

Patient Name : Mrs.PRIYA BADALWAD	Collected : 24/Mar/2023 09:17AM
Age/Gender : 35 Y 5 M 18 D/F	Received : 24/Mar/2023 01:01PM
UHID/MR No : SPUN.0000010729	Reported : 24/Mar/2023 02:27PM
Visit ID : SPUNOPV55539	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 105557 0	

DEPARTMENT OF HAEMATOLOGY

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

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

HAEMOGLOBIN	12	g/dL	12-15	Spectrophotometer
PCV	36.60	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.53	Million/cu.mm	3.8-4.8	Electrical Impedence
MCV	80.9	fL	83-101	Calculated
MCH	26.6	pg	27-32	Calculated
MCHC	32.9	g/dL	31.5-34.5	Calculated
R.D.W	17.9	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	7,310	cells/cu.mm	4000-10000	Electrical Impedence

DIFFERENTIAL LEUCOCYTIC COUNT (DLC)

NEUTROPHILS	59.9	%	40-80	Electrical Impedence
LYMPHOCYTES	32.7	%	20-40	Electrical Impedence
EOSINOPHILS	0.9	%	1-6	Electrical Impedence
MONOCYTES	6.4	%	2-10	Electrical Impedence
BASOPHILS	0.1	%	<1-2	Electrical Impedence

ABSOLUTE LEUCOCYTE COUNT

NEUTROPHILS	4378.69	Cells/cu.mm	2000-7000	Electrical Impedence
LYMPHOCYTES	2390.37	Cells/cu.mm	1000-3000	Electrical Impedence
EOSINOPHILS	65.79	Cells/cu.mm	20-500	Electrical Impedence
MONOCYTES	467.84	Cells/cu.mm	200-1000	Electrical Impedence
BASOPHILS	7.31	Cells/cu.mm	0-100	Electrical Impedence

PLATELET COUNT

PLATELET COUNT	320000	cells/cu.mm	150000-410000	Electrical impedence
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ERYTHROCYTE SEDIMENTATION RATE (ESR)

ERYTHROCYTE SEDIMENTATION RATE (ESR)	9	mm at the end of 1 hour	0-20	Modified Westergren
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PERIPHERAL SMEAR

RBCs ARE NORMOCYTIC NORMOCHROMIC.ANISOCYTOSIS+.
TLC , DLC WITHIN NORMAL LIMIT. NO IMMATURE CELLS ARE SEEN.
PLATELETS ARE ADEQUATE.
NO HEMOPARASITES SEEN



Patient Name : Mrs.PRIYA BADALWAD	Collected : 24/Mar/2023 09:17AM
Age/Gender : 35 Y 5 M 18 D/F	Received : 24/Mar/2023 01:01PM
UHID/MR No : SPUN.0000010729	Reported : 24/Mar/2023 05:53PM
Visit ID : SPUNOPV55539	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 105557 0	

DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD-EDTA

BLOOD GROUP TYPE	O			Forward & Reverse Grouping with Slide/Tube Aggluti
Rh TYPE	POSITIVE			Forward & Reverse Grouping with Slide/Tube Agglutination
WEAK DU POSITIVE				



Patient Name : Mrs.PRIYA BADALWAD	Collected : 24/Mar/2023 11:32AM
Age/Gender : 35 Y 5 M 18 D/F	Received : 24/Mar/2023 12:43PM
UHID/MR No : SPUN.0000010729	Reported : 24/Mar/2023 01:28PM
Visit ID : SPUNOPV55539	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 105557 0	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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GLUCOSE, FASTING , NAF PLASMA	94	mg/dL	70-100	HEXOKINASE
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Comment:

As per American Diabetes Guidelines

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

GLUCOSE, POST PRANDIAL (PP), 2 HOURS , NAF PLASMA	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



Patient Name : Mrs.PRIYA BADALWAD	Collected : 24/Mar/2023 09:17AM
Age/Gender : 35 Y 5 M 18 D/F	Received : 24/Mar/2023 01:01PM
UHID/MR No : SPUN.0000010729	Reported : 24/Mar/2023 03:08PM
Visit ID : SPUNOPV55539	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 105557 0	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD-EDTA	5.1	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD-EDTA	100	mg/dL		Calculated

Comment:

Reference Range as per American Diabetes Association (ADA):

REFERENCE GROUP	HBA1C IN %
NON DIABETIC ADULTS >18 YEARS	<5.7
AT RISK (PREDIABETES)	5.7 – 6.4
DIAGNOSING 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. A1C test should be performed at least two times a year in patients who are meeting treatment goals (and who have stable glycemic control).
2. Lowering A1C to below or around 7% has been shown to reduce microvascular and neuropathic complications of type 1 and type 2 diabetes. When mean annual HbA1c is <1.1 times ULN (upper limit of normal), renal and retinal complications are rare, but complications occur in >70% of cases when HbA1c is >1.7 times ULN.
3. 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. Fructosamine may be used as an alternate measurement of glycemic control



