <input type="checkbox"/> Male <input checked="" type="checkbox"/> Female	

OPHTHAL FITNESS CERTIFICATE

	RE	LE
DV-UCVA :	<i>16/6p</i>	<i>16/6p</i>
DV-BCVA :		
NEAR VISION :	<i>+ 1.25 N⁶</i>	<i>+ 1.05 N⁴</i>
ANTERIOR SEGMENT :		
IOP :		
FIELDS OF VISION :		
E O M :		
COLOUR VISION :	<i>Normal</i>	<i>normal</i>
FUNDUS :		
IMPRESSION :		
ADVICE :	<i>Binocular 1-1000</i>	

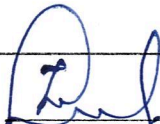
CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

of Mrs. Sivalakshmi S, A34/A on 01/04/2024

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 	
<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>T, DM</u></p> <p>2. _____</p> <p>3. _____</p> <p>4. _____</p> <p>However the employee should follow the advice/medication that has been Communicated to him/her.</p> <p>Review after _____</p>	✓
<ul style="list-style-type: none"> • Currently Unfit. <p>Review after _____</p> <p>_____recommended</p>	
<ul style="list-style-type: none"> • Unfit 	


Dr. [Name]
Medical Officer
The Apollo Clinic, (Location)
Apollo Family Physician
Reg. No. 151903

This certificate is not meant for medico-legal purposes

Physical Examination

Name Mr / Mrs / Miss		Mrs. Sivaramani. S	
Age / Gender		43 yrs	Male / Female
DATE OF CHECK UP			
HEIGHT	155	Cms	
WEIGHT	84.1	Kgs	
BLOOD PRESSURE (if above 140/90 need 3 readings)	1) 130/80	Mm/Hg	
	2)		
	3)		
BP	35.01		
WAST	96		
HF	120		
WAST HF RATIO	0.8	Min	
RESPIRATORY RATE	18	Min	
PULSE	76		
CHEST	INSPIRATION	Ins:	Cms
	EXPIRATION	Exp:	Cms

OPHTHAL EXAMINATION

COLOUR VISION

VISION	FAR VISION RIGHT	FAR VISION LEFT	NEAR VISION RIGHT	NEAR VISION LEFT	COLOUR VISION		
					RIGHT	LEFT	
WITHOUT GLASS							
WITH GLASS							
REMARKS IF ANY							

APOLLO MEDICAL CENTRE
11/4, S. S. Nagar Street, Chokkikulam, Chennai - 600 017
Phone: 044 - 2434 1366 / 95001 85005

Apollo Health and Lifestyle Limited

(CIN - U85110TG2000PLC046089) Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016 | Email ID: enquiry@apolloh.com

APOLLO CLINICS NETWORK TAMILNADU

Chennai | Annanagar | Kotturpuram | Mogappair | T Nagar | Valasaravakkam | Velachery

TO BOOK AN APPOINTMENT

1860 500 7788

MS. Sivareyani 4317

29.3.24.

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

General Examination / Allergies
History

Go Cold, Sore throat
 running nose,
 facial heaviness
 - 3 days.
 no H/O Rec. Cold + cough.

E: Saus: Rlc Tm intact
nose: DTH ⊕ Rlc.

Thr: pms^c
 pharyngitis.

Saus tenderness ⊕

1 - URI. c Sinusitis

APOLLO MEDICAL CENTRE
 11/4 ... Street, Pondy ...
 ger, Chennai - 600 017
 Phone: 044 - 2434 1066 / 999 1066

Follow up date:

Doctor Signature & Stamp

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

APOLLO CLINIC

CONSENT FORM

Patient Name Mr. Sivaranjan S Age 43
UHID Number..... 26666 company Name..... Arcolean

I Mr / Mrs / Ms..... Sivaranjan S Employee of..... Arcolean
(Company) Want to inform you that I am not interested in getting..... Some mammogram

Tests done which is apart of my routine health check package.

And I claim the above statement in my full consciousness.

Patient Signature..... S. Sivaranjan S Date..... 21/03/24

APOLLO MEDICAL CENTRE
11/4, Sivaprakasam Street, Rajiv Gandhi Bazaar
T. Nagar, Chennai - 600 016
Phone: 044 - 2434 1006 / 93891 60365

Apollo Health and Lifestyle Limited

(CIN - U85110TG2000PLC046089) Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016 | Email ID: enquiry@apollohlt.com

APOLLO CLINICS NETWORK TAMILNADU

Chennai (Annanagar | Kotturpuram | Mogappair | T Nagar | Valasaravakkam | Velachery)

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

 **1860 500 7788**

Patient Name : Mrs. SIVARANJANI S

Age/Gender : 43 Y/F

UHID/MR No. : CTNA.0000206688

OP Visit No : CTNAOPV197294

Sample Collected on :

Reported on : 30-03-2024 17:46

LRN# : RAD2285943

Specimen :

Ref Doctor : SELF

Emp/Auth/TPA ID : EMP ID 88320

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

Patient Name : Mrs. SIVARANJANI S

Age/Gender : 43 Y/F

UHID/MR No. : CTNA.0000206688

OP Visit No : CTNAOPV197294

Sample Collected on :

Reported on : 30-03-2024 15:48

LRN# : RAD2285943

Specimen :

Ref Doctor : SELF

Emp/Auth/TPA ID : EMP ID 88320

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 9.1 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 10.6 x 4.3 cms.

