


Patient Name	: Mrs.SOURABHA S B	Collected	: 18/Dec/2023 08:50AM
Age/Gender	: 33 Y 6 M 20 D/F	Received	: 18/Dec/2023 10:19AM
UHID/MR No	: CMYS.0000058892	Reported	: 18/Dec/2023 12:05PM
Visit ID	: CMYSOPV120426	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 284696901428		

DEPARTMENT OF HAEMATOLOGY

PERIPHERAL SMEAR , WHOLE BLOOD EDTA


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

SIN No:BED230312500



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UHID/MR No : CMYS.0000058892	Reported : 18/Dec/2023 02:35PM
Visit ID : CMYSOPV120426	Status : Final Report
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DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	12.4	g/dL	12-15	Spectrophotometer
PCV	39.10	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.87	Million/cu.mm	3.8-4.8	Electrical Impedance
MCV	80	fL	83-101	Calculated
MCH	25.5	pg	27-32	Calculated
MCHC	31.7	g/dL	31.5-34.5	Calculated
R.D.W	13.3	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	6,900	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	55.6	%	40-80	Electrical Impedance
LYMPHOCYTES	37	%	20-40	Electrical Impedance
EOSINOPHILS	1.7	%	1-6	Electrical Impedance
MONOCYTES	5.3	%	2-10	Electrical Impedance
BASOPHILS	0.4	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	3836.4	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2553	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	117.3	Cells/cu.mm	20-500	Calculated
MONOCYTES	365.7	Cells/cu.mm	200-1000	Calculated
BASOPHILS	27.6	Cells/cu.mm	0-100	Calculated
PLATELET COUNT	259000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	14	mm at the end of 1 hour	0-20	Modified Westergren
PERIPHERAL SMEAR				

R.B.C: Majority are normocytic normochromic. Also seen are microcytes

W.B.C: Are normal in number,morphology and distribution.

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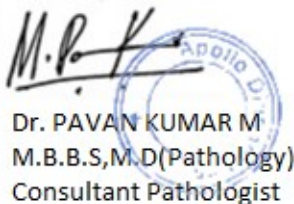
DEPARTMENT OF HAEMATOLOGY

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

Platelets: Adequate and are seen in singles and clumps.

Hemoparasites: Not seen.

IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE.


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DEPARTMENT OF HAEMATOLOGY

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

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



Dr. PAVAN KUMAR M
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Consultant Pathologist

SIN No:BED230312500



Patient Name : Mrs.SOURABHA S B	Collected : 18/Dec/2023 12:02PM
Age/Gender : 33 Y 6 M 20 D/F	Received : 18/Dec/2023 02:25PM
UHID/MR No : CMYS.0000058892	Reported : 18/Dec/2023 03:11PM
Visit ID : CMYSOPV120426	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, FASTING , NAF PLASMA	94	mg/dl	74-106	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:

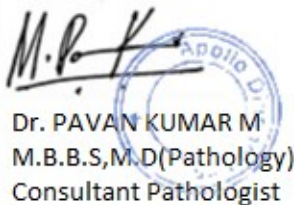
- The diagnosis of Diabetes requires a fasting plasma glucose of $>$ or $=$ 126 mg/dL and/or a random / 2 hr post glucose value of $>$ or $=$ 200 mg/dL on at least 2 occasions.
- Very high glucose levels ($>$ 450 mg/dL in adults) may result in Diabetic Ketoacidosis & is considered critical.

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	101	mg/dL	70-140	GOD - POD

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. PAVAN KUMAR M
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SIN No:PLP1398611



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Age/Gender : 33 Y 6 M 20 D/F	Received : 18/Dec/2023 01:22PM
UHID/MR No : CMYS.0000058892	Reported : 18/Dec/2023 02:49PM
Visit ID : CMYSOPV120426	Status : Final Report
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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA				
HBA1C, GLYCATED HEMOGLOBIN	4.6	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	85	mg/dL		Calculated

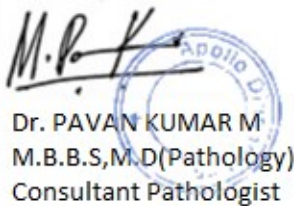
Comment:

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:EDT230115236



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Age/Gender : 33 Y 6 M 20 D/F	Received : 18/Dec/2023 10:14AM
UHID/MR No : CMYS.0000058892	Reported : 18/Dec/2023 11:59AM
Visit ID : CMYSOPV120426	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 284696901428	

