


Patient Name	: Ms.BEBI SINGH	Collected	: 14/Sep/2024 10:44AM
Age/Gender	: 52 Y 8 M 13 D/F	Received	: 14/Sep/2024 12:36PM
UHID/MR No	: CAOP.0000001232	Reported	: 14/Sep/2024 02:08PM
Visit ID	: CAOPOPV01618	Status	: Final Report
Ref Doctor	: Self	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 22S33047		

**DEPARTMENT OF HAEMATOLOGY**

**PERIPHERAL SMEAR , WHOLE BLOOD EDTA**

RBCs	Show mild anisocytosis, are predominantly Normocytic Normochromic .
WBCs	Normal in number and morphology Differential count is within normal limits
Platelets	Adequate in number, verified on smear
	No Hemoparasites seen in smears examined.
Impression	Normal peripheral smear study
Advice	Clinical correlation



**Dr. Shivangi Chauhan**  
M.B.B.S., M.D (Pathology)  
Consultant Pathologist



This test has been performed at Apollo Health and Lifestyle Ltd - RRL ASHOK NAGAR

SIN No: AOP240900223

**Apollo Health and Lifestyle Limited** (CIN - U85110TG2000PLC115819)

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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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**DEPARTMENT OF HAEMATOLOGY**

**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY232**

Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>HEMOGRAM , WHOLE BLOOD EDTA</b>				
<b>HAEMOGLOBIN</b>	<b>11.7</b>	g/dL	12-15	Spectrophotometer
PCV	<b>35.90</b>	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.52	Million/cu.mm	3.8-4.8	Electrical Impedance
MCV	<b>79.0</b>	fL	83-101	Calculated
MCH	<b>25.9</b>	pg	27-32	Calculated
MCHC	32.6	g/dL	31.5-34.5	Calculated
R.D.W	<b>15.3</b>	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	8,300	cells/cu.mm	4000-10000	Electrical Impedance
<b>DIFFERENTIAL LEUCOCYTIC COUNT (DLC)</b>				
NEUTROPHILS	65	%	40-80	Electrical Impedance
LYMPHOCYTES	30	%	20-40	Electrical Impedance
EOSINOPHILS	01	%	1-6	Electrical Impedance
MONOCYTES	04	%	2-10	Electrical Impedance
BASOPHILS	00	%	<1-2	Electrical Impedance
<b>ABSOLUTE LEUCOCYTE COUNT</b>				
NEUTROPHILS	5395	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2490	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	83	Cells/cu.mm	20-500	Calculated
MONOCYTES	332	Cells/cu.mm	200-1000	Calculated
Neutrophil lymphocyte ratio (NLR)	2.17		0.78- 3.53	Calculated
<b>PLATELET COUNT</b>	<b>187000</b>	cells/cu.mm	150000-410000	Electrical impedance
<b>ERYTHROCYTE SEDIMENTATION RATE (ESR)</b>	<b>20</b>	mm at the end of 1 hour	0-20	Modified Westergren
<b>PERIPHERAL SMEAR</b>				



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**DEPARTMENT OF HAEMATOLOGY**

**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY232**

Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA</b>				
BLOOD GROUP TYPE	O			Gel agglutination
Rh TYPE	POSITIVE			Gel agglutination



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Patient Name : Ms.BEBI SINGH	Collected : 14/Sep/2024 10:44AM
Age/Gender : 52 Y 8 M 13 D/F	Received : 14/Sep/2024 11:31AM
UHID/MR No : CAOP.0000001232	Reported : 14/Sep/2024 12:42PM
Visit ID : CAOPPV01618	Status : Final Report
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**DEPARTMENT OF BIOCHEMISTRY**

**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY232**

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, FASTING , NAF PLASMA	133	mg/dL	70-100	GOD - POD

Please correlate with clinical and fasting details and other relevant investigations


**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.



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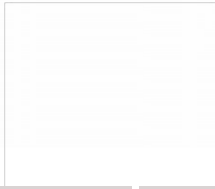
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Patient Name : Ms.BEBI SINGH	Collected : 16/Sep/2024 10:53AM
Age/Gender : 52 Y 8 M 13 D/F	Received : 16/Sep/2024 12:54PM
UHID/MR No : CAOP.0000001232	Reported : 16/Sep/2024 01:12PM
Visit ID : CAOPOPV01618	Status : Final Report
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**DEPARTMENT OF BIOCHEMISTRY**

**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY232**

Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)</b>	<b>190</b>	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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SIN No: AOP240900405  
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**APOLLO CLINICS NETWORK**

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**DEPARTMENT OF BIOCHEMISTRY**

**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY232**

Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA</b>				
HBA1C, GLYCATED HEMOGLOBIN	<b>6.5</b>	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	140	mg/dL		Calculated


**Comment:**

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

REFERENCE GROUP	HBA1C %
NON DIABETIC	<5.7
PREDIABETES	5.7 – 6.4
DIABETES	≥ 6.5
DIABETICS	
EXCELLENT CONTROL	6 – 7
FAIR TO GOOD CONTROL	7 – 8
UNSATISFACTORY CONTROL	8 – 10
POOR CONTROL	>10