Left kidney measures 9.5 x 4.7 cms.

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

Uterus is anteverted and measures 6.1 x 2.7 cms.

It shows normal endometrial and myometrial echoes.

Endometrium thickness measures 2 mm.

Cervix and vagina appears normal.

Right ovary measures 1.7 x 1.5 cms.

Left ovary measures 1.7 x 1.5 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).

Patient Name : Mrs. SIVARANJANI S

Age/Gender : 43 Y/F



Dr. A R RAGHUL
MBBS MD Radiodiagnosis
Radiology

Name: Mrs. SIVARANJANI S
Age/Gender: 43 Y/F
Address: CHENNAI
Location: CHENNAI, TAMIL NADU
Doctor:
Department: GENERAL
Rate Plan: T NAGAR_06042023
Sponsor: ARCOFEMI HEALTHCARE LIMITED
Consulting Doctor: Dr. ARUNA BABBURI

MR No: CTNA.0000206688
Visit ID: CTNAOPV197294
Visit Date: 29-03-2024 08:50
Discharge Date:
Referred By: SELF

HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

SYSTEMIC REVIEW

HT-HISTORY

PHYSICAL EXAMINATION

SYSTEMIC EXAMINATION

IMPRESSION

RECOMMENDATION

Doctor's Signature

Established Patient: No

Vitals

Date	Pulse (Beats/min)	B.P (mmHg)	Resp (Rate/min)	Temp (F)	Height (cms)	Weight (Kgs)	Body Fat Percentage (%)	Visceral Fat Level (%)	Body Age (Years)	BMI	Waist Circum (cms)	Hip (cms)	Waist (cms)	Waist & Hip Ratio	User
29-03-2024 16:30	76 Beats/min	130/80 mmHg	Rate/min	F	155 cms	84.1 Kgs	%	%	Years	35.01	cms	cms	cms		AHLL09366

206688
43 Years

SIVARAMJANI, S
Female

29/03/2024 09:17:55 AM

APOLLO CLINIC T NAGAR

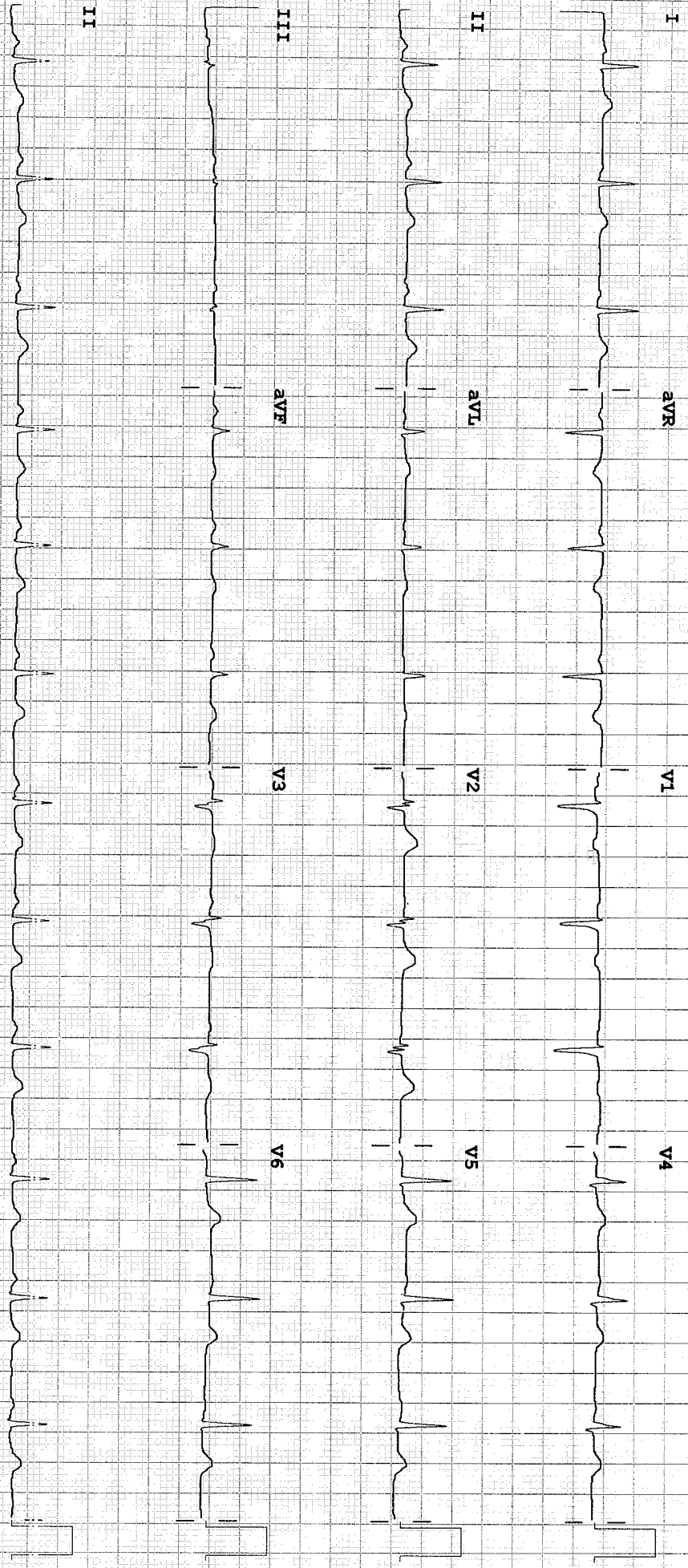
Rate 74
PR 139
QRS 31
T 32
QTc 413
QT 372
UKSU 86
QTC 413
--AXIS--
P 55
QRS 31
T 32