Patient Name : Mrs.PRIYA BADALWAD	Collected : 24/Mar/2023 09:17AM
Age/Gender : 35 Y 5 M 18 D/F	Received : 24/Mar/2023 12:46PM
UHID/MR No : SPUN.0000010729	Reported : 24/Mar/2023 02:02PM
Visit ID : SPUNOPV55539	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 105557 0	

DEPARTMENT OF BIOCHEMISTRY

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

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

TOTAL CHOLESTEROL	230	mg/dL	<200	CHO-POD
TRIGLYCERIDES	70	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	56	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	174	mg/dL	<130	Calculated
LDL CHOLESTEROL	159.79	mg/dL	<100	Calculated
VLDL CHOLESTEROL	14.09	mg/dL	<30	Calculated
CHOL / HDL RATIO	4.11		0-4.97	Calculated

Comment:

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

	Desirable	Borderline High	High	Very High
TOTAL CHOLESTEROL	< 200	200 - 239	≥ 240	
TRIGLYCERIDES	<150	150 - 199	200 - 499	≥ 500
LDL	Optimal < 100 Near Optimal 100-129	130 - 159	160 - 189	≥ 190
HDL	≥ 60			
NON-HDL CHOLESTEROL	Optimal <130; Above Optimal 130-159	160-189	190-219	>220

Measurements in the same patient 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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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.17	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.08	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.09	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	14.49	U/L	<35	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	29.3	U/L	<35	IFCC
ALKALINE PHOSPHATASE	51.02	U/L	30-120	IFCC
PROTEIN, TOTAL	6.86	g/dL	6.6-8.3	Biuret
ALBUMIN	3.76	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.10	g/dL	2.0-3.5	Calculated
A/G RATIO	1.21		0.9-2.0	Calculated



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Visit ID : SPUNOPV55539	Status : Final Report
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DEPARTMENT OF BIOCHEMISTRY

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

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

CREATININE	0.51	mg/dL	0.55-1.02	Modified Jaffe, Kinetic
UREA	13.37	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	6.2	mg/dL	8.0 - 23.0	Calculated
URIC ACID	2.79	mg/dL	2.6-6.0	Uricase PAP
CALCIUM	8.90	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	3.20	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	137.19	mmol/L	136-146	ISE (Indirect)
POTASSIUM	5.1	mmol/L	3.5-5.1	ISE (Indirect)
CHLORIDE	103.96	mmol/L	101-109	ISE (Indirect)



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Visit ID : SPUNOPV55539	Status : Final Report
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Emp/Auth/TPA ID : 105557 0	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	14.85	U/L	<38	IFCC



Patient Name : Mrs.PRIYA BADALWAD	Collected : 24/Mar/2023 09:17AM
Age/Gender : 35 Y 5 M 18 D/F	Received : 24/Mar/2023 12:49PM
UHID/MR No : SPUN.0000010729	Reported : 24/Mar/2023 01:44PM
Visit ID : SPUNOPV55539	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 105557 0	

DEPARTMENT OF IMMUNOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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THYROID PROFILE (TOTAL T3, TOTAL T4, TSH) , SERUM				
TRI-iodothyronine (T3, TOTAL)	0.9	ng/mL	0.64-1.52	CMIA
Thyroxine (T4, TOTAL)	7.77	µg/dL	4.87-11.72	CMIA
Thyroid Stimulating Hormone (TSH)	0.890	µIU/mL	0.35-4.94	CMIA

Comment:

Serum TSH concentrations exhibit a diurnal variation with the peak occurring during the night and the nadir occurring between 10 a.m. and 4 p.m. In primary hypothyroidism, thyroid-stimulating hormone (TSH) levels will be elevated. In primary hyperthyroidism, TSH levels will be low. Elevated or low TSH in the context of normal free thyroxine is often referred to as subclinical hypo- or hyperthyroid-ism, respectively. Physiological rise in Total T3 / T4 levels is seen in pregnancy and in patients on steroid therapy.

Recommended test for T3 and T4 is unbound fraction or free levels as it is metabolically active.

