

Patient Name	: Mrs.MANJULA M	Collected	: 25/Sep/2024 08:26AM
Age/Gender	: 52 Y 3 M 15 D/F	Received	: 25/Sep/2024 10:10AM
UHID/MR No	: AHMYS.0000568037	Reported	: 25/Sep/2024 01:31PM
Visit ID	: CMYSOPV129769	Status	: Final Report
Ref Doctor	: Self	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 35E7605		

**DEPARTMENT OF HAEMATOLOGY**

**PERIPHERAL SMEAR , WHOLE BLOOD EDTA**

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

SIN No:MYS240901286



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DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL -FULL BODY COMPREHENSIVE PLUS VITAMINS - FEMALE - 2D ECHO - PAN INDIA - FY232

Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>HEMOGRAM , WHOLE BLOOD EDTA</b>				
HAEMOGLOBIN	12.2	g/dL	12.5-15	Spectrophotometer
PCV	35.90	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.37	Million/cu.mm	3.8-4.8	Electrical Impedance
MCV	82.2	fL	83-101	Calculated
MCH	27.8	pg	27-32	Calculated
MCHC	33.9	g/dL	31.5-34.5	Calculated
R.D.W	14.6	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	6,640	cells/cu.mm	4000-10000	Electrical Impedance
<b>DIFFERENTIAL LEUCOCYTIC COUNT (DLC)</b>				
NEUTROPHILS	56	%	40-80	Electrical Impedance
LYMPHOCYTES	36	%	20-40	Electrical Impedance
EOSINOPHILS	3	%	1-6	Electrical Impedance
MONOCYTES	4	%	2-10	Electrical Impedance
BASOPHILS	1	%	0-2	Electrical Impedance
<b>ABSOLUTE LEUCOCYTE COUNT</b>				
NEUTROPHILS	3718.4	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2390.4	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	199.2	Cells/cu.mm	20-500	Calculated
MONOCYTES	265.6	Cells/cu.mm	200-1000	Calculated
BASOPHILS	66.4	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	1.56		0.78- 3.53	Calculated
PLATELET COUNT	252000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	22	mm at the end of 1 hour	0-20	Modified Westergren
<b>PERIPHERAL SMEAR</b>				

R.B.C: Majority are normocytic normochromic.

W.B.C: normal in number with normal morphology and distribution.

Platelets: normal in number and are seen in singles and clumps.

Hemoparasites: Not seen.

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**ARCOFEMI - MEDIWHEEL -FULL BODY COMPREHENSIVE PLUS VITAMINS - FEMALE - 2D ECHO - PAN INDIA - FY232**

IMPRESSION: NORMOCYTIC NORMOCHROMIC ANEMIA.



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**DEPARTMENT OF HAEMATOLOGY**

**ARCOFEMI - MEDIWHEEL -FULL BODY COMPREHENSIVE PLUS VITAMINS - FEMALE - 2D ECHO - PAN INDIA - FY232**

Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA</b>				
BLOOD GROUP TYPE	O			Forward & Reverse Grouping with Slide/Tube Aggluti
Rh TYPE	POSITIVE			Forward & Reverse Grouping with Slide/Tube Agglutination



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Age/Gender : 52 Y 3 M 15 D/F	Received : 25/Sep/2024 10:10AM
UHID/MR No : AHMYS.0000568037	Reported : 25/Sep/2024 10:44AM
Visit ID : CMYSOPV129769	Status : Final Report
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**DEPARTMENT OF BIOCHEMISTRY**

**ARCOFEMI - MEDIWHEEL -FULL BODY COMPREHENSIVE PLUS VITAMINS - FEMALE - 2D ECHO - PAN INDIA - FY232**

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, FASTING , NAF PLASMA	99	mg/dl	74-106	GOD, POD

**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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Patient Name : Mrs.MANJULA M	Collected : 25/Sep/2024 10:41AM
Age/Gender : 52 Y 3 M 15 D/F	Received : 25/Sep/2024 12:22PM
UHID/MR No : AHMYS.0000568037	Reported : 25/Sep/2024 01:56PM
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**DEPARTMENT OF BIOCHEMISTRY**

**ARCOFEMI - MEDIWHEEL -FULL BODY COMPREHENSIVE PLUS VITAMINS - FEMALE - 2D ECHO - PAN INDIA - FY232**

Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)</b>	101	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.



