


Patient Name : Mrs.JAMUNA GUGULOTH
Age/Gender : 31 Y 6 M 14 D/F
UHID/MR No : CASR.0000189445
Visit ID : CASROPV230427
Ref Doctor : Self
Emp/Auth/TPA ID : 22S30432

Collected : 10/Aug/2024 09:33AM
Received : 10/Aug/2024 02:36PM
Reported : 10/Aug/2024 03:56PM
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	12.5	g/dL	12.5-15	Spectrophotometer
PCV	37.40	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.65	Million/cu.mm	3.8-4.8	Electrical Impedence
MCV	80.5	fL	83-101	Calculated
MCH	27	pg	27-32	Calculated
MCHC	33.5	g/dL	31.5-34.5	Calculated
R.D.W	17	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	5,310	cells/cu.mm	4000-10000	Electrical Impedence
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	52	%	40-80	Flow cytometry
LYMPHOCYTES	37	%	20-40	Flow cytometry
EOSINOPHILS	3	%	1-6	Flow cytometry
MONOCYTES	7	%	2-10	Flow cytometry
BASOPHILS	1	%	0-2	Flow cytometry
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	2761.2	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	1964.7	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	159.3	Cells/cu.mm	20-500	Calculated
MONOCYTES	371.7	Cells/cu.mm	200-1000	Calculated
BASOPHILS	53.1	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	1.41		0.78- 3.53	Calculated
PLATELET COUNT	270000	cells/cu.mm	150000-410000	Electrical impedence
ERYTHROCYTE SEDIMENTATION RATE (ESR)	7	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 IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE				



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

SIN No: ASR240801191



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

SIN No:ASR240801191

Apollo Health and Lifestyle Limited, Apollo Health & Lifestyle Ltd, Global Reference Laboratory Hyderabad

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

A-12, # 1-9-71A/12B, Rishab Heights, Rukminipuri Housing Colony,
A S Rao Nagar, Hyderabad, Telangana, India - 500062




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Age/Gender : 31 Y 6 M 14 D/F	Received : 10/Aug/2024 02:36PM
UHID/MR No : CASR.0000189445	Reported : 10/Aug/2024 05:44PM
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DEPARTMENT OF HAEMATOLOGY

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


Dr.KASULA SIDDARTHA
M.B.B.S,DNB(Pathology)
Consultant Pathologist

SIN No:ASR240801191



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

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APOLLO CLINICS NETWORK
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Uttar Pradesh: Ghaziabad (Indrapuram) Gujarat: Ahmedabad (Satellite) Punjab: Amritsar (Court Road) Haryana: Faridabad (Railway Station Road)

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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	75	mg/dL	70-100	Hexokinase

Comment:

As per American Diabetes Guidelines, 2023

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

Note:

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

Maruthi
Dr.E.Maruthi Prasad
PhD (Biochemistry)
Consultant biochemist

Sujana
Dr.Matta Sujana Reddy
M.B.B.S.,M.D(Biochemistry)
Consultant Biochemist



Patient Name : Mrs.JAMUNA GUGULOTH	Collected : 10/Aug/2024 12:49PM
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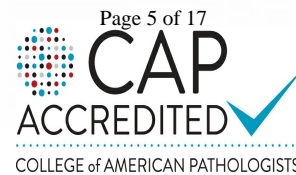
Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	82	mg/dL	70-140	HEXOKINASE

Comment:

It is recommended that FBS and PPBS should be interpreted with respect to their Biological reference ranges and not with each other.
Conditions which may lead to lower postprandial glucose levels as compared to fasting glucose levels may be due to reactive hypoglycemia, dietary meal content, duration or timing of sampling after food digestion and absorption, medications such as insulin preparations, sulfonylureas, amylin analogues, or conditions such as overproduction of insulin.