**Note:** Dietary preparation or fasting is not required.

- HbA1C is recommended by American Diabetes Association for Diagnosing Diabetes and monitoring Glycemic Control by American Diabetes Association guidelines 2023.
- Trends in HbA1C values is a better indicator of Glycemic control than a single test.
- Low HbA1C in Non-Diabetic patients are associated with Anemia (Iron Deficiency/Hemolytic), Liver Disorders, Chronic Kidney Disease. Clinical Correlation is advised in interpretation of low Values.
- Falsely low HbA1c (below 4%) may be observed in patients with clinical conditions that shorten erythrocyte life span or decrease mean erythrocyte age. HbA1c may not accurately reflect glycemic control when clinical conditions that affect erythrocyte survival are present.
- In cases of Interference of Hemoglobin variants in HbA1C, alternative methods (Fructosamine) estimation is recommended for Glycemic Control
  - A: HbF >25%
  - B: Homozygous Hemoglobinopathy.
 (Hb Electrophoresis is recommended method for detection of Hemoglobinopathy)



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This test has been performed at Apollo Health and Lifestyle Ltd - RRL ASHOK NAGAR

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**DEPARTMENT OF BIOCHEMISTRY**

**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY232**

Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>LIPID PROFILE , SERUM</b>				
TOTAL CHOLESTEROL	192	mg/dL	<200	CHE/CHO/POD
TRIGLYCERIDES	79	mg/dL	<150	
HDL CHOLESTEROL	58	mg/dL	>40	CHE/CHO/POD
NON-HDL CHOLESTEROL	<b>134</b>	mg/dL	<130	Calculated
LDL CHOLESTEROL	<b>118.2</b>	mg/dL	<100	Calculated
VLDL CHOLESTEROL	15.8	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.31		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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Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>LIVER FUNCTION TEST (LFT) , SERUM</b>				
BILIRUBIN, TOTAL	0.30	mg/dL	0.1-1.2	Azobilirubin
BILIRUBIN CONJUGATED (DIRECT)	0.10	mg/dL	0.1-0.4	DIAZO DYE
BILIRUBIN (INDIRECT)	0.20	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	<b>53</b>	U/L	4-44	JSCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	<b>42.0</b>	U/L	8-38	JSCC
AST (SGOT) / ALT (SGPT) RATIO (DE RITIS)	0.8		<1.15	Calculated
ALKALINE PHOSPHATASE	<b>167.00</b>	U/L	32-111	IFCC
PROTEIN, TOTAL	8.10	g/dL	6.7-8.3	BIURET
ALBUMIN	4.60	g/dL	3.8-5.0	BROMOCRESOL GREEN
GLOBULIN	3.50	g/dL	2.0-3.5	Calculated
A/G RATIO	1.31		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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Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM</b>				
CREATININE	0.58	mg/dL	0.4-1.1	ENZYMATIC METHOD
UREA	22.00	mg/dL	17-48	Urease
BLOOD UREA NITROGEN	10.3	mg/dL	8.0 - 23.0	Calculated
URIC ACID	<b>7.70</b>	mg/dL	3.0-5.5	URICASE
CALCIUM	9.10	mg/dL	8.4-10.2	CPC
PHOSPHORUS, INORGANIC	3.50	mg/dL	2.6-4.4	PNP-XOD
SODIUM	142	mmol/L	135-145	Direct ISE
POTASSIUM	4.2	mmol/L	3.5-5.1	Direct ISE
CHLORIDE	99	mmol/L	98-107	Direct ISE
PROTEIN, TOTAL	8.10	g/dL	6.7-8.3	BIURET
ALBUMIN	4.60	g/dL	3.8-5.0	BROMOCRESOL GREEN
GLOBULIN	3.50	g/dL	2.0-3.5	Calculated
A/G RATIO	1.31		0.9-2.0	Calculated



**Dr. Shivangi Chauhan**  
M.B.B.S., M.D (Pathology)  
Consultant Pathologist



This test has been performed at Apollo Health and Lifestyle Ltd - RRL ASHOK NAGAR

SIN No: AOP240900219  
**Apollo Health and Lifestyle Limited** (CIN - U85110TG2000PLC115819)

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**APOLLO CLINICS NETWORK**


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Patient Name	: Ms.BEBI SINGH	Collected	: 14/Sep/2024 10:44AM
Age/Gender	: 52 Y 8 M 13 D/F	Received	: 14/Sep/2024 03:37PM
UHID/MR No	: CAOP.0000001232	Reported	: 14/Sep/2024 04:40PM
Visit ID	: CAOPOPV01618	Status	: Final Report
Ref Doctor	: Self	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 22S33047		

**DEPARTMENT OF BIOCHEMISTRY**

**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY232**

Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM</b>	37.00	U/L	16-73	Glycylglycine Kinetic method



