

Patient Name : Mrs.SHAMEERA R
Age/Gender : 31 Y 8 M 28 D/F
UHID/MR No : SALW.0000142706
Visit ID : SALWOPV220007
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : 22E31581

Collected : 24/Aug/2024 10:04AM
Received : 24/Aug/2024 10:58AM
Reported : 24/Aug/2024 11:41AM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

PERIPHERAL SMEAR , WHOLE BLOOD EDTA

METHODOLOGY: MICROSCOPIC


RBC : Predominantly Normocytic Normochromic RBCS.

WBC : Normal in count and distribution. No abnormal cells seen..

PLATELET : Adequate on smear.

PARASITES : No haemoparasites seen.

COMMENTS : Kindly correlate clinically.


DR. CHIDAMBHARAM C
M.D., D.N.B.
CONSULTANT PATHOLOGIST
SIN No:BED240217571

Page 1 of 19



Patient Name : Mrs.SHAMEERA R
Age/Gender : 31 Y 8 M 28 D/F
UHID/MR No : SALW.0000142706
Visit ID : SALWOPV220007
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : 22E31581

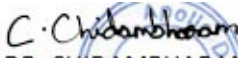
Collected : 24/Aug/2024 10:04AM
Received : 24/Aug/2024 10:58AM
Reported : 24/Aug/2024 11:41AM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	11.7	g/dL	12.5-15	Spectrophotometer
PCV	35.00	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.38	Million/cu.mm	3.8-4.8	Electrical Impedance
MCV	79.8	fL	83-101	Calculated
MCH	26.7	pg	27-32	Calculated
MCHC	33.5	g/dL	31.5-34.5	Calculated
R.D.W	12.3	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	7,190	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	56.7	%	40-80	Electrical Impedance
LYMPHOCYTES	36.8	%	20-40	Electrical Impedance
EOSINOPHILS	1.5	%	1-6	Electrical Impedance
MONOCYTES	3.8	%	2-10	Electrical Impedance
BASOPHILS	1.2	%	0-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	4076.73	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2645.92	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	107.85	Cells/cu.mm	20-500	Calculated
MONOCYTES	273.22	Cells/cu.mm	200-1000	Calculated
BASOPHILS	86.28	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	1.54		0.78- 3.53	Calculated
PLATELET COUNT	296000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	24	mm at the end of 1 hour	0-20	Modified Westergren
PERIPHERAL SMEAR				

Page 2 of 19


DR. CHIDAMBHARAM C
M.D., D.N.B.
CONSULTANT PATHOLOGIST

SIN No:BED240217571




Patient Name : Mrs.SHAMEERA R
Age/Gender : 31 Y 8 M 28 D/F
UHID/MR No : SALW.0000142706
Visit ID : SALWOPV220007
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : 22E31581

Collected : 24/Aug/2024 10:04AM
Received : 24/Aug/2024 10:58AM
Reported : 24/Aug/2024 11:41AM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

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

..


DR. CHIDAMBHARAM C
M.D., D.N.B.
CONSULTANT PATHOLOGIST
SIN No:BED240217571

Page 3 of 19



Patient Name : Mrs.SHAMEERA R	Collected : 24/Aug/2024 10:04AM
Age/Gender : 31 Y 8 M 28 D/F	Received : 24/Aug/2024 04:03PM
UHID/MR No : SALW.0000142706	Reported : 24/Aug/2024 05:11PM
Visit ID : SALWOPV220007	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22E31581	

DEPARTMENT OF HAEMATOLOGY

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

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

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



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

SIN No:HA07516529

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



Patient Name : Mrs.SHAMEERA R
Age/Gender : 31 Y 8 M 28 D/F
UHID/MR No : SALW.0000142706
Visit ID : SALWOPV220007
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : 22E31581

Collected : 24/Aug/2024 10:04AM
Received : 24/Aug/2024 11:18AM
Reported : 24/Aug/2024 11:27AM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, FASTING , NAF PLASMA	91	mg/dL	60-100	Oxidase & Peroxidase-reflectance spectrophotometry