DEPARTMENT OF BIOCHEMISTRY

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

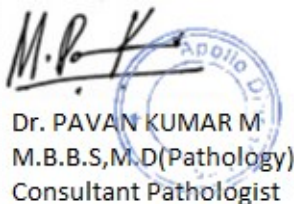
Test Name	Result	Unit	Bio. Ref. Range	Method
LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	143	mg/dl	0-200	CHOD
TRIGLYCERIDES	70	mg/dl	0-150	GPO, Trinder
HDL CHOLESTEROL	42	mg/dL	>40	CHE/CHO/POD
NON-HDL CHOLESTEROL	101	mg/dL	<130	Calculated
LDL CHOLESTEROL	87.04	mg/dL	<100	Calculated
VLDL CHOLESTEROL	13.99	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.41		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 on different days can show physiological and analytical variations.
- NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.
- Primary prevention algorithm now includes absolute risk estimation and lower LDL Cholesterol target levels to determine eligibility of drug therapy.
- 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.
- 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.
- VLDL, LDL Cholesterol Non HDL Cholesterol, CHOL/HDL RATIO, LDL/HDL RATIO are calculated parameters when Triglycerides are below 350mg/dl. When Triglycerides are more than 350 mg/dl LDL cholesterol is a direct measurement.



Dr. PAVAN KUMAR M
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SIN No:SE04573149



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DEPARTMENT OF BIOCHEMISTRY

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


Dr. PAVAN KUMAR M
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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.40	mg/dl	0-1.2	NBD
BILIRUBIN CONJUGATED (DIRECT)	0.11	mg/dl	0-0.2	Diazotized sulfanilic acid
BILIRUBIN (INDIRECT)	0.29	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	14	U/l	0-45	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	14.0	U/l	0-31	IFCC
ALKALINE PHOSPHATASE	46.00	U/l	42-98	IFCC (AMP buffer)
PROTEIN, TOTAL	6.30	g/dl	6.4-8.3	Biuret
ALBUMIN	4.26	g/dl	3.5-5.2	Bromcresol Green
GLOBULIN	2.04	g/dL	2.0-3.5	Calculated
A/G RATIO	2.09		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 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:

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- Albumin- Liver disease reduces albumin levels.
- Correlation with PT (Prothrombin Time) helps.


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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	0.56	mg/dL	0.5-1.04	Creatinine amidohydrolase
UREA	17.50	mg/dl	13-43	Urease, UV
BLOOD UREA NITROGEN	8.2	mg/dL	8.0 - 23.0	Calculated
URIC ACID	3.50	mg/dL	2.5-6.2	Uricase
CALCIUM	9.49	mg/dl	8.6-10.3	Arsenazo III
PHOSPHORUS, INORGANIC	3.73	mg/dl	2.7-4.5	Molybdate
SODIUM	140	mmol/L	135-145	Direct ISE
POTASSIUM	3.8	mmol/L	3.5-5.1	Direct ISE
CHLORIDE	101	mmol/L	98 - 107	Direct ISE



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Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	16.00	U/l	0-38	IFCC



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DEPARTMENT OF IMMUNOLOGY

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

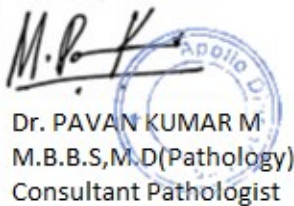
Test Name	Result	Unit	Bio. Ref. Range	Method
THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM				
TRI-iodothyronine (T3, TOTAL)	0.93	ng/mL	0.64-1.52	CMIA
THYROXINE (T4, TOTAL)	7.85	µg/dL	4.87-11.72	CMIA
THYROID STIMULATING HORMONE (TSH)	2.460	µIU/mL	0.35-4.94	CMIA

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

- 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.
- 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.
- 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.
- 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



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SIN No:SPL23184401



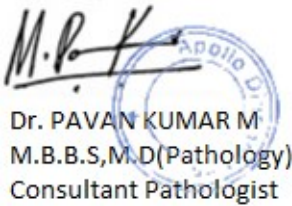
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Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF IMMUNOLOGY

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

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SIN No:SPL23184401

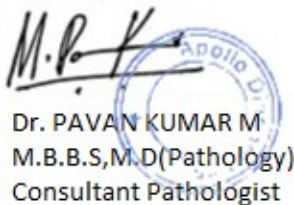


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DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - 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 MOUNT AND MICROSCOPY				
PUS CELLS	3 - 4	/hpf	0-5	Microscopy
EPITHELIAL CELLS	4 - 6	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY



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

SIN No:UR2243757



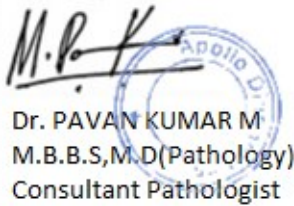
Patient Name : Mrs.SOURABHA S B	Collected : 18/Dec/2023 08:50AM
Age/Gender : 33 Y 6 M 20 D/F	Received : 18/Dec/2023 11:11AM
UHID/MR No : CMYS.0000058892	Reported : 18/Dec/2023 12:06PM
Visit ID : CMYSOPV120426	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 284696901428	

DEPARTMENT OF CLINICAL PATHOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
URINE GLUCOSE(POST PRANDIAL)	NEGATIVE		NEGATIVE	Dipstick

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



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

SIN No:UF010024



Patient Name : Mrs.SOURABHA S B	Collected : 18/Dec/2023 11:24AM
Age/Gender : 33 Y 6 M 20 D/F	Received : 19/Dec/2023 01:36PM
UHID/MR No : CMYS.0000058892	Reported : 20/Dec/2023 11:21AM
Visit ID : CMYSOPV120426	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 284696901428	

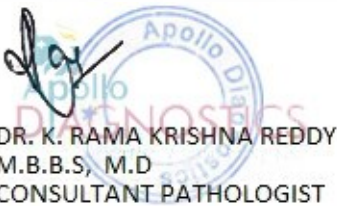
DEPARTMENT OF CYTOLOGY

LBC PAP TEST (PAPSURE) , CERVICAL SAMPLE

	CYTOLOGY NO.	21218/23
I	SPECIMEN	
a	SPECIMEN ADEQUACY	ADEQUATE
b	SPECIMEN TYPE	LIQUID-BASED PREPARATION (LBC)
	SPECIMEN NATURE/SOURCE	CERVICAL SMEAR
c	ENDOCERVICAL-TRANSFORMATION ZONE	PRESENT WITH ENDOCERVICAL CELLS
d	COMMENTS	SATISFACTORY FOR EVALUATION
II	MICROSCOPY	Superficial and intermediate squamous epithelial cells with benign morphology. Inflammatory cells, predominantly neutrophils. Negative for intraepithelial lesion/ malignancy.
III	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 ***



DR. K. RAMA KRISHNA REDDY
M.B.B.S., M.D
CONSULTANT PATHOLOGIST

SIN No:CS071554

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





Patient Name	: Mrs. SOURABHA S B	Age/Gender	: 33 Y/F
UHID/MR No.	: CMYS.0000058892	OP Visit No	: CMYSOPV120426
Sample Collected on	:	Reported on	: 18-01-2024 15:12
LRN#	: RAD2181991	Specimen	:
Ref Doctor	: SELF		
Emp/Auth/TPA ID	: 284696901428		

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

CLINT SKIP THE ULTRASOUND ABDOMEN AND PELVIS.

Patient Name : Mrs. SOURABHA S B

Age/Gender : 33 Y/F

UHID/MR No. : CMYS.0000058892

OP Visit No : CMYSOPV120426

Sample Collected on :

Reported on : 18-12-2023 16:00

LRN# : RAD2181991

Specimen :

Ref Doctor : SELF

Emp/Auth/TPA ID : 284696901428

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Both lung fields and hila are normal .

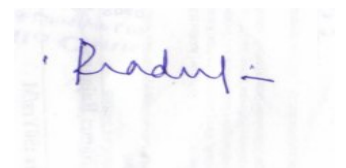
No obvious active pleuro-parenchymal lesion seen .

Both costophrenic and cardiophrenic angles are clear .

Both diaphragms are normal in position and contour .

Thoracic wall and soft tissues appear normal.

IMPRESSION :NORMAL STUDY.



Dr. PRADEEP KUMAR C N
MBBS DNB(RADIOLOGY)

Radiology

Name: Mrs. SOURABHA S B
Age/Gender: 34 Y/F
Address: mysore
Location: MYSORE, KARNATAKA
Doctor:
Department: GENERAL
Rate Plan: MYSORE_06042023
Sponsor: ARCOFEMI HEALTHCARE LIMITED
Consulting Doctor: Dr. SABAH JAVED

MR No: CMYS.0000058892
Visit ID: CMYSOPV120426
Visit Date: 18-12-2023 08:46
Discharge Date:
Referred By: SELF

HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

Chief Complaints

COMPLAINTS:::: For Corporate Health Checkup,

SYSTEMIC REVIEW

**Weight

--->: Stable,

Number of kgs: 60.3,

-=: 166,

HT-HISTORY

Past Medical History

PAST MEDICAL HISTORY: Nil Significant,

**Cancer: NILL,

PHYSICAL EXAMINATION

SYSTEMIC EXAMINATION

IMPRESSION

IMPRESSION

Finding Category : within normal limits,

ECG

: NORMAL,

RECOMMENDATION

Fitness Report

Fitness.: YES,

DISCLAIMER

Disclaimer: The health checkup examinations and routine investigations have certain limitations and may not be able to detect all the diseases. Any new or persisting symptoms should be brought to the attention of the consulting physician. Additional tests, consultations and follow up may be required in some cases.,

Doctor's Signature

Bill Of Supply



Name : Mrs. SOURABHA S B
Age/Gender : 33 Y F
Contact No : +919353834355
Address : mysore
UHID : CMYS.0000058892
Corporate Name : ARCOFEMI HEALTHCARE LIMITED
Plan : ARCOFEMI MEDIWHEEL FEMALE AHC CREDIT PAN INDIA OP AGREEMENT

Bill No : CMYS-OCR-21885
Bill/Reg Date : 18.12.2023 08:47
Referred by : SELF
Center : Mysore
Emp No/Auth Code : 284696901428

#	Department	Description Of Service	SAC/HSN Code	Qty	Rate	Gross Value	Discount	CGST Rate	CGST Amt	SGST/UTGST Rate	SGST/UTGST Amt	Net Value
1	Package Charges	ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324	999312	1	2,400.00	2,400.00	0.00	0.00	0.00	0.00	0.00	2,400.00

Bill Amount: 2,400.00
Total Discount: 0.00
Patient Payment: 0.00
Corporate Due: 2,400.00
Patient Due: 0.00

Received with thanks: Zero Rupees only

Authorized Signature : (Nikhitha R)

You can download your report from "www.apolloclinic.com" Enter user name as CMYSOPV120426 and password as 446453
Please log on to AskApollo.com for booking Appointments

Apollo Health and Lifestyle Limited

(CIN : UR5110TG2000PLC115819)
Regd. Office: #7-1-617/A, 615 & 616, Imperial Towers, 7th Floor : Ameerpet, Hyderabad 500038, Telangana. |
www.apolloh.com | Email ID: enquiry@apolloh.com . Ph No: 040-4904 7777, Fax No: 4904 7744

APOLLO CLINICS NETWORK

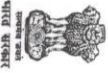
Bengaluru: **Hyderabad** (A9, Ram Nagar) | **Chennai** (Nagar) | **Kolkata** (Kondapur) | **Nallakonda** (Nizampet) | **Manikonda** (Uppal) | **Andhra Pradesh: Vijay** (Geethamma Peta) | **Karnataka: Bangalore** (Basavanagudi) | **Bellandur** | **Electronics City** | **HSR Layout** | **Indira Nagar** | **JP Nagar** | **Kundalahalli** | **Koramangala** | **Sarjapur Road** | **Mysore** (VV Mohalla) | **Tamil Nadu: Chennai** | **Anna Nagar** | **Kotturupalli** | **T Nagar** | **Valasarokkam** | **Vedaibey** | **Maharashtra: Pune** (Sundh) | **Nigdi Pradhikaran** | **Viman Nagar** | **Wanowrie** | **Kharadi** | **Uttar Pradesh: Ghaziabad** (Indrapuram)

Online appointments: www.apolloclinic.com

GSTIN: 29AADCA0733E1Z3

Address:
22, 23, 24, 25/101/3, Sree Rama Layout,
BNR Complex, OPP RBI Layout, JP Nagar,
7th Phase, Bengaluru, Karnataka

1860 500 7788



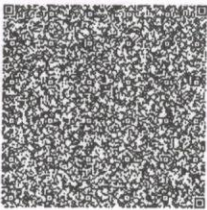
ಭಾರತ ಸರ್ಕಾರ
Government of India

ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ
Unique Identification Authority of India

ನೋಂದಣಿ ಸಂಖ್ಯೆ/ Enrolment No.: 0012/14026/00192

To
ಸೌರಾಭಾ ಬಿ ಎಸ್
Sourabha B S
C/O: Lokesh Murthy
331 RMP Layout
Vijayanagar 4th Stage 2nd Phase
Mysore
Mysuru Karnataka - 570017
9620871414

Signature Valid
Digital Signature
MADHUKAR MURTHY
Date: 2023-02-12 11:33:38



ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :
2846 9690 1428
VID : 9114 0188 5943 0561
ನನ್ನ ಆಧಾರ್. ನನ್ನ ಗುರುತು