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Patient Name : Ms.BEBI SINGH	Collected : 14/Sep/2024 10:44AM
Age/Gender : 52 Y 8 M 13 D/F	Received : 14/Sep/2024 02:28PM
UHID/MR No : CAOP.0000001232	Reported : 14/Sep/2024 03:51PM
Visit ID : CAOPOPV01618	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22S33047	

DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY232

Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM</b>				
TRI-IODOTHYRONINE (T3, TOTAL)	1.5	ng/mL	0.87-1.78	CLIA
THYROXINE (T4, TOTAL)	<b>15.22</b>	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	0.884	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



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SIN No:AOP240900221  
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Patient Name	: Ms.BEBI SINGH	Collected	: 14/Sep/2024 10:44AM
Age/Gender	: 52 Y 8 M 13 D/F	Received	: 14/Sep/2024 02:28PM
UHID/MR No	: CAOP.0000001232	Reported	: 14/Sep/2024 03:51PM
Visit ID	: CAOPOPV01618	Status	: Final Report
Ref Doctor	: Self	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
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**DEPARTMENT OF IMMUNOLOGY**

**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY232**

High	High	High	High	Pituitary Adenoma; TSHoma/Thyrotropinoma
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**Dr Nidhi Sachdev**  
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Consultant Pathologist



SIN No:AOP240900221  
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Patient Name : Ms.BEBI SINGH	Collected : 14/Sep/2024 10:44AM
Age/Gender : 52 Y 8 M 13 D/F	Received : 14/Sep/2024 01:14PM
UHID/MR No : CAOP.0000001232	Reported : 14/Sep/2024 03:39PM
Visit ID : CAOPOPV01618	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22S33047	

**DEPARTMENT OF CLINICAL PATHOLOGY**

**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY232**

Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>COMPLETE URINE EXAMINATION (CUE) , URINE</b>				
<b>PHYSICAL EXAMINATION</b>				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Physical Measurement
pH	6.5		5-7.5	Double Indicator
SP. GRAVITY	1.025		1.002-1.030	Bromothymol Blue
<b>BIOCHEMICAL EXAMINATION</b>				
URINE PROTEIN	NEGATIVE		NEGATIVE	Protein Error Of Indicator
GLUCOSE	NEGATIVE		NEGATIVE	Glucose Oxidase
URINE BILIRUBIN	NEGATIVE		NEGATIVE	Azo Coupling Reaction
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	Sodium Nitro Prusside
UROBILINOGEN	NORMAL		NORMAL	Modified Ehrlich Reaction
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	Leucocyte Esterase
<b>CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY</b>				
PUS CELLS	6-8	/hpf	0-5	Microscopy
EPITHELIAL CELLS	4-5	/hpf	<10	Microscopy
RBC	NIL	/hpf	0-2	Microscopy
CASTS	NIL		0-2 Hyaline Cast	Microscopy
CRYSTALS	ABSENT		ABSENT	Microscopy

Kindly correlate clinically.

**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.



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Patient Name : Ms.BEBI SINGH	Collected : 16/Sep/2024 10:53AM
Age/Gender : 52 Y 8 M 13 D/F	Received : 16/Sep/2024 01:11PM
UHID/MR No : CAOP.0000001232	Reported : 16/Sep/2024 01:26PM
Visit ID : CAOPOPV01618	Status : Final Report
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**DEPARTMENT OF CLINICAL PATHOLOGY**

**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY232**

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



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SIN No: AOP240900404

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Patient Name : Ms.BEBI SINGH	Collected : 14/Sep/2024 10:44AM
Age/Gender : 52 Y 8 M 13 D/F	Received : 14/Sep/2024 01:14PM
UHID/MR No : CAOP.0000001232	Reported : 14/Sep/2024 03:39PM
Visit ID : CAOPOPV01618	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
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**DEPARTMENT OF CLINICAL PATHOLOGY**

**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY232**

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



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SIN No: AOP240900218

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Patient Name : Ms.BEBI SINGH	Collected : 16/Sep/2024 12:15PM
Age/Gender : 52 Y 8 M 13 D/F	Received : 16/Sep/2024 05:27PM
UHID/MR No : CAOP.0000001232	Reported : 18/Sep/2024 03:41PM
Visit ID : CAOPOPV01618	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22S33047	

**DEPARTMENT OF CYTOLOGY**


**LBC PAP SMEAR , CERVICAL SAMPLE**

	<b>CYTOLOGY NO.</b>	L/1471/24
<b>I</b>	<b>SPECIMEN</b>	
<b>a</b>	SPECIMEN ADEQUACY	ADEQUATE
<b>b</b>	<b>SPECIMEN TYPE</b>	LIQUID-BASED PREPARATION (LBC)
	SPECIMEN NATURE/SOURCE	CERVICAL SMEAR
<b>c</b>	ENDOCERVICAL-TRANSFORMATION ZONE	ABSENT
<b>d</b>	COMMENTS	SATISFACTORY FOR EVALUATION
<b>II</b>	<b>MICROSCOPY</b>	Smear shows sheets of benign superficial and intermediate squamous cells in a background of inflammation
<b>III</b>	<b>RESULT</b>	
<b>a</b>	<b>EPITHELIAL CELL</b>	
	SQUAMOUS CELL ABNORMALITIES	NOT SEEN
	GLANDULAR CELL ABNORMALITIES	NOT SEEN
<b>b</b>	<b>ORGANISM</b>	SHIFT IN FLORA SUGGESTIVE OF BACTERIAL VAGINOSIS
<b>IV</b>	<b>INTERPRETATION</b>	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 \*\*\*

