

Patient Name : Mrs.SINGH POONAM	Collected : 16/Sep/2024 10:54AM
Age/Gender : 35 Y 4 M 20 D/F	Received : 16/Sep/2024 03:26PM
UHID/MR No : CBEL.0000246452	Reported : 16/Sep/2024 04:18PM
Visit ID : CSAROPV355508	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22E33410	

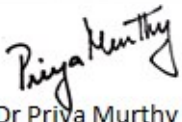
DEPARTMENT OF HAEMATOLOGY

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	11.9	g/dL	12-15	Spectrophotometer
PCV	35.30	%	36-46	Electronic pulse & Calculation
RBC COUNT	3.96	Million/cu.mm	3.8-4.8	Electrical Impedance
MCV	89.2	fL	83-101	Calculated
MCH	30.2	pg	27-32	Calculated
MCHC	33.8	g/dL	31.5-34.5	Calculated
R.D.W	13.4	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	6,440	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	74.2	%	40-80	Electrical Impedance
LYMPHOCYTES	13.4	%	20-40	Electrical Impedance
EOSINOPHILS	6.7	%	1-6	Electrical Impedance
MONOCYTES	4.9	%	2-10	Electrical Impedance
BASOPHILS	0.8	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	4778.48	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	862.96	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	431.48	Cells/cu.mm	20-500	Calculated
MONOCYTES	315.56	Cells/cu.mm	200-1000	Calculated
BASOPHILS	51.52	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	5.54		0.78- 3.53	Calculated
PLATELET COUNT	222000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	3	mm at the end of 1 hour	0-20	Modified Westegren method
PERIPHERAL SMEAR				

RBCs: are normocytic normochromic

WBCs: are normal in total number with normal distribution and morphology.



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Consultant Pathologist



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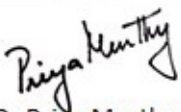
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PLATELETS: appear adequate in number.

HEMOPARASITES: negative

IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE



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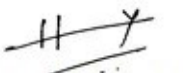


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DEPARTMENT OF HAEMATOLOGY

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

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



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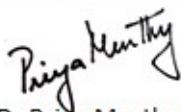


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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, FASTING , NAF PLASMA	96	mg/dL	70-100	HEXOKINASE



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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	4.4	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	80	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.

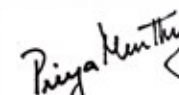
5. In cases of Interference of Hemoglobin variants in HbA1C, alternative methods (Fructosamine) estimation is recommended for Glycemic Control

A: HbF >25%

B: Homozygous Hemoglobinopathy.

(Hb Electrophoresis is recommended method for detection of Hemoglobinopathy)


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THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFESTYLE LIMITED- RRL BANGALORE
 SIN No: SAR240901531

Apollo Health and Lifestyle Limited

(CIN - U061107C2800PH6115849)

This test has been performed at Apollo Health & Lifestyle Ltd, RRL BANGALORE Laboratory
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Telangana: Hyderabad (AS Rao Nagar | Chanda Nagar | Kondapur | Nallakunta | Nizampet | Manikonda | Uppal) | Andhra Pradesh: Vizag (Seethamma Peta) | Karnataka: Bangalore (Basavanagudi | Bellandur | Electronics City | Fraser Town | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli | Koramangala | Sarjapur Road) | Mysore (VV Mohalla) | Tamilnadu: Chennai (Annanagar | Kotturpuram | Mogappair | T Nagar | Valasaravakkam | Velachery) | Maharashtra: Pune (Aundh | Nigdi Pradhikaran | Viman Nagar | Wanowrie) | Uttar Pradesh: Ghaziabad (Indrapuram) | Gujarat: Ahmedabad (Satellite) | Punjab: Amritsar (Court Road) | Haryana: Faridabad (Railway Station Road)

