



: Ms.RAMYA GURRAMKONDA GURRAMKONDA

Age/Gender

: 37 Y 3 M 25 D/F

UHID/MR No Visit ID : CMAR.0000364561

Ref Doctor

: Self

Emp/Auth/TPA ID : 22E36276

: CMAROPV877702

Collected

: 26/Oct/2024 08:15AM

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: 26/Oct/2024 09:28AM

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: 26/Oct/2024 10:43AM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

PERIPHERAL SMEAR, WHOLE BLOOD EDTA

Page 1 of 16



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

Dr. Varsha Narayanan

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DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	10.6	g/dL	12.5-15	Spectrophotometer
PCV	31.60	%	36-46	Electronic pulse & Calculation
RBC COUNT	5.11	Million/cu.mm	3.8-4.8	Electrical Impedence
MCV	61.8	fL	83-101	Calculated
MCH	20.7	pg	27-32	Calculated
MCHC	33.5	g/dL	31.5-34.5	Calculated
R.D.W	20.5	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	6,320	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)			
NEUTROPHILS	51.9	%	40-80	Electrical Impedance
LYMPHOCYTES	33.1	%	20-40	Electrical Impedance
EOSINOPHILS	7.4	%	1-6	Electrical Impedance
MONOCYTES	5.9	%	2-10	Electrical Impedance
BASOPHILS	1.7	%	0-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	3280.08	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2091.92	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	467.68	Cells/cu.mm	20-500	Calculated
MONOCYTES	372.88	Cells/cu.mm	200-1000	Calculated
BASOPHILS	107.44	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	1.57		0.78- 3.53	Calculated
PLATELET COUNT	349000	cells/cu.mm	150000-410000	Electrical impedence
ERYTHROCYTE SEDIMENTATION RATE (ESR)	27	mm/hour	0-20	Capillary photometry
PERIPHERAL SMEAR				

RBCs: Shows microcytic hypochromic RBCs No nucleated RBCs seen

WBCs: Are normal in total number with mild increase in eosinophils.

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Dr. Varsha Narayanan M.B.B.S,M.D(Pathology)

Consultant Pathologist

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Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)

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

PLATELETS: Appear adequate in number.

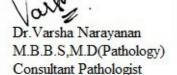
HEMOPARASITES: Negative

IMPRESSION: MICROCYTIC HYPOCHROMIC ANEMIA WITH EOSINOPHILIA.

Note: Kindly evaluate for iron deficiency status.

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DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
BLOOD GROUP ABO AND RH FACTO	R , WHOLE BLOOD EDT.	A		
BLOOD GROUP TYPE	0			Forward & Reverse Grouping with Slide/Tube Aggluti
Rh TYPE	POSITIVE			Forward & Reverse Grouping with Slide/Tube Agglutination

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

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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, FASTING, NAF PLASMA	89	mg/dL	70-110	Hexokinase

Comment:

As per American Diabetes Guidelines, 2023

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

Note:

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

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M.B.B.S,MD(Pathology) Consultant Pathologist

SIN No CHI 241005368 THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFSTYLE LIMITED- RRL BANGALORE





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: 26/Oct/2024 12:31PM

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: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS, SODIUM FLUORIDE PLASMA (2 HR)	98	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.

Page 6 of 16



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

SIN No CHI 241005604. THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFSTYLE LIMITED- RRL BANGALORE

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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
HBA1C (GLYCATED HEMOGLOBIN), WH	IOLE BLOOD EDTA	·		
HBA1C, GLYCATED HEMOGLOBIN	5.8	%	1	HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	120	mg/dL		Calculated

Comment:

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

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

Note: Dietary preparation or fasting is not required.

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

(Hb Electrophoresis is recommended method for detection of Hemoglobinopathy)

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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	141	mg/dL	0-199	CHE/CHO/POD
TRIGLYCERIDES	71	mg/dL	40-140	Glycerol Phosphate Oxidase/peroxidase
HDL CHOLESTEROL	50	mg/dL	42-88	Selective Inhibition
NON-HDL CHOLESTEROL	91	mg/dL	<130	Calculated
LDL CHOLESTEROL	76.85	mg/dL	<100	Calculated
VLDL CHOLESTEROL	14.24	mg/dL	<30	Calculated
CHOL / HDL RATIO	2.81		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