Sinus rhythm.....normal P axis, V-rate 50- 99
Low voltage, precordial leads.....precordial leads <1.0mV
Baseline wander in lead(s) V1

- OTHERWISE NORMAL ECG -
Unconfirmed Diagnosis

12 Lead: Standard Placement

LD



Device:

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

PHILIPS

REORDER M3708A

F 50~ 0.50-100 Hz W

PH100B C1? P?



LETTER OF APPROVAL / RECOMMENDATION

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

PARTICULARS	EMPLOYEE DETAILS
NAME	MRS. S SIVARANJANI
EC NO.	88320
DESIGNATION	HEAD PEON
PLACE OF WORK	CHENNAI, MOUNT ROAD
BIRTHDATE	21-11-1980
PROPOSED DATE OF HEALTH CHECKUP	29-03-2024
BOOKING REFERENCE NO.	23M88320100104900E

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 **22-03-2024** till **31-03-2024**. 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 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.

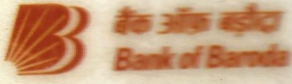
We solicit your co-operation in this regard.

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))



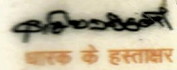
बैंक ऑफ बरोडा
Bank of Baroda



नाम : S. SHARANJANI
Name

कर्मचारी कूट नं : 88320
E.C. No.


जारीकर्ता प्रधिकारी
Issuing Authority


धारक के हस्ताक्षर
Signature of Holder

Patient Name : Mrs. SIVARANJANI S Age : 43 Y/F
UHID : CTNA.0000206688 OP Visit No : CTNAOPV197294
Conducted By: : Dr. ASHA MAHILMARAN Conducted Date : 29-03-2024 11:44
Referred By : SELF

2D-ECHO WITH COLOUR DOPPLER

Dimensions:

Ao (ed)	2.7 CM
LA (es)	3.0 CM
LVID (ed)	4.0 CM
LVID (es)	2.6 CM
IVS (Ed)	0.8 CM
LVPW (Ed)	0.8 CM
EF	68.00%
%FD	38.00%

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

Patient Name	: Mrs. SIVARANJANI S	Age	: 43 Y/F
UHID	: CTNA.0000206688	OP Visit No	: CTNAOPV197294
Conducted By:	: Dr. ASHA MAHILMARAN	Conducted Date	: 29-03-2024 11:44
Referred By	: SELF		

DOPPLER STUDIES

PWD: A>E AT MITRAL INFLOW

E/A-E: 0.9m/sec A: 0.6m/sec

VELOCITY ACROSS THE PULMONIC VALVE UPTO 0.4m/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
NIRMALA

Patient Name : Mrs. SIVARANJANI S
UHID : CTNA.0000206688
Conducted By: : Dr. ASHA MAHILMARAN
Referred By : SELF

Age : 43 Y/F
OP Visit No : CTNAOPV197294
Conducted Date : 29-03-2024 11:44



Dr.ASHA
MAHILMARAN.

Patient Name	: Mrs. SIVARANJANI S	Age	: 43 Y/F
UHID	: CTNA.0000206688	OP Visit No	: CTNAOPV197294
Conducted By:	: Dr. ASHA MAHILMARAN	Conducted Date	: 29-03-2024 11:44
Referred By	: SELF		

Patient Name	: Mrs. SIVARANJANI S	Age	: 43 Y/F
UHID	: CTNA.0000206688	OP Visit No	: CTNAOPV197294
Conducted By:	: Dr. ASHA MAHILMARAN	Conducted Date	: 29-03-2024 11:44
Referred By	: SELF		

Patient Name	: Mrs. SIVARANJANI S	Age	: 43 Y/F
UHID	: CTNA.0000206688	OP Visit No	: CTNAOPV197294
Conducted By:	: Dr. ASHA MAHILMARAN	Conducted Date	: 29-03-2024 11:44
Referred By	: SELF		

Patient Name : Mrs. SIVARANJANI S Age : 43 Y/F
UHID : CTNA.0000206688 OP Visit No : CTNAOPV197294
Reported By: : Dr. HARI K Conducted Date : 29-03-2024 15:36
Referred By : SELF

ECG REPORT

Impression:

NORMAL SINUS RHYTHM

NORMAL ECG .

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



Dr. HARI K