Page 16 of 16



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**Dr. Tanish Mandal**  
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Consultant Pathologist



This test has been performed at Apollo Health and Lifestyle Ltd - RRL ASHOK NAGAR

SIN No: AOP240900451

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Patient Name : Ms.BEBI SINGH  
Age/Gender : 52 Y 8 M 13 D/F  
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Collected : 16/Sep/2024 12:15PM  
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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.

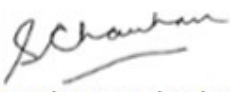
Laboratories not be responsible for any interpretation whatsoever.

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.



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Consultant Pathologist



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



Patient Name	: Ms. BEBI SINGH	Age	: 52Yrs 8Mths 18Days
UHID	: CAOP.0000001232	OP Visit No.	: CAOPOPV01618
Printed On	: 18-09-2024 11:57 AM	Advised/Pres Doctor	: --
Department	: Radiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employee Id	: 22S33047		

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## DEPARTMENT OF RADIOLOGY

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### ULTRASOUND WHOLE ABDOMEN

**Liver is borderline enlarged in size(16cm) and shows diffuse increase in echotexture with partially loss of portal vein echogenicity suggestive of Grade I – II fatty infiltration. There is liver parenchyma seen in anterior to spleen likely beaver's tail liver. Intrahepatic bile ducts and portal radicals are normal in caliber.**

**Gall bladder** is partially contracted, does not show any evidence of cholecystitis or cholelithiasis.

**CBD** is not dilated.

**Portal vein** is normal in caliber.

**Both kidneys** are of normal size (RK 13 x 4.0cm, LK x 12.2x6.2cm), shape and echo pattern. The parenchymal thickness is normal & cortico-medullary differentiation is well maintained. **Right kidney shows focal scarring at upper pole.**

**Spleen** is normal in size (12.2cm) and echotexture.

**Pancreas** visualized part appears normal.

No free fluid seen in the peritoneal cavity.

**Urinary bladder** is partially filled and shows no mural or intraluminal pathology.

**Uterus** is anteverted, normal in size(5.8x4.7x3.3cm), shape and echo pattern. **There is a calcified fibroid of size~21x18mm is noted in posterior wall of myometrium. Endometrium** echo is 5.9mm thick. **(post-menopausal status)**

Bilateral adnexa are clear

No free fluid seen in the peritoneal cavity

---

**IMPRESSION: -Borderline hepatomegaly with grade I-II fatty liver.**

**Calcified uterine fibroid**

Please correlate clinically.

(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.

---End Of The Report---



Dr. SEEMA PRAJAPATI

MBBS MD Radio

DMC111002

Radiology

Patient Name	: Ms. BEBI SINGH	Age	: 52Yrs 8Mths 14Days
UHID	: CAOP.0000001232	OP Visit No.	: CAOPOPV01618
Printed On	: 14-09-2024 12:14 PM	Advised/Pres Doctor	: --
Department	: Cardiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employeer Id	: 22S33047		

## DEPARTMENT OF CARDIOLOGY

Observation :-

1. Sinus arrhythmia.
2. Heart rate is 77beats 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.RAJNI SHARMA  
MBBS MD DM Cardiologist  
DMC 22672  
Cardiology



To,

The Coordinator,  
MediWheel (M/s. Arcofemi Healthcare Pvt. Ltd.)

Dear Sir / Madam,

**Sub: Annual Health Checkup for the employees of Bank of Baroda**

This is to inform you that the following spouse of our employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS OF HEALTH CHECK UP BENEFICIARY	
NAME	BEBI SINGH
DATE OF BIRTH	01-07-1972
PROPOSED DATE OF HEALTH CHECKUP FOR EMPLOYEE SPOUSE	14-09-2024
BOOKING REFERENCE NO.	24S54578100113388S
SPOUSE DETAILS	
EMPLOYEE NAME	MR. SINGH BINDESHWAR
EMPLOYEE EC NO.	54578
EMPLOYEE DESIGNATION	BRANCH OPERATIONS
EMPLOYEE PLACE OF WORK	NEW DELHI, PADAM SINGH ROAD
EMPLOYEE BIRTHDATE	01-01-1968

This letter of approval / recommendation is valid if submitted along with copy of the Bank of Baroda employee id card. This approval is valid from **10-09-2024** till **31-03-2025**. The list of medical tests to be conducted is provided in the annexure to this letter. Please note that the said health checkup is a **cashless facility** as per our tie up arrangement. We request you to attend to the health checkup requirement of our employee's spouse and accord your top priority and best resources in this regard. The EC Number and the booking reference number as given in the above table shall be mentioned in the invoice, invariably.

We solicit your co-operation in this regard.