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



Patient Name : Mrs.PRIYA BADALWAD	Collected : 24/Mar/2023 09:17AM
Age/Gender : 35 Y 5 M 18 D/F	Received : 24/Mar/2023 12:40PM
UHID/MR No : SPUN.0000010729	Reported : 24/Mar/2023 01:40PM
Visit ID : SPUNOPV55539	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 105557 0	

DEPARTMENT OF CLINICAL PATHOLOGY

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

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

PHYSICAL EXAMINATION

COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pH	6.0		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	1.005		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 - 3	/hpf	0-5	Microscopy
EPITHELIAL CELLS	1 - 2	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY



Patient Name : Mrs.PRIYA BADALWAD	Collected : 24/Mar/2023 09:17AM
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Visit ID : SPUNOPV55539	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 105557 0	

DEPARTMENT OF CLINICAL PATHOLOGY

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

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



Patient Name : Mrs.PRIYA BADALWAD	Collected : 24/Mar/2023 02:04PM
Age/Gender : 35 Y 5 M 18 D/F	Received : 25/Mar/2023 01:19PM
UHID/MR No : SPUN.0000010729	Reported : 27/Mar/2023 01:39PM
Visit ID : SPUNOPV55539	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 105557 0	

DEPARTMENT OF CYTOLOGY



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

LBC PAP TEST- PAPSURE , LBC FLUID

	CYTOLOGY NO.	5770/23
I	SPECIMEN	
a	SPECIMEN ADEQUACY	ADEQUATE
b	SPECIMEN TYPE	LIQUID-BASED PREPARATION (LBC)
	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.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. K. RAMA KRISHNA REDDY
M.B.B.S, M.D
CONSULTANT PATHOLOGIST




Dr Sneha Shah
MBBS, MD (Pathology)
Consultant Pathologist




Dr. Sanjay Ingle
M.B.B.S,MD(Pathology)
Consultant Pathologist



Patient Name : Mrs. Priya Badalwad

Age/Gender : 35 Y/F

UHID/MR No. : SPUN.0000010729

OP Visit No : SPUNOPV55539

Sample Collected on :

Reported on : 02-04-2023 13:44

LRN# : RAD1957540

Specimen :

Ref Doctor : SELF

Emp/Auth/TPA ID : 105557 0

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

Liver : appears normal in size and echo texture. No focal lesion is seen. PV and CBD normal.
No dilatation of the intrahepatic biliary radicals is seen.

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

No evidence of periGB

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

Pancreas : appears normal in echopattern. No focal lesion/calcification.

Pancreatic duct appears normal.

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

Right kidney-104 X 43 mm Left kidney – 109 X 47 mm

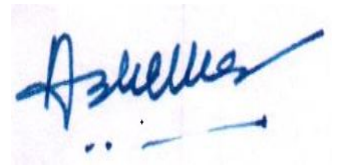
Urinary Bladder :- is well distended and appears normal. No evidence of any wall thickening or abnormality. No evidence of any intrinsic or extrinsic
bladder abnormality detected.

Uterus : appears normal in size measuring 87x34x54 mm. It shows normal shape & echo pattern. Endometrial echo-complex appears normal and
measures 8 mm.

Both ovaries :- appear normal in size, shape and echo pattern. Right ovary measures 34x17 mm. Left ovary measures 30x22 mm. No obvious free fluid
or lymphadenopathy is noted in the abdomen.

IMPRESSION :-

Normal USG abdomen and pelvis.



Dr. ABHIMANYU KELKAR

MD

Radiology

Date : 24-08-23
MRNO :
Name : priya badalwad
Age/Gender : 35
Mobile No :

Department : G.S
Consultant :
Reg. No : Dr. samrat shah
Qualification :

Consultation Timing :

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

General Examination / Allergies
History

Clinical Diagnosis & Management Plan

- All reports Normal

→ No complains.

found fit to join duty.

Follow up date:

Doctor Signature

Date : 24-03-23
MRNO : SPON-0000610729
Name : priya badalwad
Age/Gender : 35/F
Mobile No :

Department : Gynaec/Obs
Consultant :
Reg. No : Dr. Gaurav Pawale
Qualification :

Consultation Timing :

SP021-10051.

Pulse : 86/min	B.P : 110/70	Resp : 21/min	Temp : 98°F
Weight : 78-7kg	Height : 158 cm	BMI : 31.5	Waist Circum : -

General Examination / Allergies
History

Clinical Diagnosis & Management Plan

P/L
 ♂ 2 USG.
 Lmp - Reg / 28-32 / 4-6.d.
 15 days.
 - Leucorrhoea.
 - P/L - Leucorrhoea.
 P/O - wt Bulky.
 Adv
 - TUS to P/O fibroid + Adenomyosis.