Dr. Matta Sujana Reddy
M.B.B.S, M.D (Biochemistry)
Consultant Biochemist



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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	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

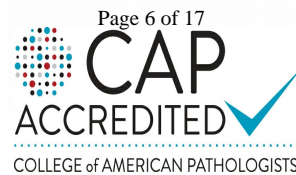
A: HbF >25%

B: Homozygous Hemoglobinopathy.

(Hb Electrophoresis is recommended method for detection of Hemoglobinopathy)

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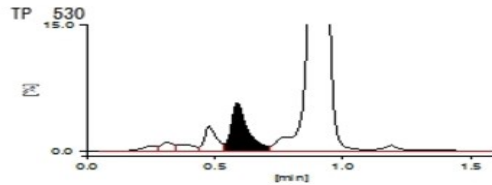
Chromatogram Report

V5.28 1 2024-08-10 16:12:11
 ID ASR240801190
 Sample No. 08100189 SL 0019 - 06
 Patient ID
 Name
 Comment

CALIB Name	%	Time	Area
A1A	0.5	0.23	8.87
A1B	0.6	0.31	12.05
F	0.6	0.37	11.73
LA1C+	1.7	0.48	31.25
SA1C	5.8	0.59	81.53
A0	92.8	0.90	1728.18
H-V0			
H-V1			
H-V2			

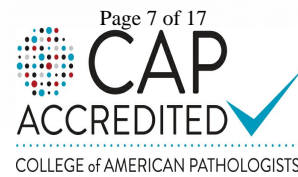
Total Area 1873.61

HbA1c 5.8 % **IFCC 39 mmol/mol**
HbA1 6.9 % **HbF 0.6 %**



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Test Name	Result	Unit	Bio. Ref. Interval	Method
LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.80	mg/dL	0.3–1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.14	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.66	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	14	U/L	<35	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	18.0	U/L	<35	IFCC
AST (SGOT) / ALT (SGPT) RATIO (DE RITIS)	1.3		<1.15	Calculated
ALKALINE PHOSPHATASE	80.00	U/L	30-120	IFCC
PROTEIN, TOTAL	7.41	g/dL	6.6-8.3	Biuret
ALBUMIN	4.86	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.55	g/dL	2.0-3.5	Calculated
A/G RATIO	1.91		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 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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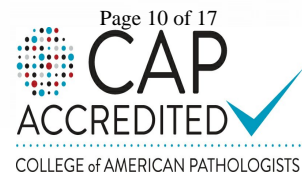
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PhD (Biochemistry)

Sujana...
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Test Name	Result	Unit	Bio. Ref. Interval	Method
RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	0.79	mg/dL	0.66 - 1.09	Modified Jaffe, Kinetic
UREA	25.30	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	11.8	mg/dL	8.0 - 23.0	Calculated
URIC ACID	4.45	mg/dL	2.6-6.0	Uricase PAP
CALCIUM	10.04	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	3.25	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	138	mmol/L	136-146	ISE (Indirect)
POTASSIUM	4.4	mmol/L	3.5-5.1	ISE (Indirect)
CHLORIDE	107	mmol/L	101-109	ISE (Indirect)
PROTEIN, TOTAL	7.41	g/dL	6.6-8.3	Biuret
ALBUMIN	4.86	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.55	g/dL	2.0-3.5	Calculated
A/G RATIO	1.91		0.9-2.0	Calculated

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This test has been performed at Apollo Health & Lifestyle Ltd, Global Reference Laboratory, Hyderabad
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Test Name	Result	Unit	Bio. Ref. Interval	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	21.00	U/L	<38	IFCC



Dr. Matta Sujana Reddy
M.B.B.S, M.D (Biochemistry)
Consultant Biochemist



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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)	1.05	ng/mL	0.87-1.78	CLIA
THYROXINE (T4, TOTAL)	8.97	μg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	1.518	μIU/mL	0.38-5.33	CLIA

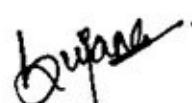
Comment:

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.E.Maruthi Prasad
PhD (Biochemistry)


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Ref Doctor	: Self	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 22S30432		