ಭಾರತ ಸರ್ಕಾರ
Government of India



ಸೌರಾಭಾ ಬಿ ಎಸ್
Sourabha B S
ಜನ ದಿನಾಂಕ/DOB: 29/05/1990
ಪ್ರ/ FEMALE

Issue Date: 03/02/2012

2846 9690 1428
VID : 9114 0188 5943 0561

(Handwritten signature)



ಮಾಹಿತಿ

- ಆಧಾರ್ ಗುರುತಿನ ಪುರಾವೆಯೇ ಹೊರತು ಪಾಠಶ್ವರರು
- ಸುರಕ್ಷಿತ ಡಿಜಿಟಲ್ ಕೋಡ್/ಆಪ್ಲೆನ್ XML/ಆನ್ಲೈನ್ ದೃಢೀಕರಣ ಬಳಸಿ ಗುರುತನ್ನು ಪರಿಶೀಲಿಸಿ
- ಎಲೆಕ್ಟ್ರಾನಿಕ್ ಪ್ರತಿಯ ಮೂಲಕ ಮುದ್ರಿತವಾದ ವಿದ್ಯುನ್ಮಾನ ದಾಖಲೆ ಇದ್ದಾಗಿದೆ

INFORMATION

- Aadhaar is a proof of identity, not of citizenship.
- Verify identity using Secure QR Code/ Offline XML/ Online Authentication.
- This is electronically generated letter.

- ಆಧಾರ್ ದೇಶದಾದ್ಯಂತ ಮಾನ್ಯತೆಯನ್ನು ಪಡೆದಿದೆ
- ಸುಲಭವಾಗಿ ನವೀಕರಣ ಮಾಡಲು ಸರ್ಕಾರೀ ಸೇವೆಗಳನ್ನು ಪಡೆಯಲು ಆಧಾರ್ ಸಹಾಯವಾಗಿದೆ.
- ನಿಮ್ಮ ಮೊಬೈಲ್ ಸಂಖ್ಯೆ ಮತ್ತು ಇ-ಮೇಲ್ ಐಡಿ ಅನ್ನು ಆಧಾರ್ ನಲ್ಲಿ ನವೀಕರಿಸಿ
- ಆಧಾರ್ ನ್ನು ನಿಮ್ಮ ಸ್ಮಾರ್ಟ್ ಫೋನ್ ನಲ್ಲಿ ಹೊಂದಿಸಿ mAadhaar ಅಪ್ಲಿಕೇಶನ್ ಬಳಸಿ
- Aadhaar is valid throughout the country.
- Aadhaar helps you avail various Government and non-Government services easily.
- Keep your mobile number & email ID updated in Aadhaar.
- Carry Aadhaar in your smart phone – use mAadhaar App.

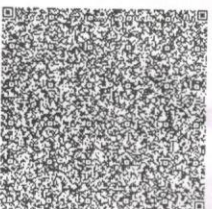


ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ
Unique Identification Authority of India

ವಿಳಾಸ:
ಸರ್ ಆರ್ ಲೋಕೇಶ್ ಮೂರ್ತಿ, # 331 ಆರ್.ಎಂ.ಪಿ. ಲೇಔಟ್, ವಿಜಯನಗರ 4ನೇ ಸ್ಟೇಜ್ 2ನೇ ಘಟ್ಟ, ಮೈಸೂರು, ಕರ್ನಾಟಕ - 570017
Address:
C/O: Lokesh Murthy, # 331 RMP Layout, Vijayanagar 4th Stage 2nd Phase, Mysore, Karnataka - 570017

Download Date: 12/02/2023

2846 9690 1428
VID : 9114 0188 5943 0561



Subject: Health Check up Booking Confirmed Request(bobE2855),Package Code-
PKG10000377, Beneficiary Code-302931

Sourabha B s <sourabhabs@gmail.com>

Mon 18-12-2023 08:43

To:Mysore Apolloclinic <mysore@apolloclinic.com>

----- Forwarded message -----

From: **Mediwheel** <wellness@mediwheel.in>

Date: Sat, 16 Dec 2023 at 6:19 PM

Subject: Health Check up Booking Confirmed Request(bobE2855),Package Code-PKG10000377,
Beneficiary Code-302931

To: <sourabhabs@gmail.com>

Cc: <customercare@mediwheel.in>

011-41195959

Dear **MS. S SOURABHA B**,

We are pleased to confirm your health checkup booking request with the following details.

