

Patient Name : Mrs.TAMILSELVI E	Collected : 09/Sep/2023 09:31AM
Age/Gender : 29 Y 3 M 16 D/F	Received : 09/Sep/2023 03:57PM
UHID/MR No : CANN.0000226949	Reported : 09/Sep/2023 07:06PM
Visit ID : CANNOPV369534	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 124194	

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL FULL BODY COMPREHENSIVE HC AND VITAMIN FEMALE - 2D ECHO - PAN INDIA - FY2324

PERIPHERAL SMEAR , WHOLE BLOOD EDTA

METHODOLOGY	: Microscopic.
RBC MORPHOLOGY	: Predominantly normocytic normochromic RBC's noted.
WBC MORPHOLOGY	: Normal in number, morphology and distribution. No abnormal cells seen.
PLATELETS	: Adequate in number.
PARASITES	: No haemoparasites seen.
IMPRESSION	: Normocytic normochromic blood picture.
NOTE/ COMMENT	: Please correlate clinically.



SIN No:BED230217413

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

Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)

Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016 |
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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
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HEMOGRAM , WHOLE BLOOD EDTA

HAEMOGLOBIN	12	g/dL	12-15	Spectrophotometer
PCV	37.80	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.64	Million/cu.mm	3.8-4.8	Electrical Impedance
MCV	81.5	fL	83-101	Calculated
MCH	25.9	pg	27-32	Calculated
MCHC	31.8	g/dL	31.5-34.5	Calculated
R.D.W	15.9	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	8,400	cells/cu.mm	4000-10000	Electrical Impedance

DIFFERENTIAL LEUCOCYTIC COUNT (DLC)

NEUTROPHILS	69.2	%	40-80	Electrical Impedance
LYMPHOCYTES	21.5	%	20-40	Electrical Impedance
EOSINOPHILS	2.0	%	1-6	Electrical Impedance
MONOCYTES	6.7	%	2-10	Electrical Impedance
BASOPHILS	0.6	%	<1-2	Electrical Impedance

ABSOLUTE LEUCOCYTE COUNT

NEUTROPHILS	5812.8	Cells/cu.mm	2000-7000	Electrical Impedance
LYMPHOCYTES	1806	Cells/cu.mm	1000-3000	Electrical Impedance
EOSINOPHILS	168	Cells/cu.mm	20-500	Electrical Impedance
MONOCYTES	562.8	Cells/cu.mm	200-1000	Electrical Impedance
BASOPHILS	50.4	Cells/cu.mm	0-100	Electrical Impedance

PLATELET COUNT

PLATELET COUNT	388000	cells/cu.mm	150000-410000	Electrical impedance
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ERYTHROCYTE SEDIMENTATION RATE (ESR)

ERYTHROCYTE SEDIMENTATION RATE (ESR)	34	mm at the end of 1 hour	0-20	Modified Westergren
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PERIPHERAL SMEAR				
METHODOLOGY	: Microscopic.			
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WBC MORPHOLOGY	: Normal in number, morphology and distribution. No abnormal cells seen.			
PLATELETS	: Adequate in number.			
PARASITES	: No haemoparasites seen.			

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Test Name	Result	Unit	Bio. Ref. Range	Method
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IMPRESSION : Normocytic normochromic blood picture.

NOTE/ COMMENT : Please correlate clinically.



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

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



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Age/Gender : 29 Y 3 M 16 D/F	Received : 09/Sep/2023 03:56PM
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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL FULL BODY COMPREHENSIVE HC AND VITAMIN FEMALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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GLUCOSE, FASTING , NAF PLASMA	89	mg/dL	70-100	HEXOKINASE
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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.

GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	113	mg/dL	70-140	HEXOKINASE
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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.