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. CHIDAMBHARAM C
M.D., D.N.B.
CONSULTANT PATHOLOGIST

SIN No:PLF02203696



Patient Name : Mrs.SHAMEERA R
Age/Gender : 31 Y 8 M 28 D/F
UHID/MR No : SALW.0000142706
Visit ID : SALWOPV220007
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : 22E31581

Collected : 24/Aug/2024 12:29PM
Received : 24/Aug/2024 01:39PM
Reported : 24/Aug/2024 02:01PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	88	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.



Patient Name : Mrs.SHAMEERA R
Age/Gender : 31 Y 8 M 28 D/F
UHID/MR No : SALW.0000142706
Visit ID : SALWOPV220007
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : 22E31581

Collected : 24/Aug/2024 10:04AM
Received : 24/Aug/2024 04:02PM
Reported : 24/Aug/2024 05:16PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA				
HBA1C, GLYCATED HEMOGLOBIN	5.8	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	120	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 19



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



SIN No:EDT240088065

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

APOLLO SPECIALTY HOSPITALS PRIVATE LIMITED

(Formerly Known as Nova Specialty Hospitals Private Limited)

CIN : U85100TG2009PTC099414

Registered Office:No.7-1-617A,615&616, Imperial Towers, 7th Floor, Opp.Ameerpet Metro Station Ameerpet, Hyderabad, Telangana-500 038.

BENGALURU | CHENNAI | DELHI | JAIPUR | KANPUR | MUMBAI | PUNE

Patient Name : Mrs.SHAMEERA R
Age/Gender : 31 Y 8 M 28 D/F
UHID/MR No : SALW.0000142706
Visit ID : SALWOPV220007
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : 22E31581

Collected : 24/Aug/2024 10:04AM
Received : 24/Aug/2024 11:48AM
Reported : 24/Aug/2024 12:08PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

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


Test Name	Result	Unit	Bio. Ref. Interval	Method
LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	218	mg/dl	150-219	CHE-COD-POD - colorimetric, reflectance Spectropho
TRIGLYCERIDES	76	mg/dl	50-149	LPL -GPO-POD Colorimetric, reflectance Spectropho
HDL CHOLESTEROL	67	mg/dL	40-71	CHE-COD-POD - colorimetric, reflectance Spectropho
NON-HDL CHOLESTEROL	151	mg/dL	<130	Calculated
LDL CHOLESTEROL	135.8	mg/dL	<100	Calculated
VLDL CHOLESTEROL	15.2	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.25		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

Page 8 of 19


DR. CHIDAMBHARAM C
M.D., D.N.B.
CONSULTANT PATHOLOGIST

SIN No:SE04814391




Patient Name : Mrs.SHAMEERA R
Age/Gender : 31 Y 8 M 28 D/F
UHID/MR No : SALW.0000142706
Visit ID : SALWOPV220007
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : 22E31581

Collected : 24/Aug/2024 10:04AM
Received : 24/Aug/2024 11:48AM
Reported : 24/Aug/2024 12:08PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

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

Measurements in the same patient can show physiological and analytical variations.
NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.


DR. CHIDAMBHARAM C
M.D., D.N.B.
CONSULTANT PATHOLOGIST
SIN No:SE04814391

Page 9 of 19



Patient Name : Mrs.SHAMEERA R
Age/Gender : 31 Y 8 M 28 D/F
UHID/MR No : SALW.0000142706
Visit ID : SALWOPV220007
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : 22E31581

Collected : 24/Aug/2024 10:04AM
Received : 24/Aug/2024 11:48AM
Reported : 24/Aug/2024 12:08PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY


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

Test Name	Result	Unit	Bio. Ref. Interval	Method
LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.30	mg/dL	0.1-1.2	Diazo Dye Formation - reflectance spectrophotometr
BILIRUBIN CONJUGATED (DIRECT)	0.10	mg/dL	0.1-0.4	Diazo Dye Formation - reflectance spectrophotometr
BILIRUBIN (INDIRECT)	0.20	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	75	U/L	4-44	Peroxidase oxidation of Diarylimidazole Leuco Dye
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	71.0	U/L	8-38	Peroxidase oxidation of Diarylimidazole Leuco Dye
AST (SGOT) / ALT (SGPT) RATIO (DE RITIS)	1.0		<1.15	Calculated
ALKALINE PHOSPHATASE	102.00	U/L	32-111	P-Nitro Phenol Phosphate-reflectance spectrophoto
PROTEIN, TOTAL	7.30	g/dl	6.7-8.3	Biuret reaction(copper based)-colorimetric, refle
ALBUMIN	4.20	g/dL	3.8-5	Albumin-BCG Complex Colorimetric, reflectance spe
GLOBULIN	3.10	g/dL	2.0-3.5	Calculated
A/G RATIO	1.35		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:

Page 10 of 19


DR. CHIDAMBHARAM C
M.D., D.N.B.
CONSULTANT PATHOLOGIST

SIN No:SE04814391



Patient Name : Mrs.SHAMEERA R
Age/Gender : 31 Y 8 M 28 D/F
UHID/MR No : SALW.0000142706
Visit ID : SALWOPV220007
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : 22E31581

Collected : 24/Aug/2024 10:04AM
Received : 24/Aug/2024 11:48AM
Reported : 24/Aug/2024 12:08PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

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

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. 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. ALP elevation also seen in pregnancy, impacted by age and sex.
*Bilirubin elevated- predominantly direct , To establish the hepatic origin correlation with elevated GGT helps.

3. Synthetic function impairment:

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

4. Associated tests for assessment of liver fibrosis - Fibrosis-4 and APRI Index.


DR. CHIDAMBHARAM C
M.D., D.N.B.
CONSULTANT PATHOLOGIST

SIN No:SE04814391




Patient Name : Mrs.SHAMEERA R	Collected : 24/Aug/2024 10:04AM
Age/Gender : 31 Y 8 M 28 D/F	Received : 24/Aug/2024 11:48AM
UHID/MR No : SALW.0000142706	Reported : 24/Aug/2024 12:08PM
Visit ID : SALWOPV220007	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22E31581	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	0.60	mg/dL	0.6-1.1	Ammonia Concentration Measurement - color change o
UREA	20.33	mg/dL	15-36	Urease
BLOOD UREA NITROGEN	9.5	mg/dL	8.0 - 23.0	Calculated
URIC ACID	4.10	mg/dL	3-5.5	Uricase Peroxidase - colorimetric, reflectance spe
CALCIUM	9.00	mg/dL	8.4-10.2	Calcium - CLIII Complex - reflectance spectrophot
PHOSPHORUS, INORGANIC	3.70	mg/dL	2.6-4.4	PNP-XOD-POD - Colorimetric, reflectance spectroph
SODIUM	145	mmol/L	136-149	Ion Selective Electrode-potentiometric
POTASSIUM	4.2	mmol/L	3.8-5	Ion Selective Electrode-potentiometric
CHLORIDE	99	mmol/L	98-106	Ion Selective Electrode-potentiometric
PROTEIN, TOTAL	7.30	g/dl	6.7-8.3	Biuret reaction(copper based)-colorimetric, refle
ALBUMIN	4.20	g/dL	3.8-5	Albumin-BCG Complex Colorimetric, reflectance spe
GLOBULIN	3.10	g/dL	2.0-3.5	Calculated
A/G RATIO	1.35		0.9-2.0	Calculated

Page 12 of 19


DR. CHIDAMBHARAM C
M.D., D.N.B.
CONSULTANT PATHOLOGIST

SIN No:SE04814391




Patient Name : Mrs.SHAMEERA R
Age/Gender : 31 Y 8 M 28 D/F
UHID/MR No : SALW.0000142706
Visit ID : SALWOPV220007
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : 22E31581