**Dr. PAVAN KUMAR M**  
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SIN No:MYS240901303



Patient Name : Mrs.MANJULA M	Collected : 25/Sep/2024 08:26AM
Age/Gender : 52 Y 3 M 15 D/F	Received : 25/Sep/2024 04:31PM
UHID/MR No : AHMYS.0000568037	Reported : 25/Sep/2024 05:02PM
Visit ID : CMYSOPV129769	Status : Final Report
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**DEPARTMENT OF BIOCHEMISTRY**

**ARCOFEMI - MEDIWHEEL -FULL BODY COMPREHENSIVE PLUS VITAMINS - FEMALE - 2D ECHO - PAN INDIA - FY232**

Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA</b>				
HBA1C, GLYCATED HEMOGLOBIN	5.1	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	100	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 COMPREHENSIVE PLUS VITAMINS - FEMALE - 2D ECHO - PAN INDIA - FY232**

Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>LIPID PROFILE , SERUM</b>				
TOTAL CHOLESTEROL	186	mg/dl	0-200	CHOD
TRIGLYCERIDES	100	mg/dl	0-150	GPO, Trinder
HDL CHOLESTEROL	44	mg/dL	40-60	CHOD
NON-HDL CHOLESTEROL	<b>142</b>	mg/dL	<130	Calculated
LDL CHOLESTEROL	<b>121.75</b>	mg/dL	<100	Calculated
VLDL CHOLESTEROL	20.1	mg/dL	<30	Calculated
CHOL / HDL RATIO	4.21		0-4.97	Calculated
ATHEROGENIC INDEX (AIP)	0.00		<0.11	Calculated

**Comment:**

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

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

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

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



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**DEPARTMENT OF BIOCHEMISTRY**

**ARCOFEMI - MEDIWHEEL -FULL BODY COMPREHENSIVE PLUS VITAMINS - FEMALE - 2D ECHO - PAN INDIA - FY232**

Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>LIVER FUNCTION TEST (LFT) , SERUM</b>				
BILIRUBIN, TOTAL	0.50	mg/dl	0-1.2	NBD
BILIRUBIN CONJUGATED (DIRECT)	0.15	mg/dl	0-0.2	Diazotized sulfanilic acid
BILIRUBIN (INDIRECT)	0.35	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	14	U/l	0-45	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	16.0	U/l	0-31	IFCC
AST (SGOT) / ALT (SGPT) RATIO (DE RITIS)	1.1		<1.15	Calculated
ALKALINE PHOSPHATASE	87.00	U/l	42-98	IFCC (AMP buffer)
PROTEIN, TOTAL	6.70	g/dl	6.4-8.3	Biuret
ALBUMIN	4.30	g/dl	3.5-5.2	Bromcresol Green
GLOBULIN	2.40	g/dL	2.0-3.5	Calculated
A/G RATIO	1.79		0.9-2.0	Calculated

**Comment:**

LFT results reflect different aspects of the health of the liver, i.e., hepatocyte integrity (AST & ALT), synthesis and secretion of bile (Bilirubin, ALP), cholestasis (ALP, GGT), protein synthesis (Albumin) Common patterns seen:

1. Hepatocellular Injury:

\*AST – Elevated levels can be seen. However, it is not specific to liver and can be raised in cardiac and skeletal injuries.  
 \*ALT – Elevated levels indicate hepatocellular damage. It is considered to be most specific lab test for hepatocellular injury. Values also correlate well with increasing BMI. Disproportionate increase in AST, ALT compared with ALP. AST: ALT (ratio) – In case of hepatocellular injury AST: ALT > 1 In Alcoholic Liver Disease AST: ALT usually >2. This ratio is also seen to be increased in NAFLD, Wilson's'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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**DEPARTMENT OF BIOCHEMISTRY**

**ARCOFEMI - MEDIWHEEL -FULL BODY COMPREHENSIVE PLUS VITAMINS - FEMALE - 2D ECHO - PAN INDIA - FY232**



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Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM</b>				
CREATININE	0.95	mg/dL	0.51-1.04	Enzymatic colorimetric
UREA	16.55	mg/dl	13-43	Urease, UV
BLOOD UREA NITROGEN	<b>7.7</b>	mg/dL	8.0 - 23.0	Calculated
URIC ACID	4.10	mg/dL	2.6-6	Uricase
CALCIUM	9.90	mg/dl	8.6-10.3	Arsenazo III
PHOSPHORUS, INORGANIC	3.65	mg/dl	2.7-4.5	Molybdate
SODIUM	141	mmol/L	135-145	Direct ISE
POTASSIUM	4.8	mmol/L	3.5-5.1	Direct ISE
CHLORIDE	<b>108</b>	mmol/L	98 - 107	Direct ISE
PROTEIN, TOTAL	6.70	g/dl	6.4-8.3	Biuret
ALBUMIN	4.30	g/dl	3.5-5.2	Bromcresol Green
GLOBULIN	2.40	g/dL	2.0-3.5	Calculated
A/G RATIO	1.79		0.9-2.0	Calculated