Booking Date : 16-12-2023
Hospital Package Name : Mediwheel Full Body Health Annual Plus Check
Patient Package Name : Mediwheel Full Body Health Checkup Female Below 40
Name of Diagnostic/Hospital : Apollo Clinic
Address of Diagnostic/Hospital : Apollo Clinic, 23, Kalidasa Road, VV Mohalla, Mysore - 570002
City : Mysore
State :
Pincode : 570002
Appointment Date : 18-12-2023
Confirmation Status : Booking Confirmed
Preferred Time : 8:00am-8:30am
Booking Status : Booking Confirmed

Member Information		
Booked Member Name	Age	Gender
MS. S SOURABHA B	33 year	Female

Note - Please note to not pay any amount .

Instructions to undergo Health Check:

- Please ensure you are on complete fasting for 10-To-12-Hours prior to check.
- During fasting time do not take any kind of medication, alcohol, cigarettes, tobacco or any other liquids (except Water) in the morning.

CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

of Sourasha . S . S on 18/12/23

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.....</p> <p>2.....</p> <p>3.....</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. Review after _____ recommended 	
<ul style="list-style-type: none"> • Unfit 	

Dr. Pranav
Medical Officer
The Apollo Clinic, Mysore.

Apollo Clinic

This certificate is not meant for medico-legal purposes

**423, 1st Floor,
Kalidasa Road, Mysore - 02
Ph : 0821-4006040/41**

Apollo Health and Lifestyle Limited

ICIN : UR5110TG2000PLC115819

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

APOLLO CLINICS NETWORK KARNATAKA

Bangalore : Basavanahalli | Bellandur | Electronic City | Fraser Town | HSR Layout | Indra Nagar | JP Nagar | Kundalahalli | Koramangala | Sarjapur Road. Mysore : VV Mohalla

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

1860 500 7788

Date : 18-12-2023
MR NO : CMYS.0000058892

Department : GENERAL
Doctor :

Name : Mrs. SOURABHA S B

Registration No :

Age/ Gender : 33 Y / Female

Qualification :

Consultation Timing: 08:46

Height : 166	Weight : 60.3	BMI :	Waist Circum :
Temp :	Pulse :	Resp :	B.P : 100/70

General Examination /
Allergies History

Clinical Diagnosis & Management Plan

Came for regular health checkup

Blood Au - WNL

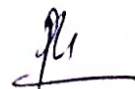
Urine RE - WNL

Chest X-ray / PA view - WNL

ECG - WNL

As

- Recurrent



Follow up date :

Doctor Signature

Apollo Clinic
23, 1st Floor,
Kalidasa Road, Mysore - 02
Ph : 0821-400010/41

Date : 18-12-2023
MR NO : CMYS.0000058892

Department : GENERAL Dietetic
Doctor : Madhura. B.P

Name : Mrs. SOURABHA S B

Registration No :

Age/ Gender : 33 Y / Female

Qualification : M.Sc Nutrition & Dietetics
PhD*

Consultation Timing: 08:46

IBW - 60kg

Height : 166	Weight : 60.3	BMI : 20 kg/m ²	Waist Circum :
Temp :	Pulse :	Resp :	B.P :


General Examination /
Allergies History

Clinical Diagnosis & Management Plan

- ⇒ Advised Balanced diet with protein rich foods.
- ⇒ Take small frequent meals. Do not skip meals.
- ⇒ Include all variety of seasonal fruits, vegetables and green leafy vegetables.
- ⇒ Include nuts like Almonds, walnuts and dry fruits like dried dates and raisins.
- ⇒ Include seeds like Flax seeds, Pumpkin seeds, Sunflower seeds, watermelon seeds & sesame seeds - 1 teaspoon each, dry roasted.
- ⇒ Avoid maida, sugar, too much of salt, bakery soda & creams.
- ⇒ Avoid bakery products, chats, junk foods, deep fried foods, packed & processed foods.
- ⇒ cooking oil - 1/2 litre/person/month.

Follow up date :

Doctor Signature


B.P
18/12/2023

Date : 18-12-2023
MR NO : CMYS.0000058892

Department : GENERAL
Doctor :

Name : Mrs. SOURABHA S B

Registration No :

Age/ Gender : 33 Y / Female

Qualification :

Consultation Timing: 08:46

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

General Examination /
Allergies History

9/10 cough -
without
expectoration

Clinical Diagnosis & Management Plan

sh - nose - NAD
Onclearly
Syp - mild angustia,
Eae - bl - m - abent.