Ref: Marks medical biochemistry and clinical approach

HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD EDTA	5.9	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) ,	123	mg/dL		Calculated

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Test Name	Result	Unit	Bio. Ref. Range	Method
WHOLE BLOOD EDTA				

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)



SIN No:PLF02025158,PLP1367075,EDT230083029

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UHID/MR No : CANN.0000226949	Reported : 09/Sep/2023 05:44PM
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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL FULL BODY COMPREHENSIVE HC AND VITAMIN FEMALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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LIPID PROFILE , SERUM

TOTAL CHOLESTEROL	220	mg/dL	<200	CHO-POD
TRIGLYCERIDES	102	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	41	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	179	mg/dL	<130	Calculated
LDL CHOLESTEROL	158.6	mg/dL	<100	Calculated
VLDL CHOLESTEROL	20.4	mg/dL	<30	Calculated
CHOL / HDL RATIO	5.37		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

1. Measurements in the same patient on different days can show physiological and analytical variations.
2. NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.
3. Primary prevention algorithm now includes absolute risk estimation and lower LDL Cholesterol target levels to determine eligibility of drug therapy.
4. 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.
5. 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.
6. VLDL, LDL Cholesterol Non HDL Cholesterol, CHOL/HDL RATIO, LDL/HDL RATIO are calculated parameters when Triglycerides are below 350 mg/dl. When Triglycerides are more than 350 mg/dl LDL cholesterol is a direct measurement.

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Test Name	Result	Unit	Bio. Ref. Range	Method



SIN No:SE04476501

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LIVER FUNCTION TEST (LFT) , SERUM

BILIRUBIN, TOTAL	0.57	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.09	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.48	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	14	U/L	<35	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	17.0	U/L	<35	IFCC
ALKALINE PHOSPHATASE	84.00	U/L	30-120	IFCC
PROTEIN, TOTAL	7.10	g/dL	6.6-8.3	Biuret
ALBUMIN	4.20	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.90	g/dL	2.0-3.5	Calculated
A/G RATIO	1.45		0.9-2.0	Calculated



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LIVER FUNCTION TEST (LFT) WITH GGT , SERUM				
BILIRUBIN, TOTAL	0.57	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.09	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.48	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	14	U/L	<35	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	17.0	U/L	<35	IFCC
ALKALINE PHOSPHATASE	84.00	U/L	30-120	IFCC
PROTEIN, TOTAL	7.10	g/dL	6.6-8.3	Biuret
ALBUMIN	4.20	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.90	g/dL	2.0-3.5	Calculated
A/G RATIO	1.45		0.9-2.0	Calculated
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT)	20.00	U/L	<38	IFCC



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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.TAMILSELVI E	Collected : 09/Sep/2023 09:31AM
Age/Gender : 29 Y 3 M 16 D/F	Received : 09/Sep/2023 04:25PM
UHID/MR No : CANN.0000226949	Reported : 09/Sep/2023 05:44PM
Visit ID : CANNOPV369534	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 124194	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL FULL BODY COMPREHENSIVE HC AND VITAMIN FEMALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM

Test Name	Result	Unit	Bio. Ref. Range	Method
CREATININE	0.63	mg/dL	0.72 – 1.18	JAFFE METHOD
UREA	16.00	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	7.5	mg/dL	8.0 - 23.0	Calculated
URIC ACID	4.10	mg/dL	2.6-6.0	Uricase PAP
CALCIUM	9.10	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	3.60	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	138	mmol/L	136–146	ISE (Indirect)
POTASSIUM	4.0	mmol/L	3.5–5.1	ISE (Indirect)
CHLORIDE	105	mmol/L	101–109	ISE (Indirect)



SIN No:SE04476501

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

Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)

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APOLLO CLINICS NETWORK

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Patient Name : Mrs.TAMILSELVI E	Collected : 09/Sep/2023 09:31AM
Age/Gender : 29 Y 3 M 16 D/F	Received : 09/Sep/2023 04:25PM
UHID/MR No : CANN.0000226949	Reported : 09/Sep/2023 05:35PM
Visit ID : CANNOPV369534	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 124194	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL FULL BODY COMPREHENSIVE HC AND VITAMIN FEMALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
ALKALINE PHOSPHATASE , SERUM	84.00	U/L	30-120	IFCC



SIN No:SE04476501

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Patient Name : Mrs.TAMILSELVI E	Collected : 09/Sep/2023 09:31AM
Age/Gender : 29 Y 3 M 16 D/F	Received : 09/Sep/2023 04:26PM
UHID/MR No : CANN.0000226949	Reported : 09/Sep/2023 06:17PM
Visit ID : CANNOPV369534	Status : Final Report
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DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL FULL BODY COMPREHENSIVE HC AND VITAMIN FEMALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM

TRI-IODOTHYRONINE (T3, TOTAL)	1.47	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	9.39	µg/dL	6.09-12.23	CLIA
THYROID STIMULATING HORMONE (TSH)	4.505	µIU/mL	0.34-5.60	CLIA

Comment:

Note:

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

1. 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.
2. 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.
3. 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.
4. 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

Patient Name : Mrs.TAMILSELVI E	Collected : 09/Sep/2023 09:31AM
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DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL FULL BODY COMPREHENSIVE HC AND VITAMIN FEMALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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High	High	High	High	Pituitary Adenoma; TSHoma/Thyrotropinoma
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SIN No:SPL23128610

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Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)

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Patient Name : Mrs.TAMILSELVI E	Collected : 09/Sep/2023 09:31AM
Age/Gender : 29 Y 3 M 16 D/F	Received : 09/Sep/2023 04:26PM
UHID/MR No : CANN.0000226949	Reported : 09/Sep/2023 06:39PM
Visit ID : CANNOPV369534	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 124194	

DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL FULL BODY COMPREHENSIVE HC AND VITAMIN FEMALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
VITAMIN D (25 - OH VITAMIN D) , SERUM	20.23	ng/mL		CLIA

Comment:

BIOLOGICAL REFERENCE RANGES

VITAMIN D STATUS	VITAMIN D 25 HYDROXY (ng/mL)
DEFICIENCY	<10
INSUFFICIENCY	10 – 30
SUFFICIENCY	30 – 100
TOXICITY	>100

The assay measures both D2 (Ergocalciferol) and D3 (Cholecalciferol) metabolites of vitamin D. Vitamin D status is best determined by measurement of 25 hydroxy vitamin D, as it is the major circulating form and has longer half life (2-3 weeks) than 1,25 Dihydroxy vitamin D (5-8 hrs)

The reference ranges discussed in the preceding are related to total 25-OHD; as long as the combined total is 30 ng/mL or more, the patient has sufficient vitamin D.

Levels needed to prevent rickets and osteomalacia (15 ng/mL) are lower than those that dramatically suppress parathyroid hormone levels (20–30 ng/mL). In turn, those levels are lower than levels needed to optimize intestinal calcium absorption (34 ng/mL). Neuromuscular peak performance is associated with levels approximately 38 ng/mL.



SIN No:SPL23128610

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Patient Name : Mrs.TAMILSELVI E	Collected : 09/Sep/2023 09:31AM
Age/Gender : 29 Y 3 M 16 D/F	Received : 09/Sep/2023 04:26PM
UHID/MR No : CANN.0000226949	Reported : 09/Sep/2023 06:30PM
Visit ID : CANNOPV369534	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 124194	

DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL FULL BODY COMPREHENSIVE HC AND VITAMIN FEMALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
VITAMIN B12 , SERUM	194	pg/mL	107.2-653.3	CLIA

Comment:

Vitamin B12 deficiency frequently causes macrocytic anemia, glossitis, peripheral neuropathy, weakness, hyperreflexia, ataxia, loss of proprioception, poor coordination, and affective behavioral changes. A significant increase in RBC MCV may be an important indicator of vitamin B12 deficiency.

Patients taking vitamin B12 supplementation may have misleading results. A normal serum concentration of B12 does not rule out tissue deficiency of vitamin B12 . The most sensitive test for B12 deficiency at the cellular level is the assay for MMA. If clinical symptoms suggest deficiency, measurement of MMA and homocysteine should be considered, even if serum B12 concentrations are normal.