Yours faithfully,

Sd/-

**Chief General Manager**  
**HRM & Marketing Department**  
**Bank of Baroda**

(Note: This is a computer generated letter. No Signature required. For any clarification, please contact MediWheel (M/s. Arcofemi Healthcare Pvt. Ltd.))



**List of tests & consultations to be covered as part of Annual Health Check-up**

S.No.	For Male	For Female
1	CBC	CBC
2	ESR	ESR
3	Blood Group & RH Factor	Blood Group & RH Factor
4	Blood and Urine Sugar Fasting	Blood and Urine Sugar Fasting
5	Blood and Urine Sugar PP	Blood and Urine Sugar PP
6	Stool Routine	Stool Routine
	<b>Lipid Profile</b>	<b>Lipid Profile</b>
7	Total Cholesterol	Total Cholesterol
8	HDL	HDL
9	LDL	LDL
10	VLDL	VLDL
11	Triglycerides	Triglycerides
12	HDL/ LDL ratio	HDL/ LDL ratio
	<b>Liver Profile</b>	<b>Liver Profile</b>
13	AST	AST
14	ALT	ALT
15	GGT	GGT
16	Bilirubin (total, direct, indirect)	Bilirubin (total, direct, indirect)
17	ALP	ALP
18	Proteins (T, Albumin, Globulin)	Proteins (T, Albumin, Globulin)
	<b>Kidney Profile</b>	<b>Kidney Profile</b>
19	Serum Creatinine	Serum Creatinine
20	Blood Urea Nitrogen	Blood Urea Nitrogen
21	Uric Acid	Uric Acid
22	HBA1C	HBA1C
23	Routine Urine Analysis	Routine Urine Analysis
24	USG Whole Abdomen	USG Whole Abdomen
	<b>General Tests</b>	<b>General Tests</b>
25	X Ray Chest	X Ray Chest
26	ECG	ECG
27	2D/3D ECHO / TMT	2D/3D ECHO / TMT
28	Stress Test	Gynaec Consultation
29	PSA Male (above 40 years)	Pap Smear (above 30 years) & Mammography (above 40 years)
30	Thyroid Profile (T3, T4, TSH)	Thyroid Profile (T3, T4, TSH)
31	Dental Check-up Consultation	Dental Check-up Consultation
32	Physician Consultation	Physician Consultation
33	Eye Check-up Consultation	Eye Check-up Consultation
34	Skin/ENT Consultation	Skin/ENT Consultation

\*\*\*



भारत सरकार

Government of India



बेबी सिंह

Bebi Singh

जन्म तिथि / DOB : 01/01/1972

महिला / Female



6236 1252 1648

आधार - आम आदमी का अधिकार



भारतीय विशिष्ट पहचान प्राधिकरण

Unique Identification Authority of India

पता:

संबोधित: बिन्देश्वर सिंह, मझौवाँ,  
मझौवा, बलिया, मझुआ, उत्तर प्रदेश,  
277403

Address:

W/O: Bindeshwar Singh,  
majhauwan, Majhauwa, Ballia,  
Majhua, Uttar Pradesh, 277403

6236 1252 1648

1947  
1800 300 1947

help@uidai.gov.in

www.uidai.gov.in

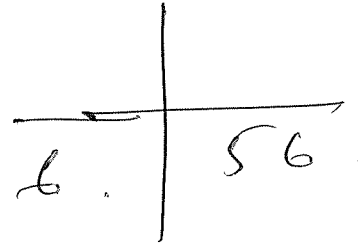
**DR. ALVEEN KAUR**

Senior Consultant - Dental  
BDS, MIDA, REG NO- A-12249  
Specialized in Surgical, & Cosmetic procedures & Trauma  
For Booking Call on - 9817966537  
Days: - Mon to Sat  
10AM to 5PM



Ms. Behri Singh.  
S2/F.

Q/E:- Missing 1st  
deposits++



Re Adv.

- Replacement of missing teeth.
- oral prophylaxis

Dr. Alveen

Signature: -

APOLLO HEALTH AND LIFESTYLE LTD.

Apollo One (Unit of Apollo Health and Lifestyle Ltd)  
Plot no. 3, Block no. 34, Pusa Road, WEA, opposite metro pillar no. 77, Karol Bagh,  
New Delhi - 110005. Contact Number 011- 40393610 / Helpline No: 1860 500 7788  
Emergency: 1066 / Email: ApolloOnePusaRoad@apolloclinic.com

Registered Office: Apollo Health and Lifestyle Limited  
7-1-617/A, 615 and 616, Imperial Towers, 7th Floor,  
Ameerpet, Hyderabad-500038, U85110TG2000PLC115819

www.apolloclinic.com



Mrs. Boki Singh  
Age - 52 y / F

Height : 159 cm	Weight : 71 kg	BMI : 28.8	Waist Circum :
Temp : 98.1 °F	Pulse : 92 / min	Resp : 20 / min	B.P : 130 / 74

General Examination / Allergies  
History

Past h/o = K/O DM II  
                  T. Myasthenia  
                  H/F  
Seh/o =  
                  Fibrotomy  
                  x 18 yr

