

Patient Name	: Mrs.BOORLA SHARMILA SARASWATHI	Collected	: 07/Mar/2024 09:03AM
Age/Gender	: 30 Y 7 M 16 D/F	Received	: 07/Mar/2024 10:40AM
UHID/MR No	: CKON.0000428516	Reported	: 07/Mar/2024 11:53AM
Visit ID	: CKONOPV643159	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 00174721		

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	37.80	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.56	Million/cu.mm	3.8-4.8	Electrical Impedance
MCV	83	fL	83-101	Calculated
MCH	27.2	pg	27-32	Calculated
MCHC	32.8	g/dL	31.5-34.5	Calculated
R.D.W	14.3	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	7,300	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	63	%	40-80	Electrical Impedance
LYMPHOCYTES	30	%	20-40	Electrical Impedance
EOSINOPHILS	02	%	1-6	Electrical Impedance
MONOCYTES	05	%	2-10	Electrical Impedance
BASOPHILS	00	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	4599	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2190	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	146	Cells/cu.mm	20-500	Calculated
MONOCYTES	365	Cells/cu.mm	200-1000	Calculated
Neutrophil lymphocyte ratio (NLR)	2.1		0.78- 3.53	Calculated
PLATELET COUNT	194000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	08	mm at the end of 1 hour	0-20	Modified Westergren
PERIPHERAL SMEAR				
RBC NORMOCYTIC NORMOCHROMIC				
WBC WITHIN NORMAL LIMITS				
PLATELETS ARE ADEQUATE ON SMEAR				
NO HEMOPARASITES SEEN				

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Dr.Sukumar Sannidhi
MD(Path)
Consultant Pathologist



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Collected : 07/Mar/2024 09:03AM
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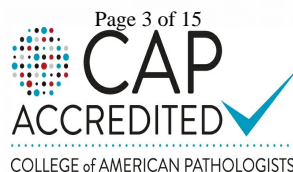
Test Name	Result	Unit	Bio. Ref. Range	Method
BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA				
BLOOD GROUP TYPE	B			Microplate technology
Rh TYPE	Negative			Microplate technology



Dr.SRINIVAS N.S.NORI
M.B.B.S,M.D(Pathology)
CONSULTANT PATHOLOGY

SIN No:HA06606354

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



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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	88	mg/dL	70-100	GOD - POD

Comment:

As per American Diabetes Guidelines, 2023

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

Note:

- 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.




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Patient Name	: Mrs.BOORLA SHARMILA SARASWATHI	Collected	: 07/Mar/2024 12:31PM
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UHID/MR No	: CKON.0000428516	Reported	: 07/Mar/2024 03:35PM
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DEPARTMENT OF BIOCHEMISTRY

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Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	96	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.



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DEPARTMENT OF BIOCHEMISTRY

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Test Name	Result	Unit	Bio. Ref. Range	Method
HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA				
HBA1C, GLYCATED HEMOGLOBIN	5.5	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	111	mg/dL		Calculated


Comment:

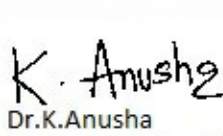
Reference Range as per American Diabetes Association (ADA) 2023 Guidelines:

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)


Dr. RAJESH BATTINA
 PhD.(Biochemistry)
 Consultant Biochemist


Dr.K.Anusha
 M.B.B.S.,M.D(Biochemistry)
 Consultant Biochemist



SIN No:EDT240027033

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

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DEPARTMENT OF BIOCHEMISTRY

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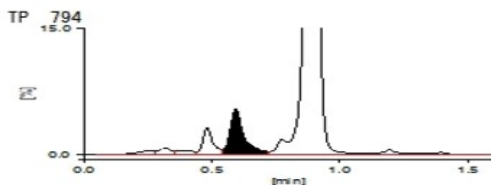
Chromatogram Report

V5.28 1 2024-03-07 12:51:10
 ID EDT240027033
 Sample No. 03070044 SL 0003 - 08
 Patient ID
 Name
 Comment