SIN No:SPL23128610

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Patient Name : Mrs.TAMILSELVI E	Collected : 09/Sep/2023 09:31AM
Age/Gender : 29 Y 3 M 16 D/F	Received : 09/Sep/2023 03:57PM
UHID/MR No : CANN.0000226949	Reported : 09/Sep/2023 04:53PM
Visit ID : CANNOPV369534	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 124194	

DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL FULL BODY COMPREHENSIVE HC AND VITAMIN FEMALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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COMPLETE URINE EXAMINATION (CUE) , URINE

PHYSICAL EXAMINATION				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pH	6.0		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	1.020		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	2-4	/hpf	0-5	Microscopy
EPITHELIAL CELLS	2-4	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	ABSENT		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY



SIN No:UR2181083

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

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Patient Name : Mrs.TAMILSELVI E	Collected : 09/Sep/2023 09:31AM
Age/Gender : 29 Y 3 M 16 D/F	Received : 09/Sep/2023 03:57PM
UHID/MR No : CANN.0000226949	Reported : 09/Sep/2023 05:03PM
Visit ID : CANNOPV369534	Status : Final Report
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Emp/Auth/TPA ID : 124194	

DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL FULL BODY COMPREHENSIVE HC AND VITAMIN FEMALE - 2D ECHO - PAN INDIA - FY2324

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



SIN No:UF009432

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

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Patient Name : Mrs.TAMILSELVI E	Collected : 09/Sep/2023 09:31AM
Age/Gender : 29 Y 3 M 16 D/F	Received : 10/Sep/2023 09:12PM
UHID/MR No : CANN.0000226949	Reported : 13/Sep/2023 06:32PM
Visit ID : CANNOPV/369534	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 124194	

DEPARTMENT OF CYTOLOGY


ARCOFEMI - MEDIWHEEL FULL BODY COMPREHENSIVE HC AND VITAMIN FEMALE - 2D ECHO - PAN INDIA - FY2324

LBC PAP TEST (PAPSURE) , CERVICAL BRUSH SAMPLE

	CYTOLOGY NO.	15326/23
I	SPECIMEN	
a	SPECIMEN ADEQUACY	ADEQUATE
b	SPECIMEN TYPE	LIQUID-BASED PREPARATION (LBC)
	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. 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

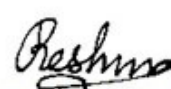
*** End Of Report ***



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



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



Dr. Reshma Stanly
M.B.B.S, DNB (Pathology)
Consultant Pathologist



SIN No: CS067606

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

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Patient Name	: Mrs. TAMILSELVI E	Age/Gender	: 29 Y/F
UHID/MR No.	: CANN.0000226949	OP Visit No	: CANNOPV369534
Sample Collected on	:	Reported on	: 09-09-2023 18:21
LRN#	: RAD2094278	Specimen	:
Ref Doctor	: SELF		
Emp/Auth/TPA ID	: 124194		

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

Liver shows uniform echopattern with no evidence of focal or diffuse pathology.
Intra and extra hepatic biliary passages are not dilated.
Gall bladder appears normal with no evidence of calculus. Wall thickness appear normal.

Pancreas and spleen appear normal. Spleen measures 10.2cms.
Portal and splenic veins appear normal.
No evidence of ascites or lymphadenopathy. Diaphragmatic movements are satisfactory.
There is no evidence of sub diaphragmatic pathology or pleural effusion.

Right kidney measures 9.7 x 3.7cms. Left kidney measures 10.7 x 5.2cms.
Both kidneys show normal echopattern with no evidence of calculi or calyceal dilatation.

Uterus measures 7.1 x 4.5 x 5.2 cms and shows normal endometrial and myometrial echoes.
The endometrial thickness 5.9mm.

Right ovary measures 3.1 x 2.2cms.

Left ovary measures 3.3 x 2.3cms.

Both ovaries are normal in size and echotexture.

No mass lesion seen in the pelvis.

Bladder is normal in contour.

IMPRESSION:

***NO SIGNIFICANT ABNORMALITY DETECTED**

Dr. ASHIQ MOHAMMED JEFFREY

MD

Radiology

Patient Name	: Mrs. TAMILSELVI E	Age/Gender	: 29 Y/F
UHID/MR No.	: CANN.0000226949	OP Visit No	: CANNOPV369534
Sample Collected on	:	Reported on	: 09-09-2023 14:31
LRN#	: RAD2094278	Specimen	:
Ref Doctor	: SELF		
Emp/Auth/TPA ID	: 124194		

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Lung fields are clear.

Cardio thoracic ratio is normal.

Apices, costo and cardiophrenic angles are free.

Cardio vascular shadow and hila show no abnormal feature.

Bony thorax shows no significant abnormality.

Domes of diaphragm are well delineated.