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Emp/Auth/TPA ID : 22E33410	

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	122	mg/dL	<200	CHO-POD
TRIGLYCERIDES	45	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	53	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	70	mg/dL	<130	Calculated
LDL CHOLESTEROL	60.5	mg/dL	<100	Calculated
VLDL CHOLESTEROL	9	mg/dL	<30	Calculated
CHOL / HDL RATIO	2.31		0-4.97	Calculated
ATHEROGENIC INDEX (AIP)	< 0.01		<0.11	Calculated

Comment:

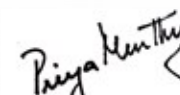
Reference Interval as per National Cholesterol Education Program (NCEP) Adult Treatment Panel III Report.

	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

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.


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THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFESTYLE LIMITED- RRL BANGALORE
SIN No: SAR240901532

Apollo Health and Lifestyle Limited

(CIN - U061107C2009PH6115839)
This test has been performed at Apollo Health & Lifestyle Ltd, RRL BANGALORE Laboratory
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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. Interval	Method
LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	1.22	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.23	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.99	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	11	U/L	<35	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	20.0	U/L	<35	IFCC
AST (SGOT) / ALT (SGPT) RATIO (DE RITIS)	1.8		<1.15	Calculated
ALKALINE PHOSPHATASE	112.00	U/L	30-120	IFCC
PROTEIN, TOTAL	7.21	g/dL	6.6-8.3	Biuret
ALBUMIN	4.07	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.14	g/dL	2.0-3.5	Calculated
A/G RATIO	1.3		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. 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:

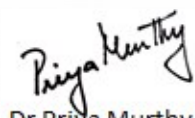
*ALP – Disproportionate increase in ALP compared with AST, ALT. ALP elevation also seen in pregnancy, impacted by age and sex. *Bilirubin elevated- predominantly direct , To establish the hepatic origin correlation with elevated GGT helps.

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.


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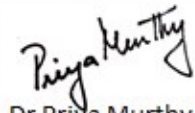

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DEPARTMENT OF BIOCHEMISTRY

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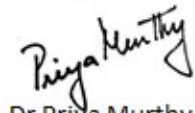
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Test Name	Result	Unit	Bio. Ref. Interval	Method
RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	0.73	mg/dL	0.66 - 1.09	Modified Jaffe, Kinetic
UREA	22.80	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	10.6	mg/dL	8.0 - 23.0	Calculated
URIC ACID	4.86	mg/dL	2.6-6.0	Uricase PAP
CALCIUM	9.00	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	3.29	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	137	mmol/L	136-146	ISE (Indirect)
POTASSIUM	4.2	mmol/L	3.5-5.1	ISE (Indirect)
CHLORIDE	108	mmol/L	101-109	ISE (Indirect)
PROTEIN, TOTAL	7.21	g/dL	6.6-8.3	Biuret
ALBUMIN	4.07	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.14	g/dL	2.0-3.5	Calculated
A/G RATIO	1.3		0.9-2.0	Calculated


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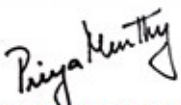
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Test Name	Result	Unit	Bio. Ref. Interval	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	7.00	U/L	<38	IFCC



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Patient Name : Mrs.SINGH POONAM	Collected : 16/Sep/2024 10:54AM
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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. Interval	Method
THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM				
TRI-iodothyronine (T3, TOTAL)	1.59	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	14	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	2.442	µIU/mL	0.34-5.60	CLIA

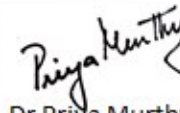
Comment:

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
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


Dr. Govinda Raju N L
 MSc, PhD (Biochemistry)
 Consultant Biochemistry


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



THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFESTYLE LIMITED- RRL BANGALORE
 SIN No: SAR240901529

Apollo Health and Lifestyle Limited (CIN - U061107C2800PH6115849)
 This test has been performed at Apollo Health & Lifestyle Ltd, RRL BANGALORE Laboratory
 Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016 |
 www.apollohl.com | Email ID: enquiry@apollohl.com, Ph No: 040-4904 7777, Fax No: 4904 7744