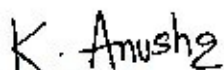
CALIB			
Name	%	Time	Area
A1A	0.4	0.25	7.35
A1B	0.5	0.32	8.86
F	0.5	0.38	7.93
LA1C+	1.8	0.48	30.02
SA1C	5.5	0.59	70.85
A0	93.0	0.89	1544.68
H-V0			
H-V1			
H-V2			

Total Area 1669.69

HbA1c 5.5 % **IFCC 37 mmol/mol**
 HbA1 6.5 % HbF 0.5 %




Dr. RAJESH BATTINA
 PhD.(Biochemistry)
 Consultant Biochemist



Dr.K.Anusha
 M.B.B.S,M.D(Biochemistry)
 Consultant Biochemist

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 COLLEGE of AMERICAN PATHOLOGISTS



SIN No:EDT240027033

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

Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)

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

Address:
 The Apollo Medical Centre, 2-20/6/A, Kothaguda X Roads, Kondapur,
 Hyderabad, Telangana, India - 500032

1860 500 7788
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APOLLO CLINICS NETWORK

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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Test Name	Result	Unit	Bio. Ref. Range	Method
LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	139	mg/dL	<200	CHE/CHO/POD
TRIGLYCERIDES	63	mg/dL	<150	Enzymatic
HDL CHOLESTEROL	55	mg/dL	>40	CHE/CHO/POD
NON-HDL CHOLESTEROL	84	mg/dL	<130	Calculated
LDL CHOLESTEROL	71.4	mg/dL	<100	Calculated
VLDL CHOLESTEROL	12.6	mg/dL	<30	Calculated
CHOL / HDL RATIO	2.53		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 400 mg/dL. When Triglycerides are more than 400 mg/dL LDL cholesterol is a direct measurement.



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Test Name	Result	Unit	Bio. Ref. Range	Method
LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.40	mg/dL	0.20-1.20	DIAZO METHOD
BILIRUBIN CONJUGATED (DIRECT)	0.20	mg/dL	0.0-0.3	Calculated
BILIRUBIN (INDIRECT)	0.20	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	13	U/L	<35	Visible with P-5-P
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	18.0	U/L	14-36	UV with P-5-P
ALKALINE PHOSPHATASE	106.00	U/L	38-126	p-nitrophenyl phosphate
PROTEIN, TOTAL	7.60	g/dL	6.3-8.2	Biuret
ALBUMIN	4.10	g/dL	3.5 - 5	Bromocresol Green
GLOBULIN	3.50	g/dL	2.0-3.5	Calculated
A/G RATIO	1.17		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:

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



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Test Name	Result	Unit	Bio. Ref. Range	Method
RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	0.50	mg/dL	0.5-1.04	Creatinine amidohydrolase
UREA	19.20	mg/dL	15-36	Urease
BLOOD UREA NITROGEN	9.0	mg/dL	8.0 - 23.0	Calculated
URIC ACID	2.90	mg/dL	2.5-6.2	Uricase
CALCIUM	8.60	mg/dL	8.4 - 10.2	Arsenazo-III
PHOSPHORUS, INORGANIC	4.10	mg/dL	2.5-4.5	PMA Phenol
SODIUM	137	mmol/L	135-145	Direct ISE
POTASSIUM	4.1	mmol/L	3.5-5.1	Direct ISE
CHLORIDE	102	mmol/L	98 - 107	Direct ISE
PROTEIN, TOTAL	7.60	g/dL	6.3-8.2	Biuret
ALBUMIN	4.10	g/dL	3.5 - 5	Bromocresol Green
GLOBULIN	3.50	g/dL	2.0-3.5	Calculated
A/G RATIO	1.17		0.9-2.0	Calculated



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Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL TRANSEPTIDASE (GGT) , SERUM	8.00	U/L	12-43	Glycylglycine Nitoranalide




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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)	1.26	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	8.53	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	0.940	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
High	High	High	High	Pituitary Adenoma; TSHoma/Thyrotropinoma



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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	DOUBLE INDICATOR
SP. GRAVITY	1.025		1.002-1.030	Bromothymol Blue
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
BLOOD	NEGATIVE		NEGATIVE	Peroxidase
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	LEUCOCYTE ESTERASE
CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY				
PUS CELLS	4-5	/hpf	0-5	Microscopy
EPITHELIAL CELLS	3-4	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY



Dr.Sukumar Sannidhi
MD(Path)
Consultant Pathologist



Patient Name : Mrs.BOORLA SHARMILA SARASWATHI	Collected : 07/Mar/2024 09:03AM
Age/Gender : 30 Y 7 M 16 D/F	Received : 07/Mar/2024 11:05AM
UHID/MR No : CKON.0000428516	Reported : 07/Mar/2024 11:46AM
Visit ID : CKONOPV643159	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 00174721	

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.Sukumar Sannidhi
MD(Path)
Consultant Pathologist



Patient Name : Mrs.BOORLA SHARMILA SARASWATHI	Collected : 07/Mar/2024 01:06PM
Age/Gender : 30 Y 7 M 16 D/F	Received : 07/Mar/2024 05:22PM
UHID/MR No : CKON.0000428516	Reported : 08/Mar/2024 05:34PM
Visit ID : CKONOPV643159	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 00174721	

DEPARTMENT OF CYTOLOGY


LBC PAP TEST (PAPSURE) , CERVICAL SAMPLE

	CYTOLOGY NO.	5076/24
I	SPECIMEN	
a	SPECIMEN ADEQUACY	ADEQUATE
b	SPECIMEN TYPE	CONVENTIONAL SMEAR
	SPECIMEN NATURE/SOURCE	CERVICAL SMEAR
c	ENDOCERVICAL-TRANSFORMATION ZONE	ABSENT
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 ***

Result/s to Follow:
PERIPHERAL SMEAR



Dr.A.Kalyan Rao
M.B.B.S,M.D(Pathology)
Consultant Pathologist

Page 15 of 15
CAP
ACCREDITED
COLLEGE of AMERICAN PATHOLOGISTS



SIN No:CS075850

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

Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)
Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016 |
www.apollohl.com | Email ID: enquiry@apollohl.com, Ph No: 040-4904 7777, Fax No: 4904 7744

Address:
The Apollo Medical Centre, 2-20/6/A, Kothaguda X Roads, Kondapur,
Hyderabad, Telangana, India - 500032

 **1860 500 7788**
www.apolloclinic.com

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Customer Pending Tests
PATIENT YET TO VISIT THE CENTER FOR FITNESS EVALUATION

Patient Name : Mrs. BOORLA SHARMILA SARASWATHI

Age/Gender : 30 Y/F

UHID/MR No. : CKON.0000428516

OP Visit No : CKONOPV643159

Sample Collected on :

Reported on : 07-03-2024 16:38

LRN# : RAD2258685

Specimen :

Ref Doctor : SELF

Emp/Auth/TPA ID : 00174721

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Both lung fields and hila are normal .

No obvious active pleuro-parenchymal lesion seen .

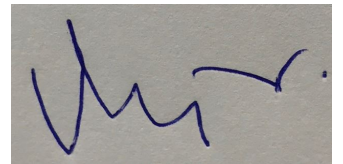
Both costophrenic and cardiophrenic angles are clear .

Both diaphragms are normal in position and contour .

Thoracic wall and soft tissues appear normal.

CONCLUSION :

No obvious abnormality seen



Dr. VIJAYA KUMAR M
MBBS, DMRD
Consultant Radiologist

Patient Name	: Mrs. BOORLA SHARMILA SARASWATHI	Age/Gender	: 30 Y/F
UHID/MR No.	: CKON.0000428516	OP Visit No	: CKONOPV643159
Sample Collected on	:	Reported on	: 07-03-2024 15:13
LRN#	: RAD2258685	Specimen	:
Ref Doctor	: SELF		
Emp/Auth/TPA ID	: 00174721		

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

Liver appears normal in size and mild increased in echotexture. No focal lesion is seen. PV and CBD normal. No dilatation of the intrahepatic biliary radicals.

Gall bladder is distended normal. No evidence of calculus. Wall thickness appears normal. No evidence of periGB collection. No evidence of focal lesion is seen.

Spleen appears normal. No focal lesion seen. Splenic vein appears normal.

Pancreas appears normal in echopattern. No focal/mass lesion/calcification. No evidence of peripancreatic free fluid or collection. Pancreatic duct appears normal.