IMPRESSION:

***NO SIGNIFICANT ABNORMALITY DETECTED.**

Dr. PRAVEENA SHEKAR T
MBBS, DMRD, FAGE
Radiology



E. Thanivel

CANN - 226949

OCR - 95432

Your Apollo order has been confirmed

noreply@apolloclinics.info <noreply@apolloclinics.info>

Sat 9/2/2023 1:38 PM

To:wellness@mediwheel.in <wellness@mediwheel.in>

Cc:Annanagar Apolloclinic <annanagar@apolloclinic.com>;Haranath S <haranath.s@apolloclinic.com>;Syamsunder M <syamsunder.m@apollohl.com>



Dear Tamilselvi E,

Namaste Team,

Greetings from Apollo Clinics,

With regards to the below request the below appointment is scheduled at **ANNA NAGAR clinic** on **2023-09-09** at **08:35-08:40**.

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]

"In view of corona virus precautionary measures, you are requested to take a mandatory check for symptoms & self-declaration at centre. Please cooperate. Thank you."

NOTE: We are not providing the breakfast in view of corona virus. And that customers on their own should carry their breakfast.

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 undergo 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 medication, alcohol, cigarettes, tobacco or any other liquids (except Water) in the morning.
3. Bring urine sample in a container if possible (containers are available at the Health Check Centre).
4. Please bring all your medical prescriptions and previous health medical records with you.
5. Kindly inform the health check reception in case 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.

As per agreement terms please carry all relevant documents such as Confirmation mail, valid id proof, company ID card etc.

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

Clinic Address: APOLLO MEDICAL CENTRE,NO-30,F- BLOCK,2ND AVENUE, ANNANAGAR EAST,CHENNAI - 600102.

Contact No: 7358392880/7305702537.

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.

Note: Speak Freely. Speak Free! Speak to our Doctor from 8:00 PM to 8:00 AM by calling 1860 500 7788 and press #2 on the IVR. Now get all your Health related queries answered by an expert! Service by Apollo Clinic.

Warm Regards,
Apollo Team

Mrs. Tamilselvi

29/F

9/9/23.

Height:	Weight:	BMI:	Waist Circum:
Temp:	Pulse:	Resp:	B.P:

General Examination / Allergies
History

Rx

Patient advised full mouth
deep scaling



Follow up date:

Doctor Signature & Stamp

ENT check up

Tamil Selvi

29/f

9/9/23

Height:	Weight:	BMI:	Waist Circum:
Temp:	Pulse:	Resp:	B.P:

General Examination / Allergies
History

No complaints

O/E

(R) Ear wax



Follow up date:

Doctor Signature & Stamp

Convenient & reliable. Complete diagnostic services for the entire family. All under one roof.



Apollo Clinic

CONSENT FORM

Patient Name: Paul Selvi Age: 29/F

UHID Number: 226949 Company Name: Arc O Perini

I Mr/Mrs/Ms Paul Selvi Employee of Arc O Perini

(Company) Want to inform you that I am not interested in getting Op. Head

Tests done which is a part of my routine health check package.

And I claim the above statement in my full consciousness.

Patient Signature: E. Paul Selvi

Date: 09/09/23



No. 30, F-Block, 2nd Avenue,
Anna Nagar East, Chennai-600 102
Tel: 044-26224505, Mobile: 7358382830
Toll No. 1860 500 7788

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:

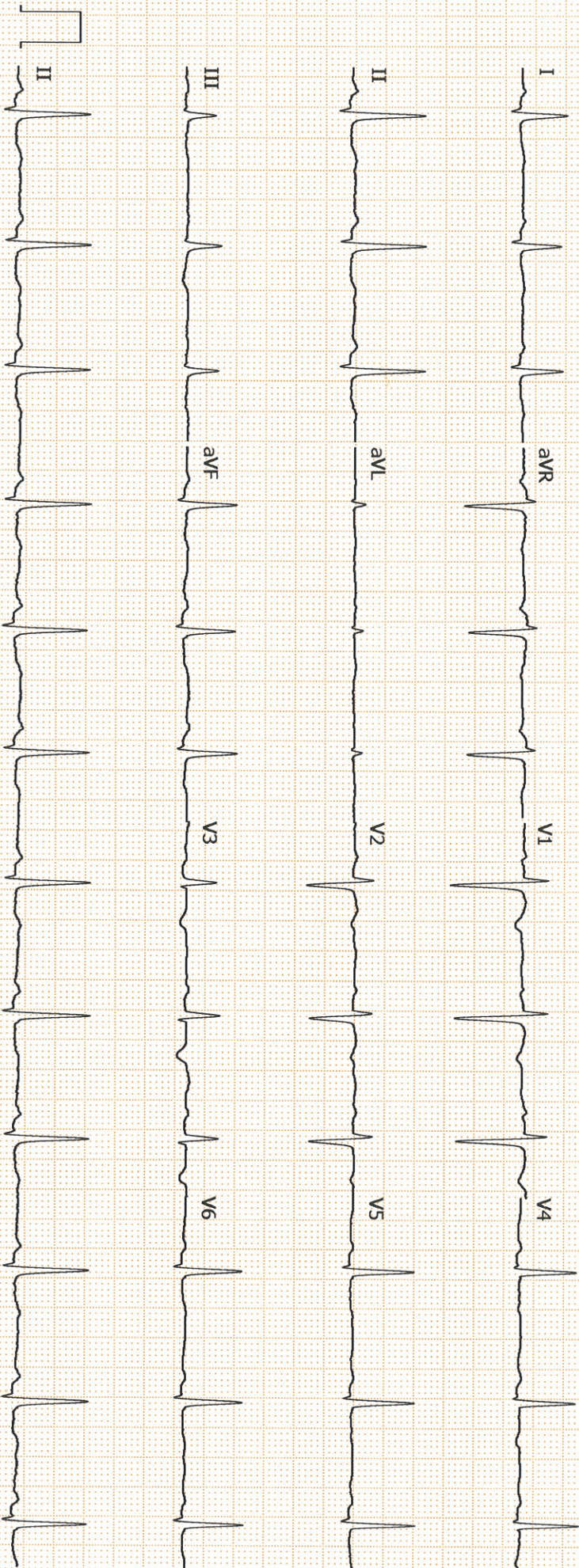
09.09.2023 11:23:37 AM
APOLLO MEDICAL CENTER
ANNA NAGAR
CHENNAI

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

Room:

70 bpm
-- / -- mmHg

QRS : 86 ms
QT / QTcBaz : 386 / 416 ms
PR : 174 ms
P : 98 ms
RR / PP : 852 / 857 ms
P / QRS / T : 50 / 64 / 46 degrees