Page 8 of 16



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Test Name	Result	Unit	Bio. Ref. Interval	Method
IVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.26	mg/dl	0.2-1.2	Diazotized Sulfanilic
BILIRUBIN CONJUGATED (DIRECT)	0.09	mg/dL	0-0.4	Diazotized Sulfanilic
BILIRUBIN (INDIRECT)	0.17	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	10.18	U/L	0-49	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	12.0	U/L	0-46	IFCC
AST (SGOT) / ALT (SGPT) RATIO (DE RITIS)	1.2		<1.15	Calculated
ALKALINE PHOSPHATASE	74.44	U/L	40-129	IFCC (Kinetic)
PROTEIN, TOTAL	6.70	g/dL	5.7-8.0	Biuret
ALBUMIN	4.21	g/dL	3.2-4.6	Bromocresol Green
GLOBULIN	2.49	g/dL	2.0-3.5	Calculated
A/G RATIO	1.69		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 > 1In Alcoholic Liver Disease AST: ALT usually >2. This ratio is also seen to be increased in NAFLD, Wilsons'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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Dr. Varsha Narayanan M.B.B.S,M.D(Pathology) Consultant Pathologist

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Test Name	Result	Unit	Bio. Ref. Interval	Method
RENAL PROFILE/KIDNEY FUNCTION	TEST (RFT/KFT), SEF	RUM		
CREATININE	0.57	mg/dL	0.5-0.95	
UREA	12.41	mg/dL	10-50	Urease
BLOOD UREA NITROGEN	5.8	mg/dL	8.0 - 23.0	Calculated
URIC ACID	3.27	mg/dL	2.6-6	Uricase
CALCIUM	8.50	mg/dL	8.8-10.2	Arsenazo III
PHOSPHORUS, INORGANIC	2.83	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	142.7	mmol/L	135-145	Direct ISE
POTASSIUM	4.2	mmol/L	3.5-5.1	Direct ISE
CHLORIDE	104.7	mmol/L	98 - 107	Direct ISE
PROTEIN, TOTAL	6.70	g/dL	5.7-8.0	Biuret
ALBUMIN	4.21	g/dL	3.2-4.6	Bromocresol Green
GLOBULIN	2.49	g/dL	2.0-3.5	Calculated
A/G RATIO	1.69		0.9-2.0	Calculated

Page 10 of 16



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

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Test Name	Result	Unit	Bio. Ref. Interval	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	12.58	U/L	5-32	Szasz

Page 11 of 16

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

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: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF IMMUNOLOGY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
HYROID PROFILE TOTAL (T3, T4, TSH),	SERUM	<u>'</u>		<u>'</u>
TRI-IODOTHYRONINE (T3, TOTAL)	1.17	ng/mL	0.87-1.78	CLIA
THYROXINE (T4, TOTAL)	8.04	μg/dL	6.09-12.23	CLIA
THYROID STIMULATING HORMONE (TSH)	1.838	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		

- **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 Replacer 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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Dr. Varsha Narayanan M.B.B.S,M.D(Pathology) Consultant Pathologist

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High	High	High	High	Pituitary Adenoma; TSHoma/Thyrotropinoma
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Dr. Varsha Narayanan M.B.B.S,M.D(Pathology) Consultant Pathologist

THIS THIS THAN CHEEN 2417005590 T APOLLO HEALTH AND LIFSTYLE LIMITED- RRL BANGALORE







: Ms.RAMYA GURRAMKONDA GURRAMKONDA

Age/Gender

: 37 Y 3 M 25 D/F

UHID/MR No

: CMAR.0000364561

Visit ID Ref Doctor : CMAROPV877702

Emp/Auth/TPA ID

: 22E36276

: Self

Collected

: 26/Oct/2024 08:15AM

Received Reported : 26/Oct/2024 10:58AM

Status

: 26/Oct/2024 12:12PM

Sponsor Name

: Final Report

,

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF CLINICAL PATHOLOGY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
COMPLETE URINE EXAMINATION (CUE) , URINE			
PHYSICAL EXAMINATION				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Physical Measurement
рН	5.5		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	Modifed Ehrlich Reaction
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	Leucocyte Esterase
CENTRIFUGED SEDIMENT WET M	OUNT AND MICROSCOPY	1		
PUS CELLS	2-4	/hpf	0-5	Microscopy
EPITHELIAL CELLS	3-5	/hpf	<10	Microscopy
RBC	NIL	/hpf	0-2	Microscopy
CASTS	NIL		0-2 Hyaline Cast	Microscopy
CRYSTALS	ABSENT		ABSENT	Microscopy
OTHERS	NIL			Microscopy

Comment:

All urine samples are checked for adequacy and suitability before examination. All abnormal chemical examination are rechecked and verified by manual methods. Microscopy findings are reported as an average of 10 high power fields.