Address:
 Apollo Health & Lifestyle Laboratory, Neeladri Main Road,
 Neeladri Nagar, Electronic city, Bengaluru,
 Karnataka - 560034


1860 500 7788
 www.apolloclinic.com

Patient Name : Mrs.SINGH POONAM	Collected : 16/Sep/2024 10:54AM
Age/Gender : 35 Y 4 M 20 D/F	Received : 16/Sep/2024 03:21PM
UHID/MR No : CBEL.0000246452	Reported : 16/Sep/2024 04:35PM
Visit ID : CSAROPV355508	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22E33410	

DEPARTMENT OF IMMUNOLOGY

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

High	High	High	High	Pituitary Adenoma; TSHoma/Thyrotropinoma
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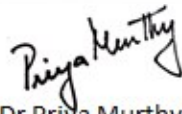
*** End Of Report ***

Result/s to Follow:

PERIPHERAL SMEAR, GLUCOSE (POST PRANDIAL) - URINE, COMPLETE URINE EXAMINATION (CUE), GLUCOSE (FASTING) - URINE



Dr.Govinda Raju N L
MSc,PhD(Biochemistry)
Consultant Biochemistry



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



THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFESTYLE LIMITED- RRL BANGALORE
SIN No: SAR240901529

Apollo Health and Lifestyle Limited

(CIN - U06110TC2009PLG115819)
Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016 |
www.apollohl.com | Email ID: enquiry@apollohl.com, Ph No: 040-4904 7777, Fax No: 4904 7744

Address:
32-1/100/125, Doddabangla Village, Neeladri Main Road,
Neeladri Nagar, Electronic city, Bengaluru,
Karnataka- 560034

Patient Name : Mrs.SINGH POONAM
Age/Gender : 35 Y 4 M 20 D/F
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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.

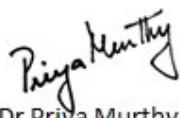
The reported results are restricted to the given specimen only. Results may vary from lab to lab and from time to time for the same parameter for the same patient.

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.Govinda Raju N L
MSc,PhD(Biochemistry)
Consultant Biochemistry



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



SIN No:SAR240901529

This test has been performed at Apollo Health & Lifestyle Ltd, RRL BANGALORE Laboratory

Patient Name	: Mrs. SINGH POONAM	Age	: 35Yrs 4Mths 21Days
UHID	: CBEL.0000246452	OP Visit No.	: CSAROPV355508
Printed On	: 16-09-2024 02:01 PM	Advised/Pres Doctor	: --
Department	: Radiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employer Id	: 22E33410		

DEPARTMENT OF RADIOLOGY

ULTRASONOGRAPHY OF ABDOMEN & PELVIS

LIVER : Normal in size & echotexture normal. No focal lesion. No intra hepatic biliary duct dilatation. Portal & hepatic veins appear normal. PV: Normal. CBD: Normal.

GALL BLADDER : Surgically removed.

PANCREAS : Obscured by bowel gas. However the visualized parts of the pancreas appear grossly normal. Para-Aortic areas could not be seen.

SPLEEN : Normal in size & echotexture normal. No focal / diffuse lesions.

KIDNEYS : RIGHT KIDNEY: 9.0 x 3.8 cms, LEFT KIDNEY : 9.7 x 3.2 cms, normal parenchymal thickness. Both kidneys are normal in size and echotexture. No calculi. No pelvicalyceal dilatation on both sides. Corticomedullary differentiation is well maintained.

URINARY BLADDER : Normal in wall thickness and lumen are normal. Contents clear. No calculus seen.

UTERUS : Anteverted. Normal in size and echotexture. Endometrial and myometrium appears normal. Endometrial thickness: 7 mm.

POD – clear.