MR
T↓ in V3
Non specific ST-T changes

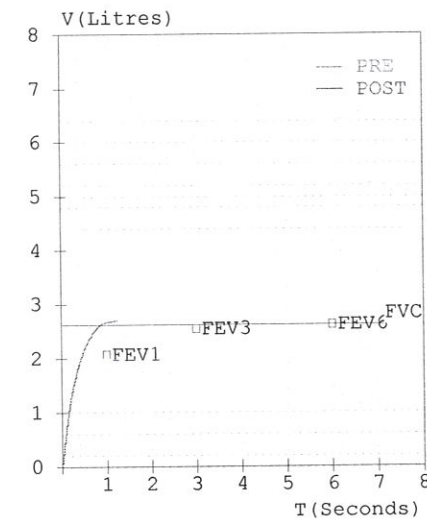
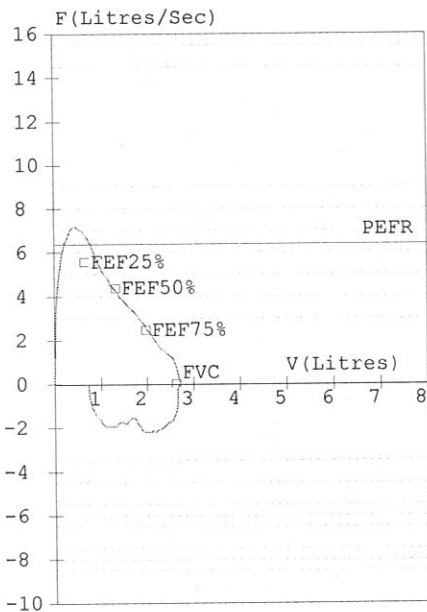
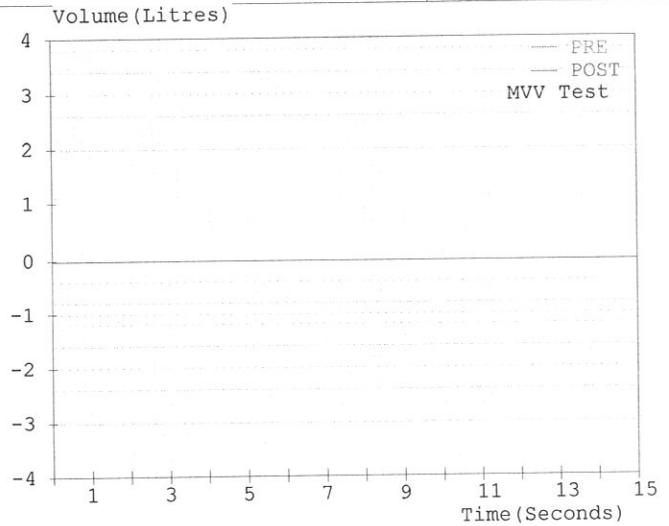
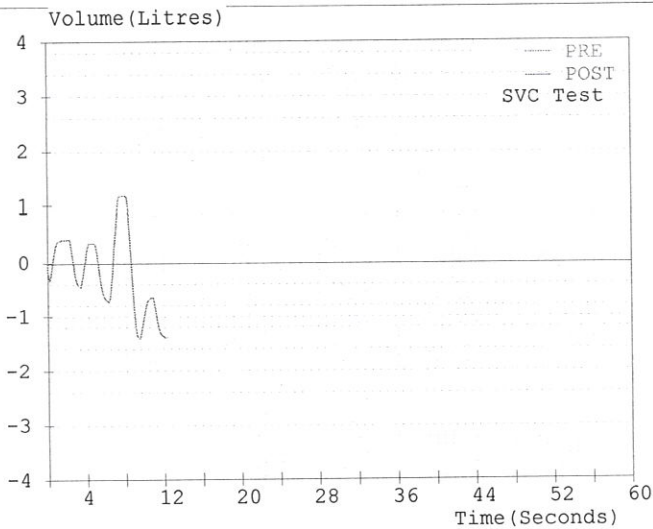
Out

Apollo Medical centre

#F30,2nd Avenue Annanagar East,Chennai,600102

Patient: MRS TAMILSELVI E
 Refd. By:
 Pred.Eqns: RECORDERS
 Date : 09-Sep-2023 12:28 PM

Age : 29 Years Gender : Female
 Height : 170 Cms Smoker : No
 Weight : 80 Kgs Eth. Corr: 90
 ID: 226949 R Temp :



Spirometry Results

Parameter	Pred	M.Pre	%Pred	M.Post	%Pred	%Imp
FVC (L)	02.62	02.72	104	-----	---	---
FEV1 (L)	02.08	02.69	129	-----	---	---
FEV1/FVC (%)	79.39	98.90	125	-----	---	---
FEF25-75 (L/s)	02.89	03.92	136	-----	---	---
PEFR (L/s)	06.39	07.10	111	-----	---	---
FIVC (L)	-----	01.99	---	-----	---	---
FEV.5 (L)	-----	02.16	---	-----	---	---
FEV3 (L)	02.54	02.72	107	-----	---	---
PIFR (L/s)	-----	02.19	---	-----	---	---
FEF75-85 (L/s)	-----	01.83	---	-----	---	---
FEF.2-1.2 (L/s)	05.17	05.99	116	-----	---	---
FEF 25% (L/s)	05.57	06.68	120	-----	---	---
FEF 50% (L/s)	04.39	04.07	093	-----	---	---
FEF 75% (L/s)	02.46	02.38	097	-----	---	---
FEV.5/FVC (%)	-----	79.41	---	-----	---	---
FEV3/FVC (%)	96.95	100.00	103	-----	---	---
FET (Sec)	-----	01.33	---	-----	---	---
ExplTime (Sec)	-----	00.06	---	-----	---	---
Lung Age (Yrs)	029	021	072	-----	---	---
FEV6 (L)	02.62	-----	---	-----	---	---
FIF 25% (L/s)	-----	01.27	---	-----	---	---
FIF 50% (L/s)	-----	01.79	---	-----	---	---
FIF 75% (L/s)	-----	02.17	---	-----	---	---
SVC (L)	01.17	02.59	221	-----	---	---
ERV (L)	-----	00.69	---	-----	---	---
IRV (L)	-----	00.81	---	-----	---	---
VE (L/min)	-----	21.80	---	-----	---	---
Rf (l/min)	-----	20.00	---	-----	---	---
Ti (sec)	-----	01.40	---	-----	---	---
Te (sec)	-----	01.60	---	-----	---	---
VT (L)	-----	01.09	---	-----	---	---
VT/Ti	-----	00.78	---	-----	---	---
Ti/Ttot	-----	00.47	---	-----	---	---
IC (L)	-----	01.90	---	-----	---	---
MVV (L/min)	107	-----	---	-----	---	---
MRf (l/min)	-----	-----	---	-----	---	---
MVT (L)	-----	-----	---	-----	---	---