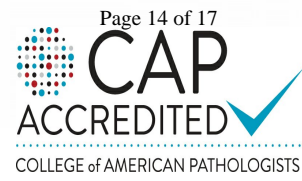
DEPARTMENT OF IMMUNOLOGY

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

High	High	High	High	Pituitary Adenoma; TSHoma/Thyrotropinoma
------	------	------	------	------------------------------------------

Maruthi...
Dr.E.Maruthi Prasad
PhD (Biochemistry)
Consultant biochemist

Sujana...
Dr.Matta Sujana Reddy
M.B.B.S.,M.D(Biochemistry)
Consultant Biochemist



Patient Name : Mrs.JAMUNA GUGULOTH	Collected : 10/Aug/2024 09:33AM
Age/Gender : 31 Y 6 M 14 D/F	Received : 10/Aug/2024 04:39PM
UHID/MR No : CASR.0000189445	Reported : 10/Aug/2024 05:57PM
Visit ID : CASROPV230427	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22S30432	

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	Scattering of light
TRANSPARENCY	HAZY		CLEAR	Scattering of light
pH	7.0		5-7.5	Bromothymol Blue
SP. GRAVITY	1.007		1.002-1.030	Dipstick
BIOCHEMICAL EXAMINATION				
URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE		NEGATIVE	GOD-POD
URINE BILIRUBIN	NEGATIVE		NEGATIVE	Diazonium Salt
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	Sodium nitro prusside
UROBILINOGEN	NORMAL		NORMAL (0.1-1.8mg/dl)	Diazonium salt
NITRITE	NEGATIVE		NEGATIVE	Sulfanilic acid
LEUCOCYTE ESTERASE	POSITIVE+++		NEGATIVE	Diazonium salt
CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY				
PUS CELLS	44	/hpf	0-5	Microscopy
EPITHELIAL CELLS	12	/hpf	< 10	Microscopy
RBC	2	/hpf	0-2	Microscopy
CASTS	ABSENT	/lpf	0-2 Hyaline Cast	Microscopy
CRYSTALS	ABSENT	/hpf	Occasional-Few	Microscopy

Comment:

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

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



Dr.KASULA SIDDARTHA
M.B.B.S,DNB(Pathology)
Consultant Pathologist

SIN No:ASR240801188



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

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

A-12, # 1-S-71/A/12/B, Rishab Heights, Rukminipuri Housing Colony,
A S Rao Nagar, Hyderabad, Telangana, India - 500062

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)



Patient Name	: Mrs.JAMUNA GUGULOTH	Collected	: 10/Aug/2024 09:33AM
Age/Gender	: 31 Y 6 M 14 D/F	Received	: 10/Aug/2024 04:38PM
UHID/MR No	: CASR.0000189445	Reported	: 10/Aug/2024 06:29PM
Visit ID	: CASROPV230427	Status	: Final Report
Ref Doctor	: Self	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 22S30432		

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



Dr.KASULA SIDDARTHA
M.B.B.S,DNB(Pathology)
Consultant Pathologist

SIN No:ASR240801193



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

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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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A S Rao Nagar, Hyderabad, Telangana, India - 500062



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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)

Patient Name : Mrs.JAMUNA GUGULOTH	Collected : 10/Aug/2024 07:16PM
Age/Gender : 31 Y 6 M 14 D/F	Received : 11/Aug/2024 06:03PM
UHID/MR No : CASR.0000189445	Reported : 14/Aug/2024 09:11PM
Visit ID : CASROPV230427	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22S30432	