Allergy = NO

Diet = mixed

Habits = NO

Married = 3 kids

Physical = Bedridden  
diet =

Conval vaccines = 2 doses

Clinical Diagnosis & Management Plan

Central health checkup

CB =  
PS = / w/w  
Ans =  
PIA = 580 / 135 SA

Adv  
- Review & Reports  
- Life style modifications

Follow up date:

Doctor Signature

APOLLO HEALTH AND LIFE  
APOLLO ONE  
No. 3, Block No. 34  
Pusa Road, New Delhi

ID: 0000001232

MR BEBI SINGH

Male 52Years

Req. No. :

14-09-2024 12:44:34 PM

HR : 77 bpm

P : 100 ms

PR : 139 ms

QRS : 91 ms

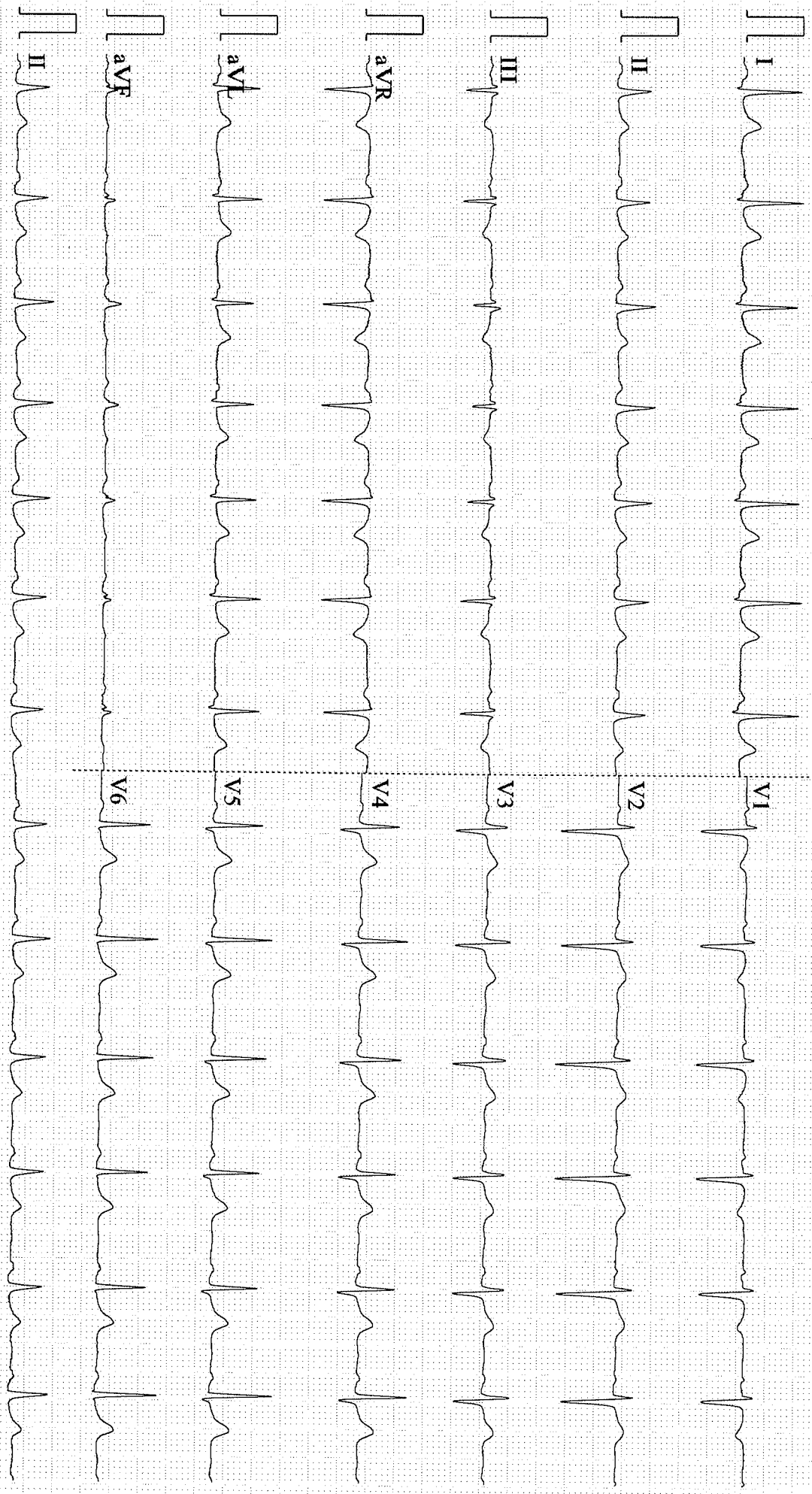
QT/QTcBz : 368/419 ms

P/QRS/T : 17/17/6 °

RV5/SV1 : 0.955/0.810 mV

Diagnosis Information:  
Sinus Arrhythmia

Report Confirmed by:



# InBody

[InBody370S]