OVARIES : Both ovaries are normal in size & echopattern. No obvious mass noted.

IMPRESSION : 1. Gall bladder surgically removed.

2. A cyst seen in right ovary measures 3.0 x 1.9 cm, few internal echoes seen within the cyst.

3. A cyst seen in left ovary measures 2.3 x 1.4 cm, few internal echoes seen within the cyst.

(The sonography findings should always be considered in correlation with the clinical and other investigation findings where applicable). It is only a professional opinion. Not

valid for medico-legal purpose) Higher imaging techniques to be done, depending on the condition of the patient, if clinically needed.

---End Of The Report---



Dr. RAMESH G
MBBS, DMRD
27462
Radiology

Patient Name	: Mrs. SINGH POONAM	Age	: 35Yrs 4Mths 22Days
UHID	: CBEL.0000246452	OP Visit No.	: CSAROPV355508
Printed On	: 17-09-2024 09:14 AM	Advised/Pres Doctor	: --
Department	: Cardiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employer Id	: 22E33410		

DEPARTMENT OF CARDIOLOGY

Observation :-

1. Normal Sinus Rhythm.
2. Heart rate is Normal
3. No pathological Q wave or ST-T changes seen.
4. Normal P,QRS,T waves and axis.
5. No evidence of chamber, hypertrophy or enlargement seen.

Impression:-

NORMAL RESTING ECG.

NOTE:-KINDLY TAKE A PHOTOCOPY OF THE GRAPH FOR FUTURE REFERENCE IF NEEDED

---End Of The Report---



Dr. SUMANJITA BORA
MBBS, PGDCC
MCI-IMR-13/903
Cardiology

Patient Mrs. SINGH POONAM
Age/Gender 35Y | Female
UHID CBEL.0000246452

Appt ID CSARAPT2437
Consult Date 16 Sep 2024
Order Bill ID CSAR-OCR-48226
Visit Display ID CSAROPV355508

VITALS

Weight : 60.2Kgs
Pulse : 94 BPM
BP : 105 / 66 MmHg
Temperature : 98.6 °F

Height : 160Cms
Spo2 : 98%
Respiratory Rate : 22 BPM

Patient Mrs. SINGH POONAM
Age/Gender 35Y | Female
UHID CBEL.0000246452

Appt ID CSARAPT2438
Consult Date 16 Sep 2024
Order Bill ID CSAR-OCR-48226
Visit Display ID CSAROPV355508

VITALS

Weight : 60Kgs
Pulse : 94 BPM
BP : 105 / 66 MmHg
Temperature : 98.6 °F

Height : 160Cms
Spo2 : 98%
Respiratory Rate : 22 BPM

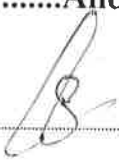
**APOLLO CLINIC
CONSENT FORM**

Patient name Singh Poornam Age 35

UHID Number _____ Company Name _____

Company want to inform u that I am ~~not interested~~ ^{Lates} in getting Echo

.....And I claim the above statement in my full Consciousness.