Collected : 24/Aug/2024 10:04AM
Received : 24/Aug/2024 11:48AM
Reported : 24/Aug/2024 12:08PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

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


DR. CHIDAMBHARAM C
M.D., D.N.B.
CONSULTANT PATHOLOGIST
SIN No:SE04814391

Page 13 of 19




Patient Name : Mrs.SHAMEERA R	Collected : 24/Aug/2024 10:04AM
Age/Gender : 31 Y 8 M 28 D/F	Received : 24/Aug/2024 11:48AM
UHID/MR No : SALW.0000142706	Reported : 24/Aug/2024 12:08PM
Visit ID : SALWOPV220007	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22E31581	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	51.00	U/L	16-73	catalytic activity- reflectance spectrophotometry


DR. CHIDAMBHARAM C
M.D., D.N.B.
CONSULTANT PATHOLOGIST
SIN No:SE04814391

Page 14 of 19



Patient Name : Mrs.SHAMEERA R	Collected : 24/Aug/2024 10:04AM
Age/Gender : 31 Y 8 M 28 D/F	Received : 24/Aug/2024 03:52PM
UHID/MR No : SALW.0000142706	Reported : 24/Aug/2024 05:31PM
Visit ID : SALWOPV220007	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22E31581	

DEPARTMENT OF IMMUNOLOGY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM				
TRI-IODOTHYRONINE (T3, TOTAL)	1.16	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	10.9	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	6.637	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

- 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

Page 15 of 19



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



SIN No: SPL24135032

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

Patient Name	: Mrs.SHAMEERA R	Collected	: 24/Aug/2024 10:04AM
Age/Gender	: 31 Y 8 M 28 D/F	Received	: 24/Aug/2024 03:52PM
UHID/MR No	: SALW.0000142706	Reported	: 24/Aug/2024 05:31PM
Visit ID	: SALWOPV220007	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 22E31581		

DEPARTMENT OF IMMUNOLOGY

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

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
M.D.(Biochemistry)



SIN No:SPL24135032

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

Patient Name : Mrs.SHAMEERA R
Age/Gender : 31 Y 8 M 28 D/F
UHID/MR No : SALW.0000142706
Visit ID : SALWOPV220007
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : 22E31581

Collected : 24/Aug/2024 10:04AM
Received : 24/Aug/2024 12:35PM
Reported : 24/Aug/2024 12:59PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF CLINICAL PATHOLOGY

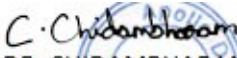
ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
COMPLETE URINE EXAMINATION (CUE) , URINE				
PHYSICAL EXAMINATION				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Physical measurement
pH	6.5		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	1.015		1.002-1.030	Refractometric
BIOCHEMICAL EXAMINATION				
URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE		NEGATIVE	GLUCOSE OXIDASE
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING REACTION
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	SODIUM NITRO PRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	MODIFIED EHRlich REACTION
NITRITE	NEGATIVE		NEGATIVE	Griess reaction
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	Diazonium salt
CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY				
PUS CELLS	2-3	/hpf	0-5	Microscopy
EPITHELIAL CELLS	1-2	/hpf	<10	MICROSCOPY
RBC	ABSENT	/hpf	0-2	MICROSCOPY
CASTS	ABSENT		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY

Comment:

All urine samples are checked for adequacy and suitability before examination. All abnormal chemical examination are rechecked and verified by manual methods.

Page 17 of 19


DR. CHIDAMBHARAM C
M.D., D.N.B.
CONSULTANT PATHOLOGIST

SIN No:UR2407189




Patient Name : Mrs.SHAMEERA R
Age/Gender : 31 Y 8 M 28 D/F
UHID/MR No : SALW.0000142706
Visit ID : SALWOPV220007
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : 22E31581

Collected : 24/Aug/2024 10:04AM
Received : 24/Aug/2024 12:35PM
Reported : 24/Aug/2024 12:59PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF CLINICAL PATHOLOGY

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

Microscopy findings are reported as an average of 10 high power fields.