Both the kidneys appear normal in size, shape and echopattern. Cortical thickness and CM differentiation are maintained. No calculus / hydronephrosis seen on either side.

Right kidney measures 102 x 40 mm. Left kidney measures 101 x 39 mm.

Urinary Bladder is well distended and appears normal. No evidence of any wall thickening or abnormality. No evidence of any intrinsic or extrinsic bladder abnormality detected.

Uterus appears normal in size measures 61 x 42 x 32mm, It shows normal shape & echo pattern. Endometrial echo-complex appears normal and measures 6 mm. No intra/extra uterine gestational sac seen.

Both ovaries appear normal in size, shape and echotexture.

Right ovary measures 26 x 16 mm. Left kidney measures 27 x 15 mm.

IMPRESSION:-

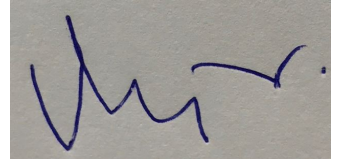
****MILD FATTY CHANGES IN LIVER.**

Suggest – clinical correlation.

Patient Name : Mrs. BOORLA SHARMILA SARASWATHI

Age/Gender : 30 Y/F

(The sonography findings should always be considered in correlation with the clinical and other investigation finding where applicable.) It is only a professional opinion, Not valid for medico legal purpose.



Dr. VIJAYA KUMAR M
MBBS, DMRD
Consultant Radiologist



Bill Of Supply

Name : Mrs. BOORLA SHARMILA SARASWATHI
 Age/Gender : 30 Y F
 Contact No : +918143293696
 Address : HYD
 UHID : CKON.0000428516
 Corporate Name : ARCOFEMI HEALTHCARE LIMITED
 Plan : ARCOFEMI MEDIWHEEL FEMALE AHC CREDIT PAN INDIA OP AGREEMENT

Bill No : CKON-OCR-122536
 Bill/Reg Date : 07.03.2024 08:59
 Referred by : SELF
 Center : Kondapur
 Emp No/Auth Code : 00174721

#	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

You can download your report from "www.apolloclinic.com" Enter user name as CKONOPV643159 and password as 396208

Please log on to AskApollo.com for booking Appointments

Apollo Health and Lifestyle Limited
 (CIN - U85110TG2000PLC115819)
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 www.apollohl.com | Email ID: enquiry@apollohl.com, Ph No: 040-4904 7777, Fax No: 4904 7744

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GSTIN: 365AADCA0733E1Z8

Address: #7-1-617/A, 615 & 616, Imperial Towers, 7th Floor, Ameerpet, Hyderabad, Telangana.



BOORLA SHARMILA SARASWATHI	30 year	Female
----------------------------	---------	--------

Note - Please note to not pay any amount at the center.

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.
- Bring urine sample in a container if possible (containers are available at the Health Check centre).
- Please bring all your medical prescriptions and previous health medical records with you.
- Kindly inform the health check reception in case if you have a history of diabetes and cardiac problems.

For Women:

- Pregnant Women or those suspecting are advised not to undergo any X-Ray test.
- It is advisable not to undergo any Health Check during menstrual cycle.

Request you to reach half an hour before the scheduled time.

In case of further assistance, Please reach out to Team Mediwheel.

Thanks,
Mediwheel Team
Please Download Mediwheel App

You have received this mail because your e-mail ID is registered with **Arcofemi Healthcare Limited** This is a system-generated e-mail please don't reply to this message.

Please visit to our Terms & Conditions for more informaion. [Click here to unsubscribe.](#)



భారత విశిష్ట గుర్తింపు ప్రాధికార సంస్థ

భారత ప్రభుత్వం
Unique Identification Authority of India
Government of India

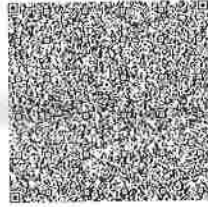
8జిఎన్/Enrolment No.: 0623/05282/10123

Download Date: 23/08/2019

To
బూర్లా శర్మిలా సరస్వతి
Boorla Sharmilla Saraswathi
C/O Boorla Poorna Chandar
6-6-223/A
sharma nagar
Karimnagar
Karimnagar
Karimnagar Telangana - 505001
8143293696