Patient signature  Date 17/9/2024

Name : Mrs. SINGH POONAM

Age : 35Y 4M 20D

UHID : CBEL.0000246452

Address : Carmelaram Bangalore Rural Karnataka INDIA 560035

sex : Female



CBEL.0000246452

Plan : ARCOFEMI MEDIWHEEL FEMALE AHC
CREDIT PAN INDIA OP AGREEMENT

OP No: CSAROPV355508

Bill No: CSAR-OCR-48226

Date: Sep 16th, 2024, 10:46 AM

Sno.	Service Type/Service Name	Department	
1	ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324		
1	ULTRASOUND - WHOLE ABDOMEN -18 by 12.30	Ultrasound Radiology	<input type="checkbox"/>
2	OPHTHAL BY GENERAL PHYSICIAN Admish	Consultation	<input type="checkbox"/>
3	URINE GLUCOSE(POST PRANDIAL)	Clinical Pathology	<input type="checkbox"/>
4	GAMMA GLUTAMYL TRANSFERASE (GGT)	Biochemistry	<input type="checkbox"/>
5	HbA1c, GLYCATED HEMOGLOBIN	Biochemistry	<input type="checkbox"/>
6	GYNAECOLOGY CONSULTATION -06 After report	Consultation	<input type="checkbox"/>
7	DIET CONSULTATION	General	<input type="checkbox"/>
8	BODY MASS INDEX (BMI)	General	<input type="checkbox"/>
9	ECG -10	Cardiology	<input type="checkbox"/>
10	THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)	Biochemistry	<input type="checkbox"/>
11	2 D ECHO -18	Cardiology	<input type="checkbox"/>
12	BLOOD GROUP ABO AND RH FACTOR	Blood Bank	<input type="checkbox"/>
13	X-RAY CHEST PA -09	X Ray Radiology	<input type="checkbox"/>
14	URINE GLUCOSE(FASTING)	Clinical Pathology	<input type="checkbox"/>
15	LBC PAP TEST- PAPSURE -06	Histopathology	<input type="checkbox"/>
16	FITNESS BY GENERAL PHYSICIAN After report	Consultation	<input type="checkbox"/>
17	GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL)	Biochemistry	<input type="checkbox"/>
18	GLUCOSE, FASTING	Biochemistry	<input type="checkbox"/>
19	ENT CONSULTATION -03	Consultation	<input type="checkbox"/>
20	LIPID PROFILE	Biochemistry	<input type="checkbox"/>
21	DENTAL CONSULTATION -15	Consultation	<input type="checkbox"/>
22	HEMOGRAM + PERIPHERAL SMEAR	Haematology	<input type="checkbox"/>
23	PERIPHERAL SMEAR	Haematology	<input type="checkbox"/>
24	COMPLETE URINE EXAMINATION	Clinical Pathology	<input type="checkbox"/>
25	RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)	Biochemistry	<input type="checkbox"/>
26	LIVER FUNCTION TEST (LFT)	Biochemistry	<input type="checkbox"/>

(27) Nivarnani -09

Wt - 60.2 kg
Ht - 160 cm
BP - 105/66 mmHg
P - 94 b/m
BMI - 23.5 kg/m²



Patient ID: CBEL_246452

Breast Health Report

Thermalytix[®] 360

General Details

Name:	SINGH POONAM	Centre:	Apollo Clinic Sarjapur
Age:	35	Report Generation Date:	Sep 16, 2024, 4:09 PM
Gender:	Female	Scan Date:	Sep 16, 2024, 11:59 AM

Clinical Details


LMP:	08/09/2024	Hormone Therapy:	None.
Pregnant/Lactating:	No.	Number of children breast-fed:	1
Patient Complaints:	None		
Cancer History:	No patient cancer history. No family cancer history.		
Surgeries:	None.		