Page 14 of 16



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

THIS THE STEEN PERFORMED AT APOLLO HEALTH AND LIFSTYLE LIMITED- RRL BANGALORE

Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)

Rend Office: 1-10-60/62 Ashoka Radhunathi Chambers 5th Floor Regiumnet Hyderahad Telai

Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016 www.apollohl.com | Email ID: enquiry@apollohl.com, Ph No: 040-4904 7777, Fax No: 4904 7744 APOLLO CLINICS NETWORK







: Ms.RAMYA GURRAMKONDA GURRAMKONDA

Age/Gender

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UHID/MR No Visit ID

: CMAR.0000364561 : CMAROPV877702

Ref Doctor Emp/Auth/TPA ID : Self

: 22E36276

Collected

: 26/Oct/2024 08:15AM

Received Reported : 26/Oct/2024 02:07PM : 26/Oct/2024 03:36PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF CLINICAL PATHOLOGY

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

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

Page 15 of 16

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

SIN No CHI 241005373 THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFSTYLE LIMITED- RRL BANGALORE

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







: Ms.RAMYA GURRAMKONDA GURRAMKONDA

Age/Gender

: 37 Y 3 M 25 D/F

UHID/MR No

: CMAR.0000364561

Visit ID Ref Doctor : CMAROPV877702

Emp/Auth/TPA ID

: 22E36276

: Self

Collected

: 26/Oct/2024 08:15AM

Received

: 26/Oct/2024 10:58AM

Reported

Status

: 26/Oct/2024 12:12PM

Sponsor Name

: Final Report

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF CLINICAL PATHOLOGY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
URINE GLUCOSE(FASTING)	NEGATIVE		NEGATIVE	GOD-POD

*** End Of Report ***

Page 16 of 16



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

THIS THE STATE OF THE PROPERTY OF THE BANGALORE

Apollo Health and Lifestyle Limited (CIN-U85110TG2000PLC115819)

Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telang www.apollohl.com | Email ID: enquiry@apollohl.com, Ph No: 040-4904 7777, Fax No: 4904 7744 na - 500 016 | APOLLO CLINICS NETWORK







: Ms.RAMYA GURRAMKONDA GURRAMKONDA

Age/Gender UHID/MR No : 37 Y 3 M 25 D/F : CMAR.0000364561

Visit ID

: CMAROPV877702

Ref Doctor

: Self

Emp/Auth/TPA ID : 22E36276

Collected

: 26/Oct/2024 08:15AM

Received

: 26/Oct/2024 10:58AM : 26/Oct/2024 12:12PM

Reported Status

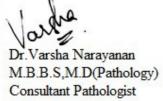
: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

TERMS AND CONDITIONS GOVERNING THIS REPORT

- 1. Reported results are for information and interpretation of the referring doctor or such other medical professionals, who understandreporting units, reference ranges and limitation of technologies. Laboratories not be responsible for any interpretation whatsoever.
- 2. It is presumed that the tests performed are, on the specimen / sample being to the patient named or identified and the verifications of parrticulars have been confirmed by the patient or his / her representative at the point of generation of said specimen.
- 3. 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 (within subject biological variation).
- 4. The patient details along with their results in certain cases like notifiable diseases and as per local regulatory requirements will be communicated to the assigned regulatory bodies.
- 5. The patient samples can be used as part of internal quality control, test verification, data analysis purposes within the testing scope of the laboratory.
- 6. This report is not valid for medico legal purposes. It is performed to facilitate medical diagnosis only.



THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFSTYLE LIMITED- RRL BANGALORE SIN NO: CHL $24\,1005366$

Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)

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





: Ms. RAMYA GURRAMKONDA

GURRAMKONDA

: CMAR.0000364561

Printed On

UHID

: 26-10-2024 07:31 AM

Department

: Radiology

Referred By

: Self

Employeer Id: 22E36276

Age

: 37Yrs 3Mths 27Days

OP Visit No.

: CMAROPV877702

Advised/Pres Doctor : --

Qualification

Registration No.