Follow up date:

Doctor Signature

Date : 24/03/23
MRNO :
Name : Priya Badalwad
Age/Gender :
Mobile No : 351F

Department : ENT
Consultant :
Reg. No : Dr. Shivprakash
Qualification : Mehta
Consultation Timing :

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

General Examination / Allergies
History

Clinical Diagnosis & Management Plan

ENT examination - clinically
NAD



Dr. Shiv Mehta
MBBS, MS (ENT), Head & Neck Surgeon
Reg. No. 2010030364 (MMC)
Mob.: 9890250205

Follow up date:

Doctor Signature

Name : Mrs. Priya Badalwad

Age: 35 Y

UHID:SPUN.0000010729



OP Number:SPUNOPV55539

Address : Pune Ambegaon

Sex: F

Plan : ARCOFEMI MEDIWHEEL FEMALE AHC CREDIT PAN
INDIA OP AGREEMENT

Bill No :SPUN-OCR-9128

Date : 24.03.2023 09:12

Sno	Service Type/ServiceName	Department
1	ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324	
<input checked="" type="checkbox"/>	URINE GLUCOSE(FASTING)	
<input checked="" type="checkbox"/>	GAMMA GLUTAMYL TRANSFERASE (GGT)	
<input checked="" type="checkbox"/>	HbA1c, GLYCATED HEMOGLOBIN	
<input checked="" type="checkbox"/>	2 D ECHO	
<input checked="" type="checkbox"/>	LIVER FUNCTION TEST (LFT)	
<input checked="" type="checkbox"/>	X-RAY CHEST PA	
<input checked="" type="checkbox"/>	GLUCOSE, FASTING	
<input checked="" type="checkbox"/>	HEMOGRAM + PERIPHERAL SMEAR	
<input checked="" type="checkbox"/>	ENT CONSULTATION	
<input checked="" type="checkbox"/>	FITNESS BY GENERAL PHYSICIAN	
<input checked="" type="checkbox"/>	GYNAECOLOGY CONSULTATION	
<input checked="" type="checkbox"/>	DIET CONSULTATION	
<input checked="" type="checkbox"/>	COMPLETE URINE EXAMINATION	
<input checked="" type="checkbox"/>	URINE GLUCOSE(POST PRANDIAL)	
<input checked="" type="checkbox"/>	PERIPHERAL SMEAR	
<input checked="" type="checkbox"/>	ECG	
<input checked="" type="checkbox"/>	BLOOD GROUP ABO AND RH FACTOR	
<input checked="" type="checkbox"/>	LIPID PROFILE	
<input checked="" type="checkbox"/>	BODY MASS INDEX (BMI)	
<input checked="" type="checkbox"/>	LBC PAP TEST- PAPSURE	
<input checked="" type="checkbox"/>	OPHTHAL BY GENERAL PHYSICIAN	
<input checked="" type="checkbox"/>	RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)	
<input checked="" type="checkbox"/>	ULTRASOUND - WHOLE ABDOMEN <i>+ Pelvis (TUS)</i>	
<input checked="" type="checkbox"/>	THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)	
<input checked="" type="checkbox"/>	DENTAL CONSULTATION	
<input checked="" type="checkbox"/>	GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL) <i>11.30 AM</i>	

Patient Name : Mrs.PRIYA BADALWAD	Collected : 24/Mar/2023 09:17AM
Age/Gender : 35 Y 5 M 18 D/F	Received : 24/Mar/2023 01:01PM
UHID/MR No : SPUN.0000010729	Reported : 24/Mar/2023 05:53PM
Visit ID : SPUNOPV55539	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 105557 0	

DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD-EDTA

BLOOD GROUP TYPE	O			Forward & Reverse Grouping with Slide/Tube Aggluti
Rh TYPE	POSITIVE			Forward & Reverse Grouping with Slide/Tube Agglutination
WEAK DU POSITIVE				



TOUCHING LIVES Patient Name : Mrs.PRIYA BADALWAD Age/Gender : 35 Y 5 M 18 D/F UHID/MR No : SPUN.0000010729 Visit ID : SPUNOPV55539 Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 105557 0	Collected : 24/Mar/2023 09:17AM Received : 24/Mar/2023 12:40PM Reported : 24/Mar/2023 01:17PM Status : Final Report Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
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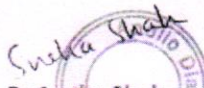
DEPARTMENT OF CLINICAL PATHOLOGY


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

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

*** End Of Report ***

Result/s to Follow:
BLOOD GROUP ABO AND RH FACTOR, LBC PAP TEST- PAPSURE


 Dr. Sneha Shah
 MBBS, MD (Pathology)
 Consultant Pathologist


 Dr. Sanjay Ingle
 M.B.B.S, MD(Pathology)
 Consultant Pathologist



TOUCHING LIVES Patient Name : Mrs.PRIYA BADALWAD Age/Gender : 35 Y 5 M 18 D/F UHID/MR No : SPUN.0000010729 Visit ID : SPUNOPV55539 Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 105557 0	Collected : 24/Mar/2023 09:17AM Received : 24/Mar/2023 12:40PM Reported : 24/Mar/2023 01:40PM Status : Final Report Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
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DEPARTMENT OF CLINICAL PATHOLOGY