DEPARTMENT OF CYTOLOGY

LBC PAP SMEAR , CERVICAL SAMPLE

	CYTOLOGY NO.	17907/24
I	SPECIMEN	
a	SPECIMEN ADEQUACY	ADEQUATE
b	SPECIMEN TYPE	CONVENTIONAL SMEAR
	SPECIMEN NATURE/SOURCE	CERVICAL SMEAR
c	ENDOCERVICAL-TRANSFORMATION ZONE	PRESENT WITH ENDOCERVICAL CELLS
d	COMMENTS	SATISFACTORY FOR EVALUATION
II	MICROSCOPY	Superficial and intermediate squamous epithelial cells with benign morphology. Inflammatory cells, predominantly neutrophils. Negative for intraepithelial lesion/ malignancy.
III	RESULT	
a	EPITHEIAL CELL	
	SQUAMOUS CELL ABNORMALITIES	NOT SEEN
	GLANDULAR CELL ABNORMALITIES	NOT SEEN
b	ORGANISM	NIL
IV	INTERPRETATION	NEGATIVE FOR INTRAEPITHELIAL LESION OR MALIGNANCY

Pap Test is a screening test for cervical cancer with inherent false negative results. Regular screening and follow-up is recommended (Bethesda-TBS-2014) revised

*** End Of Report ***

Result/s to Follow:
PERIPHERAL SMEAR



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

Page 17 of 17
CAP
ACCREDITED
COLLEGE of AMERICAN PATHOLOGISTS



SIN No:ASR240801276

Apollo Health and Lifestyle Limited, Global Reference Laboratory Hyderabad
Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016 | A-12, # 1-9-71/A/12/B, Rishabh Heights, Rukminipuri Housing Colony, A S Rao Nagar, Hyderabad, Telangana, India - 500062

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

Patient Name : Mrs.JAMUNA GUGULOTH
Age/Gender : 31 Y 6 M 14 D/F
UHID/MR No : CASR.0000189445
Visit ID : CASROPV230427
Ref Doctor : Self
Emp/Auth/TPA ID : 22S30432

Collected : 10/Aug/2024 07:16PM
Received : 11/Aug/2024 06:03PM
Reported : 14/Aug/2024 09:11PM
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.

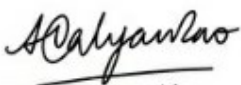
Laboratories not be responsible for any interpretation whatsoever.

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


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SIN No:ASR240801276

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

Patient Name	: Mrs. Jamuna GUGULOTH	Age	: 31Yrs 6Mths 17Days
UHID	: CASR.0000189445	OP Visit No.	: CASROPV230427
Printed On	: 12-08-2024 06:25 AM	Advised/Pres Doctor	: --
Department	: Radiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employeer Id	: 22S30432		

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

Clinical history :- Health Checkup

Liver appears normal in size with increased echotexture. No focal lesion is seen. PV and CBD normal.

No dilatation of the intrahepatic biliary radicals.

Gall bladder is well distended. 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 echo pattern. No focal/mass lesion/calcification. No evidence of peripancreatic free fluid or collection. Pancreatic duct appears normal.

Right kidney : 98x42 mm Left kidney : 100x44

Both kidneys are normal in size and shows tiny solid concretions in the lower poles

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

Uterus:63x48x57 mm Retroverted Mildly bulky normal in size. It shows normal shape & echo pattern.

Endometrial echo-complex appears normal and measures **6 mm**.

Right ovary : 24x20 mm Left ovary : 26x21 mm

appear normal in size, shape and echotexture.
No evidence of any adnexal pathology noted.

IMPRESSION:- Mildly Bulky Uterus.

Retroverted Uterus.

Tiny Solid Concretions In The Lower Poles Of Both Kidneys.

Grade I Fatty Liver.

Suggested clinical correlation and further evaluation if necessary.

---End Of The Report---



Dr.K PRAVEEN BABU

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Radiology

Patient Name	: Mrs. Jamuna GUGULOTH	Age	: 31Yrs 6Mths 17Days
UHID	: CASR.0000189445	OP Visit No.	: CASROPV230427
Printed On	: 11-08-2024 07:37 AM	Advised/Pres Doctor	: --
Department	: Cardiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employer Id	: 22S30432		

DEPARTMENT OF CARDIOLOGY

Observation :-

1. Sinus Rhythm.
2. Heart rate is 66 beats per minutes.
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.

---End Of The Report---



DR. MRINAL .