Generation Date: 28/02/2013

Signature Not Verified
Digital Signature
CERTIFICATE VERIFICATION
AUTHORITY (CA) AARAA 04
Date: 2019 08 23 18:00:25
IST



QR Code with Photograph

మీ ఆధార్ సంఖ్య / Your Aadhaar No. :

3329 7502 9562

VID : 9155 1704 3052 3023

నా ఆధార్, నా గుర్తింపు



భారత ప్రభుత్వం
Government of India



బూర్లా శర్మిలా సరస్వతి
Boorla Sharmilla Saraswathi
పుట్టిన తేదీ/DOB: 22/07/1993
సంఖ్య / FEMALE



3329 7502 9562

VID : 9155 1704 3052 3023

నా ఆధార్, నా గుర్తింపు



Government of India



సమాచారం

- ఆధార్ గుర్తింపుకు ధృవీకరణ, పౌరసత్వానికి కాదు.
- గుర్తింపుకు ధృవీకరణ ఆన్‌లైన్ అథెంటికేషన్ ద్వారా పొందవచ్చు.
- ఇది ఎలక్ట్రానిక్ పద్ధతిలో వ్రాయబడిన లేఖ.

INFORMATION

- **Aadhaar** is a proof of identity, not of citizenship.
- To establish identity, authenticate online.
- This is electronically generated letter.

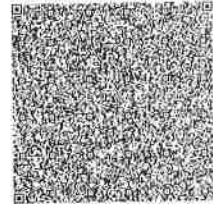
- ఆధార్ దేశమంతటా ఆమోదించబడుతుంది.
- ఆధార్ భవిష్యత్తులో ప్రభుత్వ మరియు ప్రభుత్వేతర సేవలు అందచేయడంలో సహాయ పడుతుంది.
- Aadhaar is valid throughout the country.
- Aadhaar will be helpful in availing Government and Non-Government services in future.



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Unique Identification Authority of India

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C/O బూర్లా పూర్ణా చందర్, 6-6-223/ఎ, శర్మ నగర్,
కరీంనగర్, కరీంనగర్,
తెలంగాణ - 505001

Address:
C/O Boorla Poorna Chandar, 6-6-223/A,
sharma nagar, Karimnagar, Karimnagar,
Telangana - 505001



QR Code with Photograph

3329 7502 9562

VID : 9155 1704 3052 3023



భారత ప్రభుత్వం

www.uidai.gov.in

Name: Mrs. BOORLA SHARMLA SARASWATHI
 Age/Gender: 30 Y/F
 Address: HYD
 Location: HYDERABAD, TELANGANA
 Doctor:
 Department: GENERAL
 Rate Plan: KONDAPUR_06042023
 Sponsor: ARCOFEMI HEALTHCARE LIMITED

MR No: CKON.0000428516
 Visit ID: CKONOPV643159
 Visit Date: 07-03-2024 08:59
 Discharge Date:
 Referred By: SELF

Vitals:

Date	Pulse (Beats/min)	B.P (mmHg)	Resp (Rate/min)	Temp (F)	Height (cms)	Weight (Kgs)	Body Fat Percentage (%)	Visceral Fat Level (%)	Body Age (Years)	BMI	Waist Circum (cms)	Hip (cms)	Waist (cms)	Waist & Hip Ratio	User
07-03-2024 12:28	75 Beats/min	110/80 mmHg	Rate/min	98.4 F	156 cms	76 Kgs	%	%	30 Years	31.23	cms	105 cms	93 cms	0.98	AHLL09485

Patient Name	: Mrs. BOORLA SHARMILA SARASWATHI	Age	: 30 Y/F
UHID	: CKON.0000428516	OP Visit No	: CKONOPV643159
Reported By:	: Dr. VENKATA RAYUDU NEKKANTI	Conducted Date	: 07-03-2024 14:26
Referred By	: SELF		

ECG REPORT

Observation :-

1. Normal Sinus Rhythm.
2. Heart rate is 75 beats per minutes.
3. No pathological Q wave or S-T,T changes seen.
4. Normal P,Q,R,S,T waves and axis.
5. No evidence of chamber, hypertrophy or enlargement seen

Impression:

NORMAL SINUS RHYTHM.