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

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

PHYSICAL EXAMINATION

COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pH	6.0		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	1.005		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 - 3	/hpf	0-5	Microscopy
EPITHELIAL CELLS	1 - 2	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY



Patient Name : Mrs.PRIYA BADALWAD	Collected : 24/Mar/2023 09:17AM
Age/Gender : 35 Y 5 M 18 D/F	Received : 24/Mar/2023 12:49PM
UHID/MR No : SPUN.0000010729	Reported : 24/Mar/2023 01:44PM
Visit ID : SPUNOPV55539	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 105557 0	

DEPARTMENT OF IMMUNOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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THYROID PROFILE (TOTAL T3, TOTAL T4, TSH) , SERUM				
TRI-iodothyronine (T3, TOTAL)	0.9	ng/mL	0.64-1.52	CMIA
THYROXINE (T4, TOTAL)	7.77	µg/dL	4.87-11.72	CMIA
THYROID STIMULATING HORMONE (TSH)	0.890	µIU/mL	0.35-4.94	CMIA

Comment:

Serum TSH concentrations exhibit a diurnal variation with the peak occurring during the night and the nadir occurring between 10 a.m. and 4 p.m. In primary hypothyroidism, thyroid-stimulating hormone (TSH) levels will be elevated. In primary hyperthyroidism, TSH levels will be low. Elevated or low TSH in the context of normal free thyroxine is often referred to as subclinical hypo- or hyperthyroid-ism, respectively. Physiological rise in Total T3 / T4 levels is seen in pregnancy and in patients on steroid therapy.

Recommended test for T3 and T4 is unbound fraction or free levels as it is metabolically active.

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



Patient Name : Mrs.PRIYA BADALWAD	Collected : 24/Mar/2023 09:17AM
Age/Gender : 35 Y 5 M 18 D/F	Received : 24/Mar/2023 12:46PM
UHID/MR No : SPUN.0000010729	Reported : 24/Mar/2023 02:02PM
Visit ID : SPUNOPV55539	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 105557 0	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	14.85	U/L	<38	IFCC



Patient Name : Mrs.PRIYA BADALWAD	Collected : 24/Mar/2023 09:17AM
Age/Gender : 35 Y 5 M 18 D/F	Received : 24/Mar/2023 12:46PM
UHID/MR No : SPUN.0000010729	Reported : 24/Mar/2023 02:02PM
Visit ID : SPUNOPV55539	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 105557 0	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT) , SERUM				
Test Name	Result	Unit	Bio. Ref. Range	Method
CREATININE	0.51	mg/dL	0.55-1.02	Modified Jaffe, Kinetic
UREA	13.37	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	6.2	mg/dL	8.0 - 23.0	Calculated
URIC ACID	2.79	mg/dL	2.6-6.0	Uricase PAP
CALCIUM	8.90	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	3.20	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	137.19	mmol/L	136-146	ISE (Indirect)
POTASSIUM	5.1	mmol/L	3.5-5.1	ISE (Indirect)
CHLORIDE	103.96	mmol/L	101-109	ISE (Indirect)



Patient Name : Mrs.PRIYA BADALWAD	Collected : 24/Mar/2023 09:17AM	Expertise. Empowering you.
Age/Gender : 35 Y 5 M 18 D/F	Received : 24/Mar/2023 12:46PM	
UHID/MR No : SPUN.0000010729	Reported : 24/Mar/2023 02:02PM	
Visit ID : SPUNOPV55539	Status : Final Report	
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED	
Emp/Auth/TPA ID : 105557 0		

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.17	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.08	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.09	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	14.49	U/L	<35	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	29.3	U/L	<35	IFCC
ALKALINE PHOSPHATASE	51.02	U/L	30-120	IFCC
PROTEIN, TOTAL	6.86	g/dL	6.6-8.3	Biuret
ALBUMIN	3.76	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.10	g/dL	2.0-3.5	Calculated
A/G RATIO	1.21		0.9-2.0	Calculated



Patient Name : Mrs.PRIYA BADALWAD	Collected : 24/Mar/2023 09:17AM
Age/Gender : 35 Y 5 M 18 D/F	Received : 24/Mar/2023 12:46PM
UHID/MR No : SPUN.0000010729	Reported : 24/Mar/2023 02:02PM
Visit ID : SPUNOPV55539	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor: Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 105557 0	