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Cardiology

Patient Name	: Mrs. Jamuna GUGULOTH	Age	: 31Yrs 6Mths 17Days
UHID	: CASR.0000189445	OP Visit No.	: CASROPV230427
Printed On	: 12-08-2024 08:48 AM	Advised/Pres Doctor	: --
Department	: Cardiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employeer Id	: 22S30432		

DEPARTMENT OF CARDIOLOGY

TMT (STRESS TEST)

DIMENSIONS;

LOW PROBABILITY OF INDUCIBLE ISCHEMIA.

---End Of The Report---



DR. MRINAL .

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Cardiology

Patient Name	: Mrs. Jamuna GUGULOTH	Age	: 31Yrs 6Mths 16Days
UHID	: CASR.0000189445	OP Visit No.	: CASROPV230427
Printed On	: 11-08-2024 07:09 AM	Advised/Pres Doctor	: --
Department	: Radiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employer Id	: 22S30432		

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA VIEW

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

For clinical correlation and further evaluation if necessary.

---End Of The Report---



Dr.K PRAVEEN BABU
DNB Radiodiagnosis
47491
Radiology

Asraonagar Apolloclinic

From: noreply@apolloclinics.info
Sent: Wednesday, July 31, 2024 4:38 PM
To: raviteja.wgl@gmail.com
Cc: Asraonagar Apolloclinic; Jyothsna Thaluka; Syamsunder M
Subject: Your appointment is confirmed



Dear Jamuna GUGULOTH,

Greetings from Apollo Clinics,

Your corporate health check appointment is confirmed at **A.S. RAO NAGAR clinic** on **2024-08-10** at **07:00-07:15**.

Payment Mode	
Corporate Name	ARCOFEMI HEALTHCARE LIMITED
Agreement Name	[ARCOFEMI MEDIWHEEL FEMALE AHC CREDIT PAN INDIA OP AGREEMENT]
Package Name	[ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324]

"Kindly carry with you relevant documents such as HR issued authorization letter and or appointment confirmation mail and or valid government ID proof and or company ID card and or voucher as per our agreement with your company or sponsor."

Note: Video recording or taking photos inside the clinic premises or during camps is not allowed and would attract legal consequences.

Note: Also once appointment is booked, based on availability of doctors at clinics tests will happen, any pending test will happen based on doctor availability and clinics will be updating the same to customers.

Instructions to be followed for a health check:

1. Please ensure you are on complete fasting for 10-To-12-Hours prior to check.
2. During fasting time do not take any kind of alcohol, cigarettes, tobacco or any other liquids (except Water) in the morning. If any medications taken, pls inform our staff before health check.
3. Please bring all your medical prescriptions and previous health medical records with you.
4. Kindly inform our staff, if you have a history of diabetes and cardiac problems.

For Women:

1. Pregnant women or those suspecting are advised not to undergo any X-Ray test.
2. It is advisable not to undergo any health check during menstrual cycle.

For further assistance, please call us on our Help Line #: 1860 500 7788.

Clinic Address: A-12, # 1-9-71/A/12/B, RISHAB HEIGHTS, RUKMINIPURI HOUSING COLONY, A.S.RAO NAGAR.

Contact No: (040) 48522317.

P.S: Health Check-Up may take 4 - 5hrs for completion on week days & 5 - 6hrs on Saturdays, kindly plan accordingly, Doctor Consultation will be completed after all the Reports are ready.