Thermalytix Scores

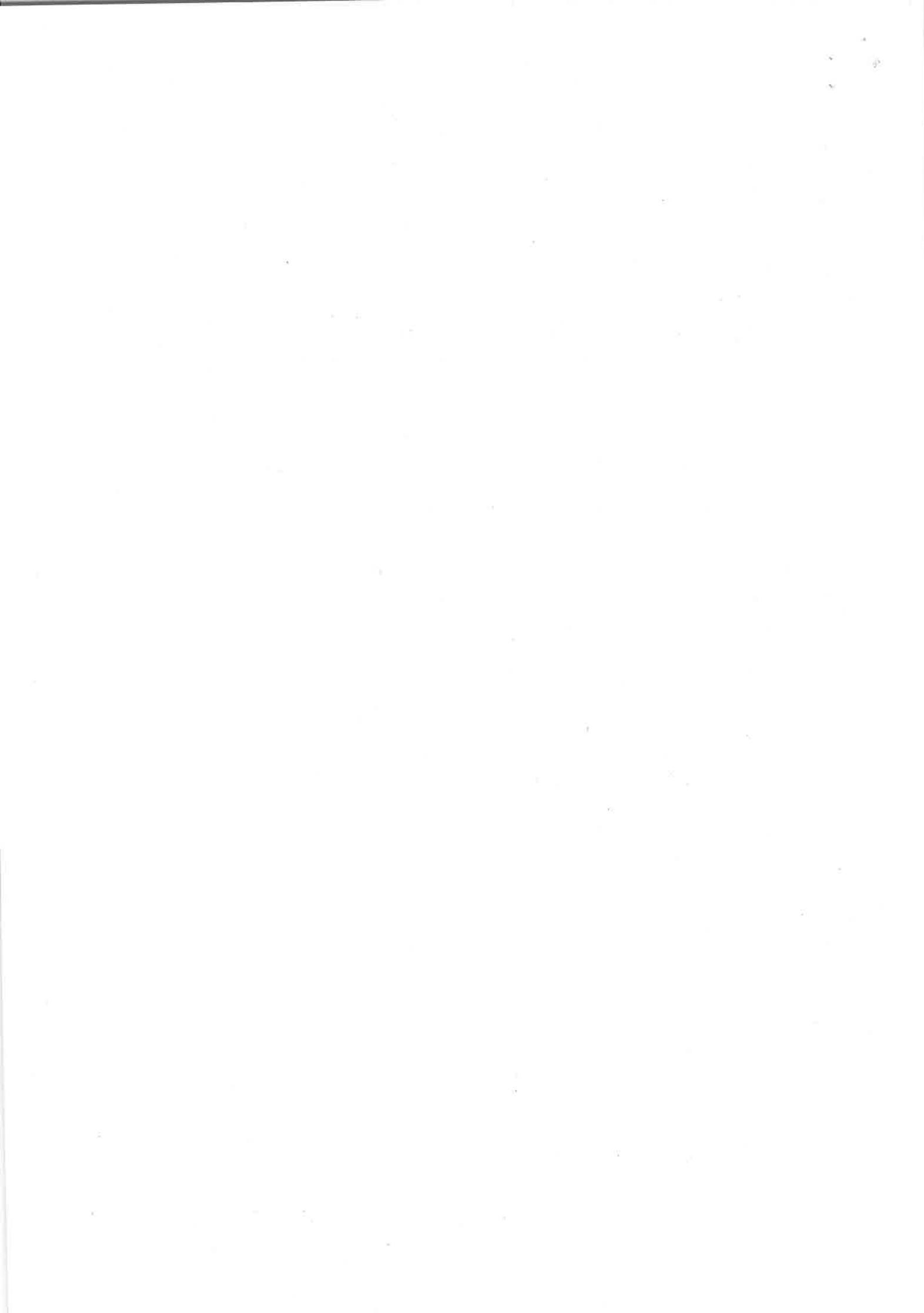
Body Temperature:	26.98 °C to 33.97 °C		
Hotspot Score:	0.2	Hotspot Symmetry:	0 %
Areolar Score:	0.02	Areolar Symmetry:	100 %
Vascular Score:	0.17	Ensemble Score:	0.02
B Score:	2		

Thermal Analysis

Thermal Parameters	Right Breast	Left Breast
Number of Hotspots	1	0
Extent	Hot spots seen in 1.5% of region of interest.	N/A
Hotspot Shape	3 Irregular, 2 distorted	N/A
Temperature	2.63°C Increase wrt surrounding region	N/A
Areolar Hotspot Detected	No	No
Lump Detected	N/A	N/A



Dr. N. V. ANAND
 CE, Thermography (IACET) (M)
 IMAGING SPECIALIST



Breast Health Report

Thermalytix[®] 360


Patient ID: CBEL_246452

Impression

- Right Breast Focal thermal pattern is noted. Slightly distorted and smooth margins are observed. Asymmetrical thermal pattern is observed.
- Left Breast No focal thermal increase is seen. Multiple Warm thermal patterns are noted.