Pre Medication Report Indicates
 Spirometry within normal limits as (FEV1/FVC)%Pred >95 and FVC%Pred >80.

Patient Name : Mrs. TAMILSELVI E Age : 29 Y/F
UHID : CANN.0000226949 OP Visit No : CANNOPV369534
Conducted By: : Dr. RAKESH P GOPAL Conducted Date : 09-09-2023 14:52
Referred By : SELF

2D-ECHO WITH COLOUR DOPPLER

Dimensions:

Ao (ed)	2.1 CM
LA (es)	2.7 CM
LVID (ed)	4.0 CM
LVID (es)	2.5 CM
IVS (Ed)	0.8 CM
LVPW (Ed)	0.8 CM
EF	66 %
%FD	36 %
MITRAL VALVE :	NORMAL
AML	NORMAL
PML	NORMAL
AORTIC VALVE	NORMAL
TRICUSPID VALVE	NORMAL
PULMONARY VALVE	NORMAL
RIGHT VENTRICLE	NORMAL
INTER ATRIAL SEPTUM	INTACT
INTER VENTRICULAR SEPTUM	INTACT
PULMONARY ARTERY	NORMAL
AORTA	NORMAL
RIGHT ATRIUM	NORMAL
LEFT ATRIUM	NORMAL
LEFT VENTRICLE	NORMAL
PERICARDIUM	NORMAL

Patient Name	: Mrs. TAMILSELVI E	Age	: 29 Y/F
UHID	: CANN.0000226949	OP Visit No	: CANNOPV369534
Conducted By:	: Dr. RAKESH P GOPAL	Conducted Date	: 09-09-2023 14:52
Referred By	: SELF		

DOPPLER STUDIES MITRAL INFLOW : E : 0.9 m/sc A: 0.6 m/sc

Velocity / Gradient Across Pulmonic Valve : 0.6 m/sc

Velocity / Gradient Across Aortic Valve : 1.0 m/sc

IMPRESSION :

NORMAL CHAMBER DIMENSION

STRUCTURALLY VALVES ARE NORMAL

NO REGIONAL WALL MOTION ABNORMALITY

NORMAL LEFT VENTRICULAR SYSTOLIC FUNCTION

NO PAH / CLOT / PE .

Rakesh Gopal

Dr.
RAKESH P
GOPAL

Patient Name	: Mrs. TAMILSELVI E	Age	: 29 Y/F
UHID	: CANN.0000226949	OP Visit No	: CANNOPV369534
Conducted By:	: Dr. RAKESH P GOPAL	Conducted Date	: 09-09-2023 14:52
Referred By	: SELF		

Patient Name	: Mrs. TAMILSELVI E	Age	: 29 Y/F
UHID	: CANN.0000226949	OP Visit No	: CANNOPV369534
Reported By:	: Dr. ARULNITHI AYYANATHAN	Conducted Date	: 09-09-2023 16:22
Referred By	: SELF		

ECG REPORT

Observation :-

1. Heart rate is 70 beats per minutes.

Impression:

NON SPECIFIC ST / T CHANGES ,

T WAVE INVERSION IN V3 .

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

Dr. ARULNITHI AYYANATHAN