DR. CHIDAMBHARAM C
M.D., D.N.B.
CONSULTANT PATHOLOGIST
SIN No:UR2407189

Page 18 of 19



Patient Name : Mrs.SHAMEERA R	Collected : 24/Aug/2024 10:04AM
Age/Gender : 31 Y 8 M 28 D/F	Received : 24/Aug/2024 12:36PM
UHID/MR No : SALW.0000142706	Reported : 24/Aug/2024 01:00PM
Visit ID : SALWOPV220007	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22E31581	

DEPARTMENT OF CLINICAL PATHOLOGY

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

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

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

*** End Of Report ***

C. Chidambaram
DR. CHIDAMBHARAM C
M.D., D.N.B.
CONSULTANT PATHOLOGIST
SIN No:UF012064

Page 19 of 19



Patient Name : Mrs.SHAMEERA R
Age/Gender : 31 Y 8 M 28 D/F
UHID/MR No : SALW.0000142706
Visit ID : SALWOPV220007
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : 22E31581

Collected : 24/Aug/2024 10:04AM
Received : 24/Aug/2024 12:36PM
Reported : 24/Aug/2024 01:00PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

TERMS AND CONDITIONS GOVERNING THIS REPORT

The reported results are for information and interpretation of the referring doctor or such other medical professionals, who understand reporting units, reference ranges and limitations of technologies.


Laboratories not be responsible for any interpretation whatsoever.

It is presumed that the tests performed are, on the specimen / sample being to the patient named or identified and the verifications of the particulars have been cleared out by the patient or his / her representative at the point of generation of said specimen.

The reported results are restricted to the given specimen only. Results may vary from lab to lab and from time to time for the same parameter for the same patient.

Assays are performed in accordance with standard procedures, The reported results are dependent on individual assay methods / equipment used and quality of specimen received.

This report is not valid for medico legal purposes.


DR. CHIDAMBHARAM C
M.D., D.N.B.
CONSULTANT PATHOLOGIST



SIN No:UF012064

Mail Contacts Calendar Preferences Search Your appointment

- Close
- Reply
- Reply to All
- Forward
- Delete
- Spam
-
- Actions
- View

Your appointment is confirmed

Dear MS. R SHAMEERA,

Greetings from Apollo Clinics,

Your corporate health check appointment is confirmed on **2024-08-24** at **08:30-08:45**.

Payment Mode	
Corporate Name	ARCOFEMI HEALTHCARE LIMITE
Agreement Name	[ARCOFEMI MEDIWHEEL FEMALE AGREEMENT]
Package Name	[ARCOFEMI - MEDIWHEEL - FULL CHECK - FEMALE - 2D ECHO - PA

"Kindly carry with you relevant documents such as your ID card, appointment letter and or appointment confirmation mail and or company ID card and or voucher as per company or sponsor."

Note: Video recording or taking photos inside the clinic is strictly prohibited.

Patient Name	: Mrs. SHAMEERA R	Age/Gender	: 31 Y/F
UHID/MR No.	: SALW.0000142706	OP Visit No	: SALWOPV220007
Sample Collected on	:	Reported on	: 26-08-2024 12:49
LRN#	: RAD2407583	Specimen	:
Ref Doctor	: SELF		
Emp/Auth/TPA ID	: 22E31581		

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

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

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

Pancreas appears normal.

Spleen measures 7.8cm and shows normal echotexture.

Visualised aorta and IVC are normal.
No evidence of ascites or lymphadenopathy.

Right kidney measures 11.2 x 4.2cm.

Left kidney measures 10.3 x 4.6cm.

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

Uterus anteverted measures 8.0 x 4.3cm. Endometrial thickness - 9mm. IUCD insitu.