ID caop0000090123	Height 159cm	Age 72	Gender Female	Test Date / Time 14.09.2024. 12:50
----------------------	-----------------	-----------	------------------	---------------------------------------

## Body Composition Analysis

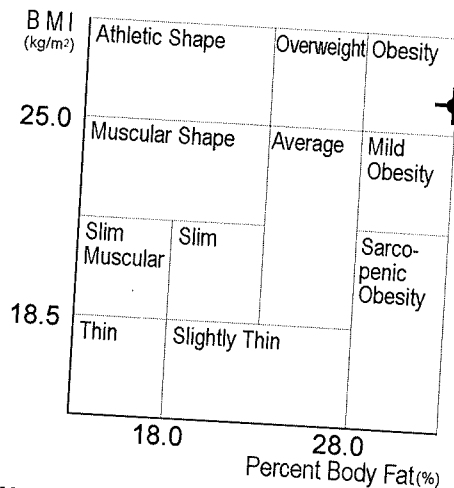
	Values	Total Body Water	Soft Lean Mass	Fat Free Mass	Weight
Total Body Water (L)	26.1 (27.0~33.0)	26.1	33.4 (34.7~42.5)	35.6 (36.8~45.0)	71.0 (45.1~61.1)
Protein (kg)	6.9 (7.3~8.9)	non-ossseous			
Minerals (kg)	2.62 (2.50~3.06)				
Body Fat Mass (kg)	35.4 (10.6~17.0)				

## InBody Score

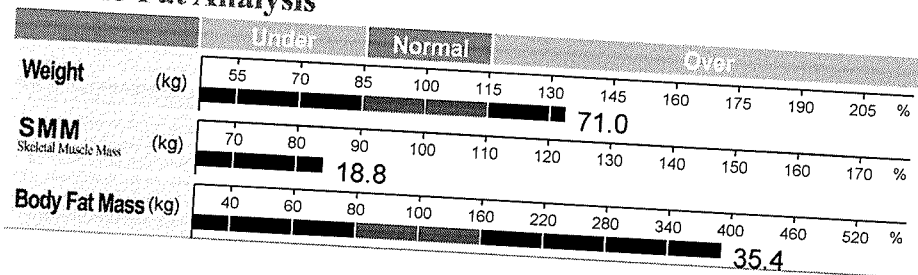
51/100 Points

\* Total score that reflects the evaluation of body composition. A muscular person may score over 100 points.

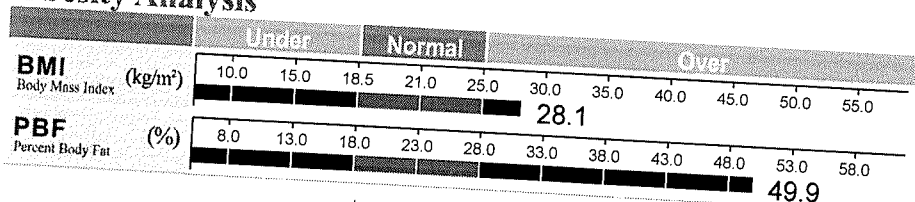
## Body Type



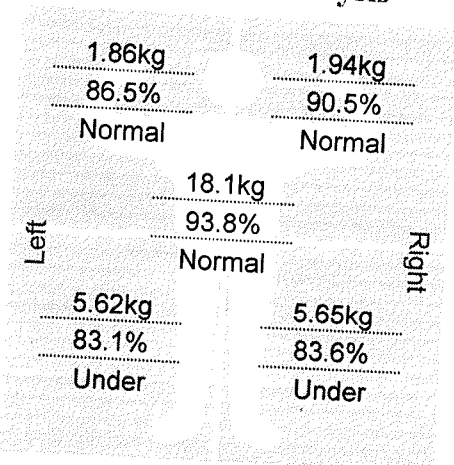
## Muscle-Fat Analysis



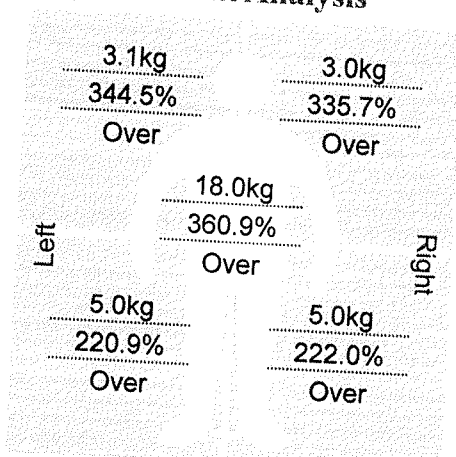
## Obesity Analysis



## Segmental Lean Analysis



## Segmental Fat Analysis



\* Segmental fat is estimated.