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



Dr. VENKATA RAYUDU NEKKANTI

Apollo Health and Lifestyle Limited

(CIN - U85110TG2000PLC046089) Regd. Office: 7-1-617/A, 7th Floor, Imperial Towers, Ameerpet, Hyderabad-500016, Telangana.


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Technician:
Ordering Ph:
Referring Ph:
Attending Ph:

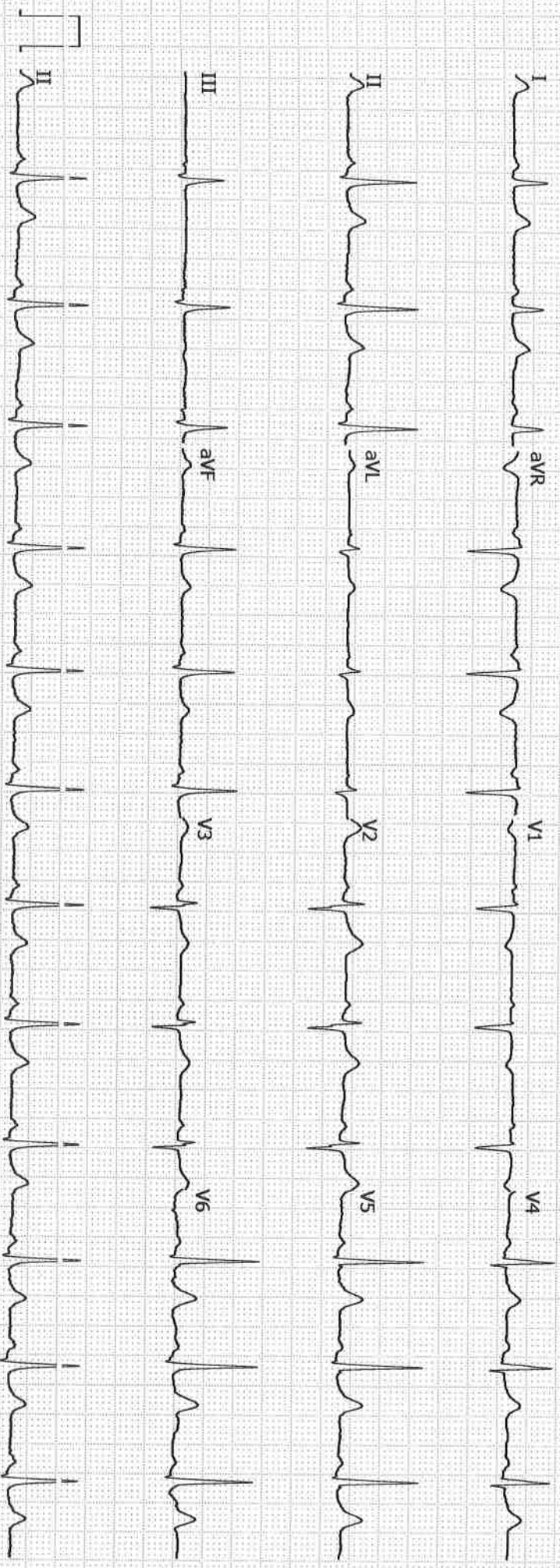
Location:
Order Number:
Visit:
Indication:
Medication 1:
Medication 2:
Medication 3:

Room:

75 bpm
-- / -- mmHg

QRS : 84 ms
QT / QTcbaz : 392 / 437 ms
PR : 134 ms
P : 112 ms
RR / pp : 796 / 800 ms
P / QRS / T : 36 / 60 / 39 degrees
Normal sinus rhythm
Normal ECG

Signature



Patient Name : Mrs. BOORLA SHARMILA SARASWATHI
UHD : CKON.0000428516
Conducted By: : Dr. RAMU ANKAM
Referred By : SELF
Age : 30 Y/F
OP Visit No : CKONOPV643159
Conducted Date : 07-03-2024 15:45

2D-ECHO WITH COLOUR DOPPLER

Dimensions:

Ao (ed)	3.0 CM
LA (es)	3.1 CM
LVID (ed)	4.3 CM
LVID (es)	2.7 CM
IVS (Ed)	1.1 CM
LVPW (Ed)	1.1 CM
EF	65.00%
%FD	35.00%
MITRAL VALVE :	NORMAL
AML	NORMAL
PML	NORMAL
AORTIC VALVE	NORMAL
TRICUSPID VALVE	NORMAL
RIGHT VENTRICLE	NORMAL
INTER ATRIAL SEPTUM	INTACT
INTER VENTRICULAR SEPTUM	INTACT
AORTA	NORMAL
RIGHT ATRIUM	NORMAL
LEFT ATRIUM	NORMAL
Pulmonary Valve	NORMAL
PERICARDIUM	NORMAL
LEFT VENTRICLE:	

NO REGIONAL WALL MOTION ABNORMALITY

COLOUR AND DOPPLER STUDIES

PFV: 0:8

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Centre
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E: 0.9 m/s
A: 0.6 m/s

IMPRESSION:-
NORMAL CHAMBERS
NO RWMA
GOOD LV /RV FUNCTION
NO MR/ AR/ TR/ PAH
NO CLOT/ PE

Dr. RAMU
ANKAM

Apollo Health and Lifestyle Limited

(CIN - U85110TG2000PLC046089) Regd. Office: 7-1-617/A, 7th Floor, Imperial Towers, Ameerpet, Hyderabad-500016, Telangana.

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Telangana: Hyderabad (AS Rao Nagar | Chanda Nagar | Jubilee Hills | Kondapur | Nallakunta | Nizampet | SR Nagar | Vanasthalipuram)

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TO BOOK AN APPOINTMENT

1860 500 7788

Name	Mrs B sharmida	Date	7/8/24
Age	30y	UHID No.	428516
<input type="checkbox"/> Male	<input checked="" type="checkbox"/> Female	Ref. Physician	
Ref. Diagnosis	Dr Ramu.A		

Echocardiogram Report

Echogenicity Poor Adequate Good Ht. _____ Wt. _____ BSA _____

DIMENSIONS		NORMAL		DIMENSIONS		NORMAL	
Ao (ed)	3.0	cm	(1.5cm / m2)	IVS (Ed)	1.1	cm	(0.6 - 1.2 cm)
LA (es)	3.1	cm	(1.5cm / m2)	LVPW (Ed)	1.1	cm	(0.6 - 1.1 cm)
RVID (ed)	3.2	cm	(0.9 cm / m2)	EF	65		(0.62 - 0.85)
LVID (ed)	4.3	cm	(2.6 - 3.4 cm / m2)	% FD	35		(2.8% - 42%)
LVID (es)	2.7						

MORPHOLOGICAL DATA

Mitral Valve	AML	2	Interatrial septum	2
	PML	2	Interventricular septum	2
Aortic Valve		2	Pulmonary artery	2
Tricuspid valve		2	Aorta	2
Pulmonary valve		2	Right atrium	2
Right ventricle		2	Left atrium	2

GLASS PRESCRIPTION

DATE: 7/3/24

UHID: 428576

PATIENT NAME: Mrs. Boorla Sharmila
Saraswathi

8143293696.
AGE/ GENDER:
30y F

	UAVA	SPH	CYL	AXIS	ADD	BCVA
OD	6/12 6/6	5.00	—	—	—	2/6
OS	6/12 6/6	5.00	—	—	—	2/6

COLOR VISION : B.E normal

INSTRUCTIONS: B.E vision abnormal

Single Vision BRPL


SIGNATURE

Apollo Health and Lifestyle Limited

(CIN: U05110TG2000PLC046000) Regd. Office: 7-1-617/A, 7th Floor, Imperial Towers, Ameerpet, Hyderabad-500016, Telangana. | Email ID: enquiry@apollohl.com

APOLLO CLINICS NETWORK TELANGANA & AP

Andhra Pradesh: Tirupati (Sankarabadi, Jubilee Hills, Peshawar, Marikonda | Nallakunta | Nizampet | Uppal)

Telangana: Hyderabad (AS Rao Nagar | Chanda Nagar | Jubilee Hills | Kondapur | Nallakunta | Nizampet | SR Nagar | Vanasthalipuram)

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1 360 500 77