Right ovary shows mild enlargement in size measures 4.2 x 2.8cm. Shows a follicle
measures 2.3 x 2.7cm.

Left ovary measures 3.3 x 1.6cm.

Bladder - Inadequately distended.

IMPRESSION:

NORMAL APPEARING LIVER / GALL BLADDER / PANCREAS / SPLEEN AND KIDNEYS.

UTERUS - IUCD IN SITU.

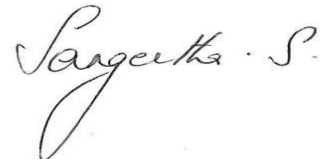
Patient Name : Mrs. SHAMEERA R

Age/Gender : 31 Y/F

MILD ENLARGEMENT OF RIGHT OVARY.

- SUGGESTED CLINICAL CORRELATION.

(The sonography findings should always be considered in correlation with the clinical and other investigation finding where applicable).



Dr. S SANGEETHA
MBBS., TRAINED IN ULTRASONOGRAPHY
Radiology

CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

of Mrs. Shameera on 24/08/24

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

	Tick
<ul style="list-style-type: none"> • Medically Fit 	✓
<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. RAJMADHANGI .D
 M.D. INTERNAL MEDICINE
 GENERAL PHYSICIAN
 Apollo Spectra Hospitals
 Alwarpet, REG No: 104481

This certificate is not meant for medico-legal purposes

Patient Name : Mrs. SHAMEERA R
UHID : SALW.0000142706
Conducted By :
Referred By : SELF

Age : 31 Y/F
OP Visit No : SALWOPV220007
Conducted Date : 24-08-2024 15:26

2D-ECHO WITH COLOUR DOPPLER

Dimensions:

Ao (ed)	2.6 CM
LA (es)	2.9 CM
LVID (ed)	4.2 CM
LVID (es)	2.5 CM
IVS (Ed)	0.9 CM
LVPW (Ed)	0.8 CM
EF	70%
%FD	39%

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

LEFT VENTRICLE:

NO REGIONAL WALL MOTION ABNORMALITY

NORMAL LEFT VENTRICULAR SYSTOLIC FUNCTION

COLOUR AND DOPPLER STUDIES

PWD: A<E AT MITRAL INFLOW

E/A-E: 0.9m/sec A: 0.4m/sec

VELOCITY ACROSS THE PULMONIC VALVE UPTO
0.7m/sec

VELOCITY ACROSS THE AV UPTO 1.0m/sec

TR VELOCITY UPTO 1.9m/sec 15mmHg

IMPRESSION

NO REGIONAL WALL MOTION ABNORMALITY
NORMAL LEFT VENTRICULAR SYSTOLIC FUNCTION(LVEF-70%)
TRIVIAL MITRAL REGURGITATION
TRIVIAL TRICUSPID REGURGITATION
NO PULMONARY ARTERY HYPERTENSION
NORMAL RIGHT VENTRICULAR SYSTOLIC FUNCTION
NO PERICARDIAL EFFUSION / CLOT.

Done By Mrs. KALAIYARASI

DR CECILY MARY MAJELLA MD DM (Cardio)



Patient Name	: Mrs. SHAMEERA R	Age/Gender	: 31 Y/F
UHID/MR No.	: SALW.0000142706	OP Visit No	: SALWOPV220007
Sample Collected on	:	Reported on	: 24-08-2024 15:06
LRN#	: RAD2407583	Specimen	:
Ref Doctor	: SELF		
Emp/Auth/TPA ID	: 22E31581		

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Lung fields are clear.

Cardio thoracic ratio is normal.

Apices, costo and cardiophrenic angles are free.

Cardio vascular shadow and hila show no abnormal feature.

Bony thorax shows no significant abnormality.

Domes of diaphragm are well delineated.

Impression:

Normal study.



Dr. ARUN KUMAR S
MBBS, DMRD, DNB
Radiology