: --

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN FEMALE

LIVER: Appears normal in size, shape and echopattern. No focal parenchymal lesions identified. No evidence of intra/extrahepatic biliary tree dilatation noted. Portal vein appears to be of normal size.

GALLBLADDER: Partially distended. and shows few large calculi predominantly in fundal region, largest measuring 11.3mm. No evidence of abnormal wall thickening noted.

SPLEEN: Appears normal in size and shows normal echopattern. No focal parenchymal lesions identified.

PANCREAS: Head and body appears normal. Rest obscured by bowel gas.

KIDNEYS: Both kidneys appear normal in size, shape and echopattern. Corticomedullary differentiation appears maintained. No evidence of calculi or hydronephrosis on either side.

Right kidney measures 9.7cm and parenchymal thickness measures 1.5cm. Left kidney measures 10.4cm and parenchymal thickness measures 1.7cm.

URINARY BLADDER: Distended and appears normal. No evidence of abnormal wall thickening noted.

UTERUS: appears normal in size, measuring 8.7x6.6x4.9cm. Myometrial echoes appear normal. The endometrial lining appears intact. Endometrium measures 12.1mm.

OVARIES: Both ovaries appear normal in size and echopattern. Right ovary measures 3.4x2.0cm.



Left ovary measures 3.4x2.3cm.

No free fluid is seen.

Visualized bowel loops appears normal.

IMPRESSION:

CHOLELITHIASIS WITH NO EVIDENCE OF CHOLECYSTITIS.

NO OTHER SIGNIFICANT ABNORMALITY DETECTED.

Suggested clinical correlation and further evaluation if needed.

Report disclaimer:

1.Not all diseases/ pathologies can be detected in USG due to certain technical limitation , obesity, bowel gas , patient preparation and organ location .

- 2. USG scan being an investigation with technical limitation has to be correlated clinically;this report is not valid for medicolegal purpose
- 3. Printing mistakes should immediately be brought to notice for correction.

---End Of The Report---

Dr.NAVEEN KUMAR K
MBBS, DMRD Radiology, (DNB)
85518
Radiology



: Ms. RAMYA GURRAMKONDA

GURRAMKONDA

Printed On

UHID

: CMAR.0000364561 : 26-10-2024 02:11 PM

Department

: Cardiology

: 22E36276

Reffered By

: Self

Employeer Id

Age

: 37Yrs 3Mths 27Days

OP Visit No.

: CMAROPV877702

Advised/Pres Doctor : --

Qualification

Registration No.

DEPARTMENT OF CARDIOLOGY

2D ECHO& COLOUR DOPPLER

DIMENSION	ISVALUES	VALUES(RANGE	E) DIMENSION	SVALUES	VALUES(RANGE)
AO(ed)	24mm	25 - 37 mm	IVS(ed)	10mm	06 - 11 mm
LA(es)	29mm	19 - 40 mm	LVPW(ed)	09mm	06 - 11 mm
RVID(ed)	14mm	07 - 21 mm	EF	60 %	(50 – 70 %)
LVID(ed)	40mm	35 - 55 mm	%FD	30%	(25 – 40%)
LVID(es)	23mm	24 - 42 mm			

MORPHOLOGICAL DATA

Situs

Solitus

Cardiac position

Levocardia

Systemic veins

Normal

Pulmonary veins

Normal

Mitral valve

Thin leaflets, mildly prolapsing AML

Aortic Valve Normal Tricuspid Valve Normal Pulmonary Valve Normal Right Ventricle Normal Left Ventricle Normal Interatrial Septum Intact Interventricular Septum Intact Pulmonary Artery Normal Normal

Aorta Right Atrium Normal Left Atrium Normal



LV – RWMA No RWMA at rest.

LV - FUNCTION Normal systolic function

Pericardium Normal Study

Doppler Studies

Trivial mitral regurgitation

Mild tricuspid regurgitation , no PAH

Doppler Summary

Mitral valve prolapse (mild) with trivial mitral regurgitation

Mild tricuspid regurgitation

Rhythm Sinus with ectopics noted during study

Normal cardiac chambers

Mitral valve prolapse (mild) with trivial mitral regurgitation

Normal LV Systolic function

IMPRESSION Mild tricuspid regurgitation, no pulmonary hypertension

No RWMA at rest

Normal pericardium,

No intracardiac masses / thrombi

---End Of The Report---

Dr.KAPIL RANGAN MBBS,MD,DM (CARDIOLOGY)

KMC NO.88625

Cardiology



: Ms. RAMYA GURRAMKONDA

GURRAMKONDA

UHID

: CMAR.0000364561

Printed On

: 26-10-2024 10:50 AM

Department

: Radiology

Referred By

: Self

Employeer Id

: 22E36276

Age

: 37Yrs 3Mths 27Days

OP Visit No.