Adv

- 1) T. Montair AC
10ml x 5
- 2) Syp. Ambroclid S
10ml x 5

auth

Follow up date :

Doctor Signature

Apollo Clinic
23, 1st Floor,
Kalidasa Road, Mysore - 02
Ph : 0821-400010/11

Date : 18-12-2023
 MR NO : CMPS 0000000000002392
 Name : Mrs. S. S. S. S. S. S. S. S. S. B
 Age/Gender : 33 Y / Female

Department : GENERAL
 Doctor :
 Registration No :
 Qualification :

Consultation Timing : 08-46

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

General Examination /
 Allergies History

Clinical Diagnosis & Management Plan

Rt eye lft eye

Near
 vision.

N6

N6.

Distant
 vision

6/6

6/6

Colour
 vision.

⊕

⊕

Follow up date :


 Doctor Signature

Apollo Clinic
 # 23, 1st Floor,
 Kalidasa Road, Mysore
 Ph : 0821-4006040/41

Patient Name : Mrs. SOURABHA S B
UHID : CMYS.0000058892
Reported on : 18-12-2023 16:00
Adm/Consult Doctor :

Age : 33 Y F
OP Visit No : CMYSOPV120426
Printed on : 18-12-2023 16:00
Ref Doctor : SELF

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Both lung fields and hila are normal .
No obvious active pleuro-parenchymal lesion seen .
Both costophrenic and cardiophrenic angles are clear .
Both diaphragms are normal in position and contour .
Thoracic wall and soft tissues appear normal.

IMPRESSION :NORMAL STUDY.

Pradeep

Printed on:18-12-2023 16:00

---End of the Report---

Dr. PRADEEP KUMAR C N
MBBS DNB(RADIOLOGY)
Radiology

Apollo Health and Lifestyle Limited

ICIN U85110TG2000PLC115B191

Regd. Office: 1 10-60 62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016

Ph No: (040) 4904 7777, Fax No: 4904 7744 | Email ID: enquiry@apollohl.com | www.apollohl.com

APOLLO CLINICS NETWORK KARNATAKA

Bangalore (Basavanagudi) | Bellandur | Electronic City | Fraser Town | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli | Koramangala | Sarjapur Road | Mysore (VV Mohalla)

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

 **1860 500 7788**

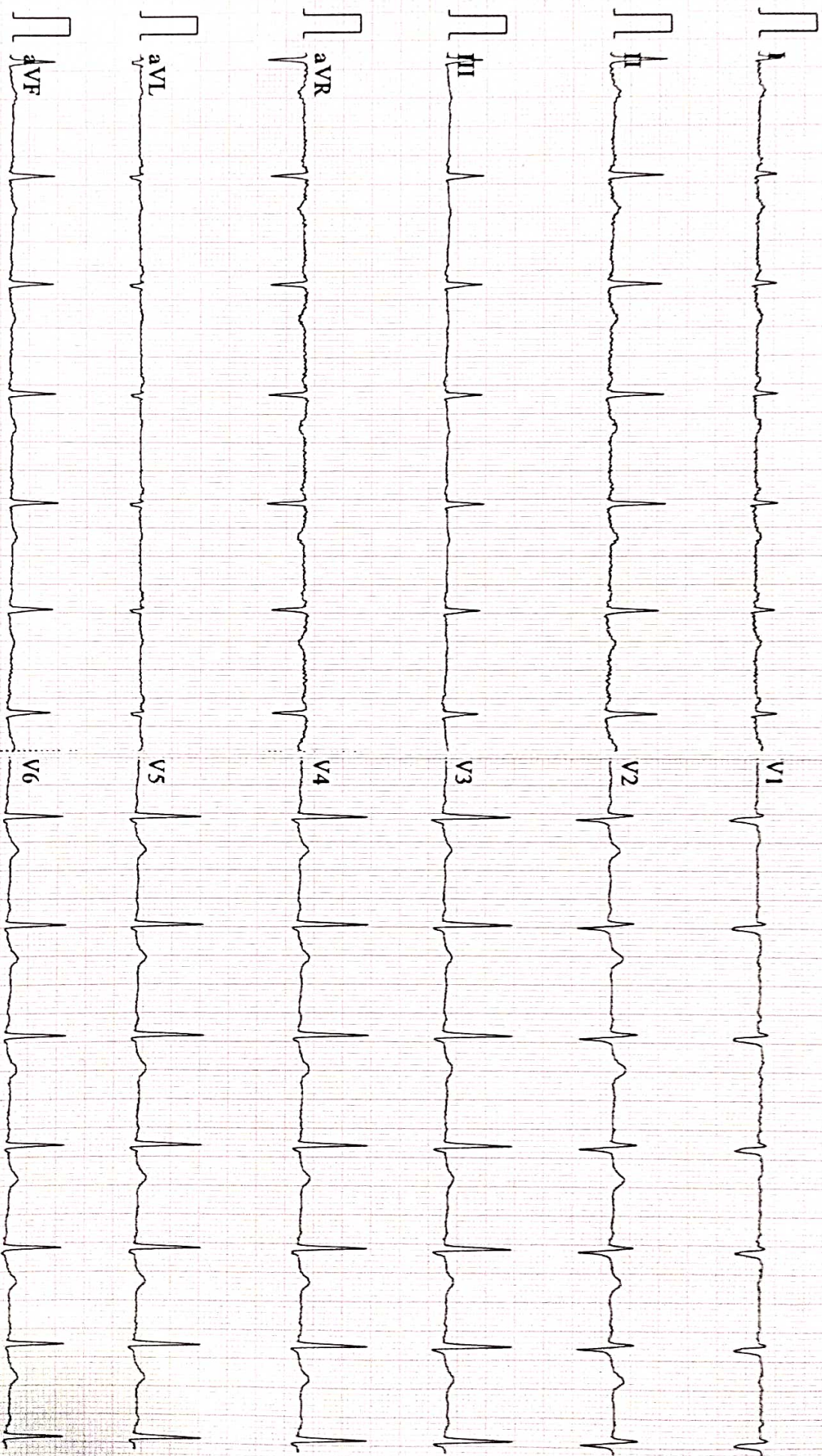
ID: 58892
MRS SOURABHA S B
Female 33Years
166cm 60kg 100/70 mmHg