DEPARTMENT OF BIOCHEMISTRY

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

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

TOTAL CHOLESTEROL	230	mg/dL	<200	CHO-POD
TRIGLYCERIDES	70	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	56	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	174	mg/dL	<130	Calculated
LDL CHOLESTEROL	159.79	mg/dL	<100	Calculated
VLDL CHOLESTEROL	14.09	mg/dL	<30	Calculated
CHOL / HDL RATIO	4.11		0-4.97	Calculated

Comment:

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

	Desirable	Borderline High	High	Very High
TOTAL CHOLESTEROL	< 200	200 - 239	≥ 240	
TRIGLYCERIDES	<150	150 - 199	200 - 499	≥ 500
LDL	Optimal < 100 Near Optimal 100-129	130 - 159	160 - 189	≥ 190
HDL	≥ 60			
NON-HDL CHOLESTEROL	Optimal <130; Above Optimal 130-159	160-189	190-219	>220

Measurements in the same patient can show physiological and analytical variations.

NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.



Patient Name : Mrs.PRIYA BADALWAD	Collected : 24/Mar/2023 09:17AM
Age/Gender : 35 Y 5 M 18 D/F	Received : 24/Mar/2023 01:01PM
UHID/MR No : SPUN.0000010729	Reported : 24/Mar/2023 03:08PM
Visit ID : SPUNOPV55539	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 105557 0	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD-EDTA	5.1	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD-EDTA	100	mg/dL		Calculated

Comment:

Reference Range as per American Diabetes Association (ADA):

REFERENCE GROUP	HBA1C IN %
NON DIABETIC ADULTS >18 YEARS	<5.7
AT RISK (PREDIABETES)	5.7 – 6.4
DIAGNOSING 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. A1C test should be performed at least two times a year in patients who are meeting treatment goals (and who have stable glycemic control).
2. Lowering A1C to below or around 7% has been shown to reduce microvascular and neuropathic complications of type 1 and type 2 diabetes. When mean annual HbA1c is <1.1 times ULN (upper limit of normal), renal and retinal complications are rare, but complications occur in >70% of cases when HbA1c is >1.7 times ULN.
3. 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. Fructosamine may be used as an alternate measurement of glycemic control



TOUCHING LIVES Patient Name : Mrs.PRIYA BADALWAD Age/Gender : 35 Y 5 M 18 D/F UHID/MR No : SPUN.0000010729 Visit ID : SPUNOPV55539 Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 105557 0		Collected : 24/Mar/2023 11:32AM Received : 24/Mar/2023 12:43PM Reported : 24/Mar/2023 01:28PM Status : Final Report Sponsor Name : ARCOFEMI HEALTHCARE LIMITED	
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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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GLUCOSE, FASTING , NAF PLASMA	94	mg/dL	70-100	HEXOKINASE
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Comment:

As per American Diabetes Guidelines

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

GLUCOSE, POST PRANDIAL (PP), 2 HOURS , NAF PLASMA	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



Patient Name : Mrs.PRIYA BADALWAD	Collected : 24/Mar/2023 09:17AM	Expertise. Empowering you
Age/Gender : 35 Y 5 M 18 D/F	Received : 24/Mar/2023 01:01PM	
UHID/MR No : SPUN.0000010729	Reported : 24/Mar/2023 02:27PM	
Visit ID : SPUNOPV55539	Status : Final Report	
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED	
Emp/Auth/TPA ID : 105557 0		

DEPARTMENT OF HAEMATOLOGY

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

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

HAEMOGLOBIN	12	g/dL	12-15	Spectrophotometer
PCV	36.60	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.53	Million/cu.mm	3.8-4.8	Electrical Impedance
MCV	80.9	fL	83-101	Calculated
MCH	26.6	pg	27-32	Calculated
MCHC	32.9	g/dL	31.5-34.5	Calculated
R.D.W	17.9	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	7,310	cells/cu.mm	4000-10000	Electrical Impedance

DIFFERENTIAL LEUCOCYTIC COUNT (DLC)

NEUTROPHILS	59.9	%	40-80	Electrical Impedance
LYMPHOCYTES	32.7	%	20-40	Electrical Impedance
EOSINOPHILS	0.9	%	1-6	Electrical Impedance
MONOCYTES	6.4	%	2-10	Electrical Impedance
BASOPHILS	0.1	%	<1-2	Electrical Impedance

ABSOLUTE LEUCOCYTE COUNT

NEUTROPHILS	4378.69	Cells/cu.mm	2000-7000	Electrical Impedance
LYMPHOCYTES	2390.37	Cells/cu.mm	1000-3000	Electrical Impedance
EOSINOPHILS	65.79	Cells/cu.mm	20-500	Electrical Impedance
MONOCYTES	467.84	Cells/cu.mm	200-1000	Electrical Impedance
BASOPHILS	7.31	Cells/cu.mm	0-100	Electrical Impedance

PLATELET COUNT

PLATELET COUNT	320000	cells/cu.mm	150000-410000	Electrical impedance
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ERYTHROCYTE SEDIMENTATION RATE (ESR)

ERYTHROCYTE SEDIMENTATION RATE (ESR)	9	mm at the end of 1 hour	0-20	Modified Westergren
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PERIPHERAL SMEAR

RBCs ARE NORMOCYTIC NORMOCHROMIC.ANISOCYTOSIS+.