## Weight Control

Target Weight	53.1 kg
Weight Control	- 17.9 kg
Fat Control	- 23.2 kg
Muscle Control	+ 5.3 kg

## Obesity Evaluation

BMI	<input type="checkbox"/> Normal <input type="checkbox"/> Under <input checked="" type="checkbox"/> Slightly Over <input type="checkbox"/> Over
PBF	<input type="checkbox"/> Normal <input type="checkbox"/> Slightly Over <input checked="" type="checkbox"/> Over

## Body Balance Evaluation

Upper	<input checked="" type="checkbox"/> Balanced <input type="checkbox"/> Slightly Unbalanced <input type="checkbox"/> Extremely Unbalanced
Lower	<input checked="" type="checkbox"/> Balanced <input type="checkbox"/> Slightly Unbalanced <input type="checkbox"/> Extremely Unbalanced
Upper-Lower	<input type="checkbox"/> Balanced <input checked="" type="checkbox"/> Slightly Unbalanced <input type="checkbox"/> Extremely Unbalanced

## Research Parameters

Basal Metabolic Rate	1138 kcal (1433~1669)
Waist-Hip Ratio	1.03 (0.75~0.85)
Visceral Fat Level	20 (1~9)
Obesity Degree	134 % (90~110)
Bone Mineral Content	2.18 kg (2.06~2.52)
SMI	6.0 kg/m²
Recommended calorie intake	1847 kcal

## Impedance

	RA	LA	TR	RL	LL
Z(Ω) 5 kHz	468.8	492.1	29.4	352.4	356.1
50 kHz	428.0	453.7	26.9	324.6	328.9
250 kHz	384.7	411.5	23.8	294.9	299.7

## Body Composition History

	Weight (kg)	SMM (kg)	PBF (%)
<input checked="" type="checkbox"/> Recent <input type="checkbox"/> Total	71.0	18.8	49.9
	14.09.24. 12:50		

**Eye Checkup**

**NAME:** - Mrs. BEBI SINGH

**Age:** - 52

**Date:** 14/9/24

**SELF / CORPORATE:** -

Right Eye		Left Eye
Distant Vision	Same vision (G/C)	Same vision (G/C)
Near vision	Same vision (G/C)	Same vision (G/C)
Color vision	OK	OK
Fundus examination	/	/
Intraocular pressure	/	/
Slit lamp exam	/	/

Signature



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APOLLO ONE  
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Pusa Road, WEA Karol Bagh  
New Delhi-110005

**DR. RAJEEV NANGIA**

MBBS, MS (ENT)

Senior Consultant

Contact: 8929440195

MS. BEBBSINAM  
527/fe

Height : <i>5'4"</i>	Weight :	BMI :	Waist Circum :
Temp :	Pulse :	Resp :	B.P :

General Examination / Allergies  
History

Clinical Diagnosis & Management Plan

*Mild flu*

Follow up date:

*[Signature]*  
APOLLO HEALTH AND LIFESTYLE LI  
APOLLO ONE  
Doctor Signature

## CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination of

Beki Singh on 16/9/21

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

	Tick
<p><b>Medically Fit</b></p> <p>It Wit Restrictions Recommendations</p> <p>Though following restrictions have been revealed, in my opinion, these are not impediments to the job.</p> <p>1. <u>General physician consultation in view of uncontrolled diabetes</u></p> <p>2. ....</p> <p>3. ....</p> <p>However, the employee should follow the advice/medication that has been communicated to him/her.</p> <p>Review after _____</p>	<input checked="" type="checkbox"/>
<p><b>Current Unfit.</b></p> <p>Review after _____ recommended</p>	
<p><b>Unfit</b></p>	

Height: 159 cm  
 Weight: 71 kg  
 Blood Pressure: 110/74 mmHg

**APOLLO HEALTH AND LIFESTYLE LTD.**  
**APOLLO ONE**  
 Plot No. 3, Block No. 34, Metro Pillar No. 77  
 Pusa Road, WEA, Karol Bagh  
 New Delhi-110005  
 Dr. \_\_\_\_\_  
 Medical Officer

This certificate is not meant for medico-legal purposes

**Apollo One** (Unit of Apollo Health and Lifestyle Ltd)  
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 Ameerpet, Hyderabad-500038, U85110TG2000PLC115819

**Dr. Pakhee Aggarwal**

MS, MIPHA, FICOG, MRCOG (UK), PGPMRCH

Commonwealth Fellow Gynae-Oncology (Oxford, UK)  
UICC Fellow Robotic Gynae-Oncology (McGill, Canada)  
ESGO-SERGS trained in Robotic Gynae & Oncology (ORSI, Belgium)  
Former Senior Resident, AIIMS, Former Assistant Professor, LHMC  
Senior Consultant, Gynae-Oncology & Robotic Surgery  
Contact: 9868602466, DMC No.-R/2512

BESI SINGH 5216 16/9/24

penetration of

NO BPV

UMP. 22.1.24.

P<sub>3</sub>L<sub>3</sub>, AM NVD.

Sonomammo @

G/E P/A Spn P/S PIV. Wt  
Cx | v7 @ R/V  
b/lh  
B/C/S fine

US G Abdo

W- R/V  
Calc. fibroid  
21 x 18 mm

ET 5.9 mm.

B/Adhura @

~~LBC for histology~~

✓ - TVS pelvis. to be done.

- R/c report.

APOLLO HEALTH AND LIFESTYLE LTD.

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