Warm Regards,
Apollo Clinic

ation No.
ation
Pres Doctor

భారత ఎన్నికల సంఘము
ELECTION COMMISSION OF INDIA
ఓటరు ఫోటో గుర్తింపు కార్డు - ELECTOR PHOTO IDENTITY CARD

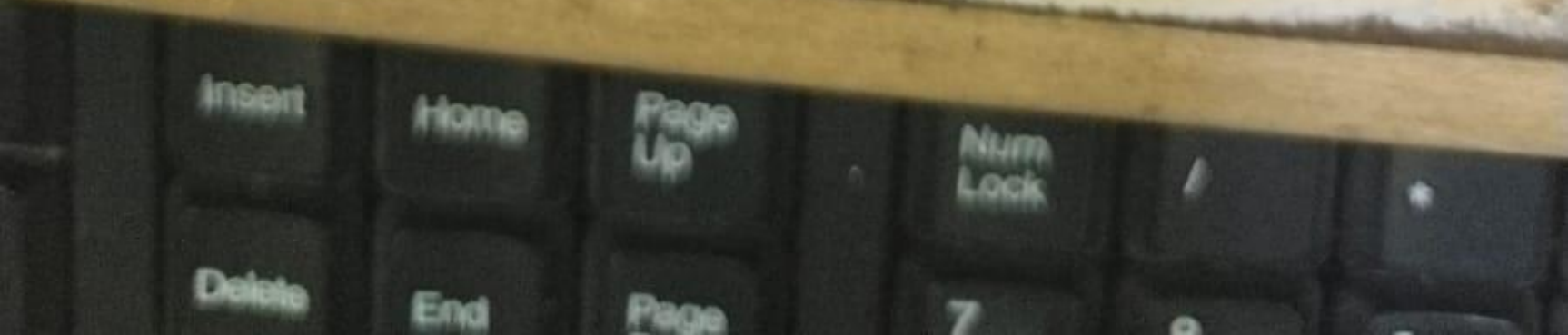
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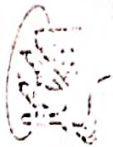


పేరు: జమున
Name: Jamuna Guguloth

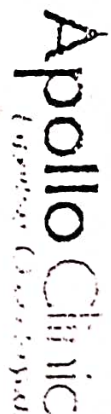
భర్త పేరు: రవి
Husband Name: Ravi Guguloth