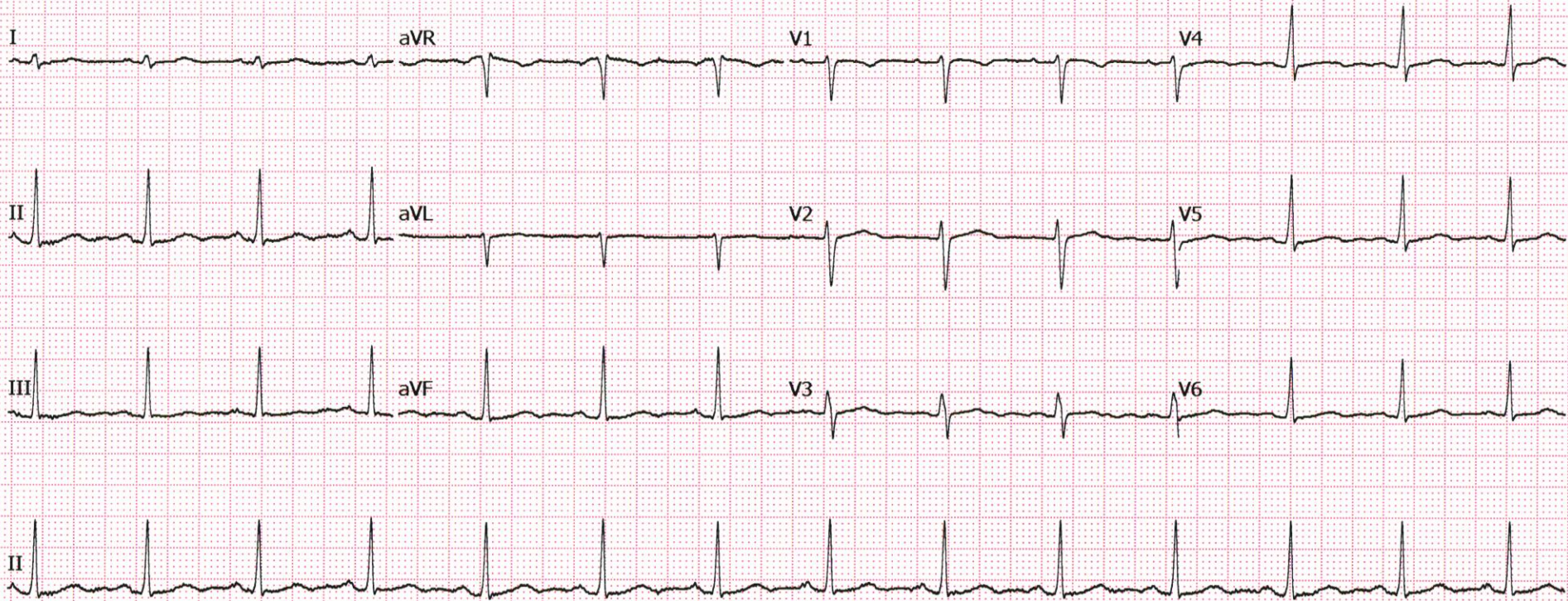
TLC , DLC WITHIN NORMAL LIMIT. NO IMMATURE CELLS ARE SEEN.
 PLATELETS ARE ADEQUATE.
 NO HEMOPARASITES SEEN



158 cm Female
78.0 kg

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:

QRS : 76 ms Normal sinus rhythm
QT / QTcBaz : 384 / 448 ms Normal ECG
PR : 156 ms
P : 102 ms
RR / PP : 728 / 731 ms
P / QRS / T : 60 / 89 / 56 degrees



EYE REPORT



ASH/PUN/OPHTH/06/02-0216

Name: Mrs. Priya Badalwad

Date: 24/03/23

Age / Sex: 35 y / F

Ref No.:

Complaint: NO complaints.

Examination

No DM

No HTN

Spectacle Rx

Vision { R 6/6 NG
L 6/6 NG

	Right Eye				Left Eye			
	Vision	Sphere	Cyl.	Axis	Vision	Sphere	Cyl.	Axis
Distance	6/6	-3.00	—	—	6/6	-3.00	—	—
Read	—	—	—	NG	—	—	—	NG
	Sphere	CYL	Axis	Vision	Sphere	CYL	Axis	Vision

Remarks: continue glasses.