Recommendation

Thermal patterns with low level of concern. Monthly self breast examination and annual screening with Thermalytix recommended.

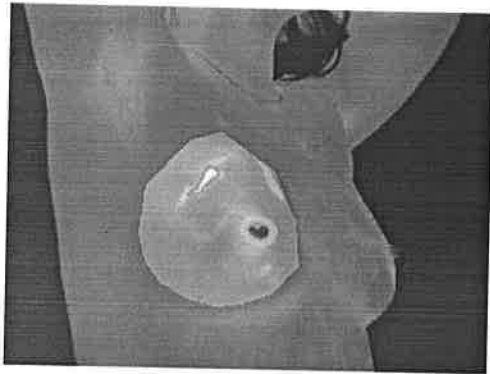


Dr. H.V. RAMPRAKASH MBBS, DMRD., MD.
Cll. Thermography (ACCT, USA)
IMAGING SPECIALIST

Breast Health Report
Thermalytix® 360

Patient ID: CBEL_246452

Annotated Thermal Images



Best View (Grayscale)

33.97°C

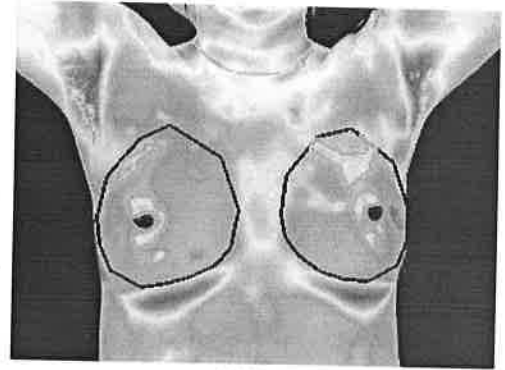


25.98°C

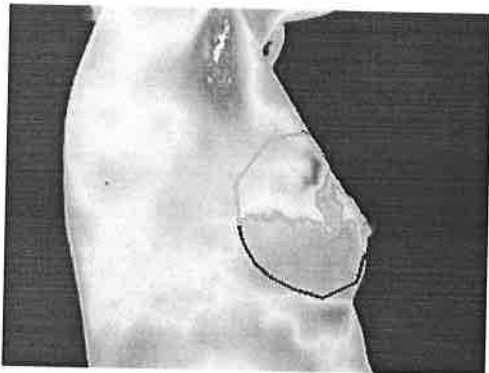
33.97°C



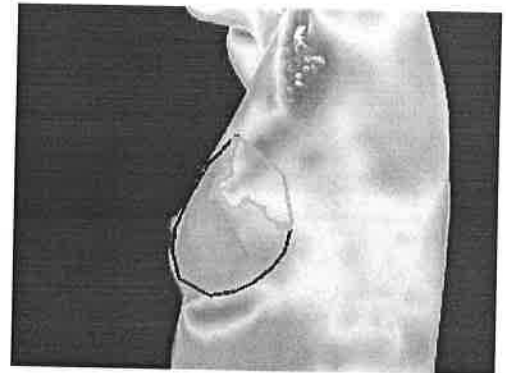
25.98°C



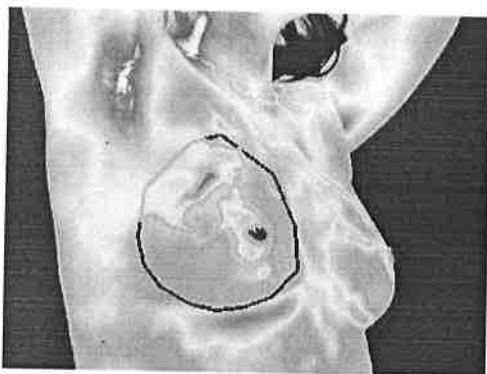
AP View



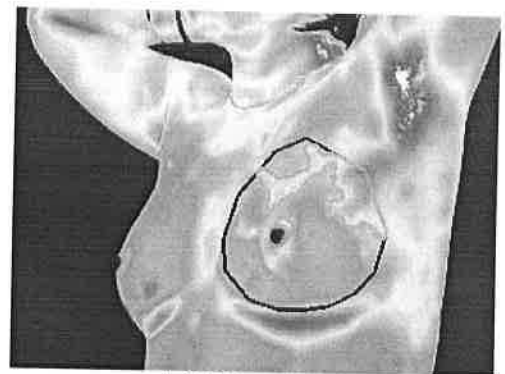
Right Lateral View



Left Lateral View



Right AP-Lateral View



Left AP-Lateral View

Dr. M.V. Sampathkumar
DR. M.V. SAMPATHKUMAR, MBBS, CHMD, (MD),
CL. Thermography (ACC), (IN)
IMAGING SPECIALIST



Breast Health Report

Thermalytix[®] 360

Patient ID: CBEL_246452

About Niramai

Indication of Use :

Thermalytix[®] is a medical device intended to be used for screening and early diagnosis of breast cancer in women above 18 years in a hospital, healthcare practitioner facilities, or in an environment where patient care is provided by healthcare personnel. It can also be used as an adjunct to screening mammography or breast ultrasound. Women who are found to be suspicious for malignancy by Thermalytix[®] should be referred for a confirmatory diagnostic test. Primary diagnostic and patient management decisions are made by a qualified healthcare professional.

Intended Use :

Thermalytix[®] is a medical device for the detection of breast lesions with suspected malignancy. The device is intended to assist a trained healthcare professional in risk assessment, screening, and early diagnosis of breast cancer in both asymptomatic and symptomatic women.