: CMAROPV877702

Advised/Pres Doctor : --

Qualification

: --

Registration No.

: --

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA VIEW

Both lung fields and hila are normal.

No obvious active pleuro-parenchymal lesion seen.

Both costophrenic and cardiophrenic angles are clear.

Both diaphragms are normal in position and contour.

Thoracic wall and soft tissues appear normal.

CONCLUSION:

No obvious abnormality seen

For clinical correlation.

---End Of The Report---

Dr.NAVEEN KUMAR K MBBS, DMRD Radiology, (DNB)

85518

Valler Kunas: K

Radiology

----- Forwarded message -----

From: <noreply@apolloclinics.info> Date: Sat, 19 Oct, 2024, 4:24 pm

Subject: Your appointment is confirmed

To: <ramya0326@gmail.com>

Cc: <fo.itpl@apolloclinic.com>, <itpl@apolloclinic.com>, <nishant.tare@apollohl.com>,

<syamsunder.m@apollohl.com>



Dear MS. RAMYA GURRAMKONDA GURRAMKONDA,

Greetings from Apollo Clinics,

Your corporate health check appointment is confirmed at MARATHAHALLI clinic on 2024-10-26 at 08:00-08:15.

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

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

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

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

Instructions to be followed for a health check:

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

For Women:

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

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

Clinic Address: THE APOLLO CLINIC,#673/A,VARTHUR MAIN ROAD,NEAR KUNDANAHALII SIGNAL,OPP.SHRIRAM SAMRUDDHI APTS,WHITEFIELD,BANGALORE-.

Contact No: (080) 43351444 - 45/.

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

Warm Regards, Apollo Clinic



बैंक ऑफ़ बड़ोदा Bank of Baroda

नाम

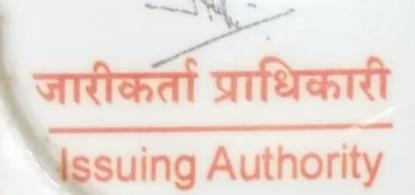
Name

E.C. No.

गुरमकोंडा रम्या

Gurramkonda Ramya

170119





Compa

धारक के हस्ताक्षर Signature of Holder



CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

of mgs. Ramya Garrankordgon 26/0/24

Medically Fit	
Fit with restrictions/recommenda	tions
not impodiments to the 10h	ve been revealed, in my opinion, these are
2	
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3	
However the employee should for been communicated to him/her.	ellow the advice/medication that has
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However the employee should for been communicated to him/her. Review after	ellow the advice/medication that hasrecommended

This certificate is not meant for medico-legal purposes





Name : Ms. RAMYA GURRAMKONDA Age: GURRAMKONDA 37Y Address : 3MWhitefield Bangalore Karnataka INDIA 560066 25D Plan

UHID: CMAR.0000364561

ARCOFEMI MEDIWHEEL FEMALE AHC CREDIT PAN INDIA OP AGREEMENT

OP No: CMAROPV877702 Bill No: CMAR-OCR-132439

		Date: Oct 26th, 2024, 8:07 AM
Sno.	Service Type/Service Name	Department
1	ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH AN FEMALE - 2D ECHO - PAN INDIA - FY2324	NNUAL PLUS CHECK -
- 1	ULTRASOUND - WHOLE ABDOMEN	Ultrasound Radiology
2	OPTHAL BY GENERAL PHYSICIAN	Consultation
3	URINE GLUCOSE(POST PRANDIAL)	Clinical Pathology
4	GAMMA GLUTAMYL TRANFERASE (GGT)	Biochemistry
3	HbA1c, GLYCATED HEMOGLOBIN	Biochemistry
6	GYNAECOLOGY CONSULTATION	Consultation
7	DIET CONSULTATION	General
8	BODY MASS INDEX (BMI)	General
9	ECG Proom 7	Cardiology
10	THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)	Biochemistry
11	2 D ECHO	Cardiology
12	BLOOD GROUP ABO AND RH FACTOR	Blood Bank
13	X-RAY CHEST PA - 2 ROOM)	X Ray Radiology
14	URINE GLUCOSE(FASTING)	Clinical Pathology
15	LBC PAP TEST- PAPSURE	Histopathology
16	FITNESS BY GENERAL PHYSICIAN	Consultation
13	GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL)	Biochemistry

sex:

Female

Apollo Health and Lifestyle Limited

Regul Office: #231017/A 615 & 616, Imperial Towers 2th Floor - Ameripet Hydrobad 3000 61 (Handirus) www.apollohi.com | Email ID -enquiry@apollohi.com | Ph No 040 4905 2727 Fac No. 1904 - 303

APALLO CLINICS NETWORK

APALLO CLINICS NETWORK

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Geethan ma fetat Raenetaka: Pangalare (Bassonisaush) Behandle (Bassonisaush) Behandle (Bassonisaush)
Sagarinia (Bassonisaush) Peripin (Bassonisaush) Behandle (Bassonisaush)
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Ji Mahila (Bassonisaush

GSTIN: 29AADCA0733E1Z3

Address

The Apollo Curro, 26, 375, Vacchus, and







Sno.	Service Type/Service Name	Department
18	GLUCOSE, FASTING	Biochemistry
19	ENT CONSULTATION	Consultation
20	LIPID PROFILE	Biochemistry
21	DENTAL CONSULTATION - 1 Room 8	Consultation
_22	HEMOGRAM + PERIPHERAL SMEAR	Haematology
23	PERIPHERAL SMEAR	Haematology
24	COMPLETE URINE EXAMINATION	Clinical Pathology
25	RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)	Biochemistry
_26	LIVER FUNCTION TEST (LFT)	Biochemistry

Wt: 516g Ht- 151cm

Bp: 114/72mm19

Pulse: 886pm

9985884192.





Date

: 10/26/2024

Department

:Internal Medicine

Patient Name

: Ms. RAMYA

Doctor

: Dr.CHETAN

SHIRAKANAHALLI

GURRAMKONDA GURRAMKONDA

UHID

: CMAR.0000364561

Registration No.

: 105542

Age / Gender

Qualification

: MBBS,MD INTERNAL

Female

: 37Yrs 3Mths 25Days /

MEDICINE

Consulation Timing Height:	: 8:15 PM Weight :	вмі:	Waist Circum :	
Temp:	Pulse :	Resp:	B.P:	

General Examination / Allergies History

Clinical Diagnosis & Management Plan

Follow up date:

Doctor Signature



: Ms. RAMYA GURRAMKONDA

Age

: 37Yrs 3Mths 27Days

UHID

GURRAMKONDA : CMAR.0000364561

OP Visit No.

: CMAROPV877702

Printed On

: 26-10-2024 10:50 AM

Advised/Pres Doctor : --

CMAROPV8///UZ

Department

: Radiology

Qualification

#145650E

Referred By

: Self

Registration No.

; ---

Employeer Id

: 22E36276

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA VIEW

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No obvious active pleuro-parenchymal lesion seen.

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CONCLUSION:

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---End Of The Report---

Dr.NAVEEN KUMAR K MBBS, DMRD Radiology, (DNB)

85518

Radiology

Course Kumar K

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GE MAC2000 1.1	}	}			Female Technician: Ordering Ph: Referring Ph: Attending Ph: PR: PR: P / QRS / T: P / QRS / T:
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Unconfirmed 4x2.5x3_25_R1		\[\]	}	}	
<u>R1</u> 1/1		Ş	\$		77 bpm / mmHg





DEPARTMENT OF OPHTHALMOLOGY

Employee Name: Ms Ramyor	Date: 26. 10 24
Employee No:	Sex: C
Age: 3 Ty	Systemic illness: wil

Examination	RE	LE Normal/Abnormal	
Anterior Segment	Normal/Abnormal		
Vision Distance	6 6	e /e	
Near vision	N6	Ne	
Colour (Ishihara)	Normal/Abnormal	Normal/Abnormal	
Refractive Error	Present/Absent 4	Present/Absent	
New Glass power	-		
Add Power			
Glass If any	To Continue / Change	To Continue / Chang	
10P (mm of Hg)	Normal/Abnormal	Normal/Abnormal	
Posterior Segment	Normal/Abnormal	Normal/Abnormal	
Impression	Normal/Refractive Error	r/Presbyopic BE/Others	

dvice/Comments	Egenist	forte	9 d	
		danly	ond	× (mon

Signature of Consultant & Optometrist