18-12-2023 10:57:02 AM

Apollo Clinic
23, 1st Floor,
Kalidasa Road, Mysore - 02
Ph : 0821-4006040/41

Diagnosis Information:

Unconfirmed Report.



0.5~45Hz AC50 25mm/s 10mm/mV 2*5.0s ♣79 CARDIART 9

D V1.43 Glasgow V28.6.0 APOLLO CLINIC MYSURU

Apollo

Informed Consent/Declaration For Test Exclusion

Patient Name: Sourabha.S.B Age: 33 years

UHID Number: 58892

Please tick and sign the relevant part

I certify that I will skip Gyn consultation + USg Test from my own.

No refund is provided for the above excluded test and i have been informed about the same.

Patient signature  Date 18/12/23

Witness signature: Nithetho.R Date: 18/12/23

Apollo Clinic
23, 1st Floor,
Kalidasa Road, Mysore - 02
Ph : 0821-4005210/41

Patient Name : Mrs. Sourabha B S	Age & Sex: 33Yrs /Female
Date : 18.12.2023	UHID No : 58892

MORPHOLOGICAL DATA:

Left Atrium	Normal
Left Ventricle	Normal
Right Atrium	Normal
Right Ventricle	Normal
Interatrial septum	Intact
Interventricular septum	Intact
Aorta	Normal
Pulmonary artery	Normal
Mitral valve	Normal
Tricuspid valve	Normal
Aortic valve	Normal
Pulmonary valve	Normal
Pericardium	Normal

DIMENSIONS:

RVIDd	1.56cms
LVIDd	3.97cms
LVIDs	2.57cms
IVSd	1.02Cms
LVPWd	0.73Cms
AORTA	2.76cms
LA	2.86Cms
LVEF	64%

Apollo Health and Lifestyle Limited

(CIN: UR51107G2000PLC115819)
 Ringd Office: 1-10-60-62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016
 Ph: No: (040) 4904 7777, Fax No: 4904 7744 | Email ID: enquiry@apollohl.com | www.apollohl.com

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Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

1860 500 7788

Patient Name : Mrs. Sourabha B S	Age & Sex: 33Yrs /Female
Date : 18.12.2023	UHID No : 58892

DOPPLER DATA:

VALVES	Velocity (Cm/s)	Peak Gradient (mmHg)	Mean Gradient (mmHg)	Regurgitation
Mitral	E :0.65 A :0.36 E/A :1.81 E/e' :6.82	1.73		NIL
Tricuspid	E: 0.59 A:0.40			NIL
Aortic	0.97	3.83		NIL
Pulmonary	0.76	2.37		NIL

IMPRESSION:

NORMAL VALVES AND CHAMBERS

NO RWMA

NORMAL LV FUNCTION

NO e/o CLOT/ VEGETATION/ PE



Dr GOWTHAM H G

MD, DM CARDIOLOGY

Apollo Health and Lifestyle Limited

(CIN: U85110TG2000PLC115819)

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