WNL

PGP { R -3.00
L -3.00

Medications: ∴ BE colour vision Normal.

Trade Name	Frequency	Duration

Follow up: 1 yr

Consultant: *[Signature]*



Patient's Name :- Mrs. Priya Badalwad
MRN:SPUN.0000010729

AGE : 35 Yrs / F.

Ref. Doctor :- Health checkup

DATE : 24/03/2023

USG ABDOMEN & PELVIS

Liver : appears normal in size and echo texture. No focal lesion is seen. PV and CBD normal. No dilatation of the intrahepatic biliary radicals is seen.

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 echopattern. No focal lesion/calcification. Pancreatic duct appears normal.

Both the kidneys : appear normal in size, shape and echopattern. Cortical thickness and CM differentiation are maintained. No calculus / hydronephrosis seen on either side.
Right kidney-104 X 43 mm Left kidney – 109 X 47 mm

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

Uterus : appears normal in size measuring 87x34x54 mm. It shows normal shape & echo pattern. Endometrial echo-complex appears normal and measures 8 mm.

Both ovaries :- appear normal in size, shape and echo pattern. Right ovary measures 34x17 mm. Left ovary measures 30x22 mm. No obvious free fluid or lymphadenopathy is noted in the abdomen.

IMPRESSION :-

Normal USG abdomen and pelvis.


Dr. Abhimanyu Kelkar, M.D.

TABULAR SUMMARY REPORT

priya, badalwad
ID: 000010729

35years
158cm
Meds: no

Asian
78kg
Female

24-Mar-2023
12:58:44

BRUCE
Max HR: 165bpm 89% of max predicted 185bpm
Max BP: 150/100
Reason for Termination:
Comments:

Total Exercise time: 6:41
Maximum workload: 8.0METS

25.0 mm/s
10.0 mm/mV
100hz

Referred by: self
Test ind:

Phase Name	Stage Name	Time in Stage	Speed (mph)	Grade (%)	WorkLoad (METS)	HR (bpm)	BP (mmHg)	RPP (x100)
PRETEST	SUPINE	1:13	***	***	1.0	102	110/70	112
	STANDING	1:13	***	***	1.0	98	110/70	108
	HYPERVENT	1:13	***	***	1.0	98	110/70	108
EXERCISE	STAGE 1	3:00	1.7	10.0	4.6	136	139/90	189
	STAGE 2	3:00	2.5	12.0	7.0	153	139/90	213
	STAGE 3	0:41	3.4	14.0	8.0	164	150/100	246
RECOVERY	Post	0:15	1.7	4.5	7.5	158	150/100	237



Patient Name:	MRS.PRIYA BADALWAD	MR No:	SPUN.000010729
Age:	35 Years	Location:	Apollo Spectra Hospital Pune (Swargate)
Gender:	F	Physician:	ARCOFEMI
Image Count:	1	Date of Exam:	24-Mar-2023
Arrival Time:	24-Mar-2023 10:36	Date of Report:	24-Mar-2023 11:21

X-RAY CHEST P.A VIEW

HISTORY: Health check up

FINDINGS

Normal mediastinum.

Normal heart.

No focal mass lesion. No collapse or consolidation.

The apices and cardiophrenic angles are free.


No pleural or Pericardial effusion

No hilar or mediastinal lymphadenopathy is demonstrated.

No destructive osseous pathology is evident.

IMPRESSION:

No significant abnormality is seen.



Dr.V.Pavan Kumar.MBBS,DMRD.
Consultant Radiologist
Reg.No : 57017


CONFIDENTIALITY:

This transmission is confidential. If you are not the intended recipient, please notify us immediately. Any disclosure, distribution or other action based on the contents of this report may be unlawful.


PLEASE NOTE:

This radiological report is the professional opinion of the reporting radiologist based on the interpretation of the images and information provided at the time of reporting. It is meant to be used in correlation with other relevant clinical findings.

 भारत सरकार




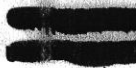
प्रिया दिगंबर बादलवाड
Priya Digamber Badalwad
जन्म वर्ष / Year of Birth 1987
स्त्री / Female



8582 3384 4211


आधार - सामान्य माणसाचा अधिकार


 आधार


 आळख प्राधिकरण
भारत सरकार


पत्ता D/O दिगंबर बादलवाड, घर
नं. 3-3-905, माऊली हॉस्पिटल जवळ,
व्यंकटेश नगर, नांदेड, नांदेड, नांदेड,
महाराष्ट्र, 431601

Address: D/O Digamber
Badalwad, H.No.3-3-905, Near
Mauli Hospital, Venkatesh
Nagar, Nanded, Nanded, Nanded,
Maharashtra, 431601

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