भारत निर्वाचन आयोग





Apollo Clinic
PHYSICAL EXAMINATION FORM



Date 10/8/24

UHID 189455

Name Mrs. Jaramuna. G

Age 31 F

Height 153 cms

Weight 67 Kgs

Chest Measurement (in)cm (out)cm

Waist cm HIP

Pulse 69 Bt/Min BMI 29 kgs/cm²

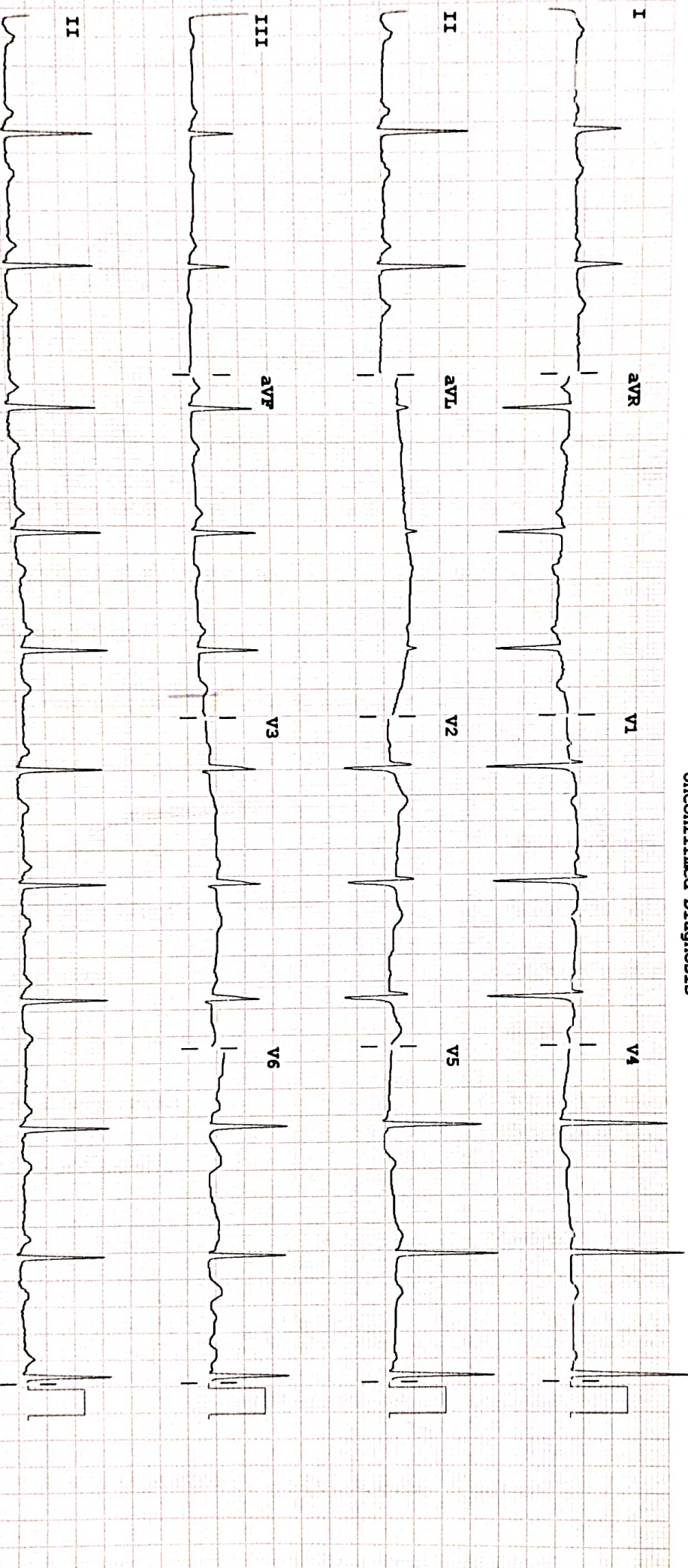
BP 100/60 mm/Hg SPO2 93 %

Apollo Clinic, A.S. Rao Nagar.

Rate	66	Sinus rhythm
RR	909	Baseline wander in lead(s) I, III, aVL, aVF, V5, V6
PR	166	
QRSD	89	
QT	396	
QTcB	415	
QTcF	409	
--AXIS--		
P	70	
QRS	54	
T	44	

12 Lead; Standard Placement

Unconfirmed Diagnosis



Device:

Speed: 25 mm/sec

Limb: 10 mm/mV

Chest: 10.0 mm/mV

REORDER M3709A

F 50~ 0.15- 40 Hz

PH100B CL

P?

DENTAL EXAMINATION FORM



Date: 10/08/2024

Patient ID: _____ MHC

Patient Name: Jamuna Guguloth Age: 31 Sex: Male Female

Chief Complaint: Pt. Came for general dental check up.

Medical History: NRH

Drug Allergy: NRH

Medication currently taken by the Guest: -

Initial Screenign Findings:

Dental Caries: -

Missing Teeth: -

Impacted Teeth: -

Attrition / Abrasion: -

Bleeding: -

Pockets / Recession: -

Calculus / Stains: -

Mobility: -

Restored Teeth: -

Non - restorable Teeth for extraction / Root Stumps: -

Malocclusion: -

Others: -

Advice:- Advised regular dental checkup every 6 months once.

Doctor Name & Signature: Dr. Kabir Solvi.

POWER PRESCRIPTION

NAME: Jamuna

GENDER: M/F

DATE: 10/8/24

AGE: 31

UHID:

RIGHT EYE

	SPH	CYL	AXIS	VISION
DISTANCE	—	plan		6/6
NEAR	—	—		NI

LEFT EYE

	SPH	CYL	AXIS	VISION
DISTANCE	—	pl		6/6
NEAR	—	—		NI

COLOUR VISION : Normal

DIAGNOSIS : —

OTHER FINDINGS : —

INSTRUCTIONS : —

Anel
SIGNATURE