 No Touch

 No Pain

 No See

 No Radiation

This report has been generated using novel algorithm developed by Niramai which uses artificial intelligence for quantitative analysis of thermal images.

NIRAMAI is a health tech company with a mission to save lives by enabling early detection of breast cancer. Thermalytix[®] is an AI-based computer-aided diagnostic engine developed by Niramai that detects breast abnormalities in privacy aware manner.

Thermalytix[®] uses a high resolution thermal sensing device and an intelligent software solution for analysing thermal images for reliable, early and accurate breast cancer screening.

To know more about Thermalytix[®] <https://www.niramai.com/about/thermalytix/>



Fwd: Health Check up Booking Confirmed Request(22E33410),Package Code-
PKG10000377, Beneficiary Code-300332

Poonam Singh <poonamhs1989@gmail.com>

Mon 16-09-2024 10:42

To: Sarjapur Apolloclinic <sarjapur@apolloclinic.com>

Sent from my iPhone

Begin forwarded message:

From: Mediwheel <wellness@mediwheel.in>

Date: 14 September 2024 at 5:01:51 PM IST

To: poonamhs1989@gmail.com

Cc: customercare@mediwheel.in

Subject: Health Check up Booking Confirmed Request(22E33410),Package
Code-PKG10000377, Beneficiary Code-300332

011-41195959

Dear **MS. SINGH POONAM KUMARI,**

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

Hospital Package Name : Mediwheel Full Body Health Annual Plus Check
Name of Diagnostic/Hospital : Apollo Clinic - Sarjapur Road
Address of Diagnostic/Hospital : Apollo Clinic, #769, GYR Chambers, Opp South Indian Bank, Kaikondanahalli, Sarjapur Road -560034
City : Bangalore
State : Karnataka
Pincode : 560034
Appointment Date : 16-09-2024
Confirmation Status : Booking Confirmed
Preferred Time : 09:00 AM - 09:30 AM
Booking Status : Booking Confirmed