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Test Name	Result	Unit	Bio. Ref. Interval	Method
ALKALINE PHOSPHATASE , SERUM	87.00	U/l	42-98	IFCC (AMP buffer)



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Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM</b>	12.00	U/l	0-38	IFCC



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DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL -FULL BODY COMPREHENSIVE PLUS VITAMINS - FEMALE - 2D ECHO - PAN INDIA - FY232

Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM</b>				
TRI-iodothyronine (T3, TOTAL)	1.22	ng/mL	0.87-1.78	CLIA
THYROXINE (T4, TOTAL)	10.22	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	0.700	µIU/mL	0.38-5.33	CLIA

Comment:

<b>For pregnant females</b>	<b>Bio Ref Range for TSH in uIU/ml (As per American Thyroid Association)</b>
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

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High	High	High	High	Pituitary Adenoma; TSHoma/Thyrotropinoma
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**DEPARTMENT OF IMMUNOLOGY**

**ARCOFEMI - MEDIWHEEL -FULL BODY COMPREHENSIVE PLUS VITAMINS - FEMALE - 2D ECHO - PAN INDIA - FY232**

Test Name	Result	Unit	Bio. Ref. Interval	Method
VITAMIN D (25 - OH VITAMIN D) , SERUM	21.96	ng/mL	30 -100	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 biological function of Vitamin D is to maintain normal levels of calcium and phosphorus absorption. 25-Hydroxy vitamin D is the storage form of vitamin D. Vitamin D assists in maintaining bone health by facilitating calcium absorption. Vitamin D deficiency can also cause osteomalacia, which frequently affects elderly patients.

Vitamin D Total levels are composed of two components namely 25-Hydroxy Vitamin D2 and 25-Hydroxy Vitamin D3 both of which are converted into active forms. Vitamin D2 level corresponds with the exogenous dietary intake of Vitamin D rich foods as well as supplements. Vitamin D3 level corresponds with endogenous production as well as exogenous diet and supplements.

Vitamin D from sunshine on the skin or from dietary intake is converted predominantly by the liver into 25-hydroxy vitamin D, which has a long half-life and is stored in the adipose tissue. The metabolically active form of vitamin D, 1,25-di-hydroxy vitamin D, which has a short life, is then synthesized in the kidney as needed from circulating 25-hydroxy vitamin D. The reference interval of greater than 30 ng/mL is a target value established by the Endocrine Society.

**Decreased Levels:**

Inadequate exposure to sunlight.

Dietary deficiency.

Vitamin D malabsorption.

Severe Hepatocellular disease.

Drugs like Anticonvulsants.

Nephrotic syndrome.

**Increased levels:**

Vitamin D intoxication.



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

SIN No:MYS240901288





Patient Name : Mrs.MANJULA M	Collected : 25/Sep/2024 08:26AM
Age/Gender : 52 Y 3 M 15 D/F	Received : 25/Sep/2024 10:10AM
UHID/MR No : AHMYS.0000568037	Reported : 25/Sep/2024 01:32PM
Visit ID : CMYSOPV129769	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 35E7605	

**DEPARTMENT OF IMMUNOLOGY**

**ARCOFEMI - MEDIWHEEL -FULL BODY COMPREHENSIVE PLUS VITAMINS - FEMALE - 2D ECHO - PAN INDIA - FY232**

Test Name	Result	Unit	Bio. Ref. Interval	Method
VITAMIN B12 , SERUM	55	pg/mL	120-914	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.



**Dr. PAVAN KUMAR M**  
M.B.B.S.,M.D(Pathology)  
Consultant Pathologist

SIN No:MYS240901288



Patient Name : Mrs.MANJULA M	Collected : 25/Sep/2024 08:26AM
Age/Gender : 52 Y 3 M 15 D/F	Received : 25/Sep/2024 01:26PM
UHID/MR No : AHMYS.0000568037	Reported : 25/Sep/2024 02:24PM
Visit ID : CMYSOPV129769	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 35E7605	

DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL -FULL BODY COMPREHENSIVE PLUS VITAMINS - FEMALE - 2D ECHO - PAN INDIA - FY232

Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>COMPLETE URINE EXAMINATION (CUE) , URINE</b>				
<b>PHYSICAL EXAMINATION</b>				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Physical Measurement
pH	6.0		5-7.5	Double Indicator
SP. GRAVITY	1.005		1.002-1.030	Bromothymol Blue
<b>BIOCHEMICAL EXAMINATION</b>				
URINE PROTEIN	NEGATIVE		NEGATIVE	Protein Error Of Indicator
GLUCOSE	NEGATIVE		NEGATIVE	Glucose Oxidase
URINE BILIRUBIN	NEGATIVE		NEGATIVE	Azo Coupling Reaction
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	Sodium Nitro Prusside
UROBILINOGEN	NORMAL		NORMAL	Modified Ehrlich Reaction
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	Leucocyte Esterase
<b>CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY</b>				
PUS CELLS	1 - 2	/hpf	0-5	Microscopy
EPITHELIAL CELLS	4 - 5	/hpf	<10	Microscopy
RBC	NIL	/hpf	0-2	Microscopy
CASTS	NIL		0-2 Hyaline Cast	Microscopy
CRYSTALS	ABSENT		ABSENT	Microscopy

**Comment:**

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

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



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

SIN No:MYS240901290



Patient Name : Mrs.MANJULA M	Collected : 25/Sep/2024 08:26AM
Age/Gender : 52 Y 3 M 15 D/F	Received : 25/Sep/2024 01:26PM
UHID/MR No : AHMYS.0000568037	Reported : 25/Sep/2024 02:23PM
Visit ID : CMYSOPV129769	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 35E7605	

**DEPARTMENT OF CLINICAL PATHOLOGY**

**ARCOFEMI - MEDIWHEEL -FULL BODY COMPREHENSIVE PLUS VITAMINS - FEMALE - 2D ECHO - PAN INDIA - FY232**

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

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

\*\*\* End Of Report \*\*\*



**Dr. PAVAN KUMAR M**  
M.B.B.S.,M.D(Pathology)  
Consultant Pathologist

SIN No:MYS240901289



Patient Name : Mrs.MANJULA M  
Age/Gender : 52 Y 3 M 15 D/F  
UHID/MR No : AHMYS.0000568037  
Visit ID : CMYSOPV129769  
Ref Doctor : Self  
Emp/Auth/TPA ID : 35E7605

Collected : 25/Sep/2024 08:26AM  
Received : 25/Sep/2024 01:26PM  
Reported : 25/Sep/2024 02:23PM  
Status : Final Report  
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

#### TERMS AND CONDITIONS GOVERNING THIS REPORT

The reported results are for information and interpretation of the referring doctor or such other medical professionals, who understand reporting units, reference ranges and limitations of technologies.

Laboratories not be responsible for any interpretation whatsoever.

It is presumed that the tests performed are, on the specimen / sample being to the patient named or identified and the verifications of the particulars have been cleared out by the patient or his / her representative at the point of generation of said specimen.

The reported results are restricted to the given specimen only. Results may vary from lab to lab and from time to time for the same parameter for the same patient.

Assays are performed in accordance with standard procedures, The reported results are dependent on individual assay methods / equipment used and quality of specimen received.

This report is not valid for medico legal purposes.



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



SIN No: MYS240901289

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Patient Name	: Mrs. MANJULA M	Age	: 52Yrs 3Mths 17Days
UHID	: AHMYS.0000568037	OP Visit No.	: CMYSOPV129769
Printed On	: 26-09-2024 07:10 AM	Advised/Pres Doctor	: --
Department	: Cardiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employeer Id	: 35E7605		

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**DEPARTMENT OF CARDIOLOGY**

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**Impression:**

Normal chamber volumes  
No regional wall motion abnormality  
Normal left ventricular systolic function. EF 61 %  
No clots. No pericardial effusion

XXXXXXXXXX.

**Findings**

Left Ventricle: Normal  
Right Ventricle Normal  
Left Atrium Normal  
Right Atrium Normal  
Aorta Normal  
Pulmonary Artery Normal  
IAS Intact  
IVS Intact  
Valves Normal  
Pericardium Normal  
Doppler Normal

---

**Patient's Name :Mrs Manjula Age & Sex :52 Yrs /Female**

**Date :25.09.2024**

**UHID No:**

Measurements

AO:2.5 cm

LA :2.7 cm

RV :2.7 cm

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LVIDd 4.54 cm

LVIDs :2.92 cm

IVSd :0.70 cm

IVSs :1.95 cm

PWd :0.89 cm

PWs :1.14 cm

EF : 61.0 %

FS : 35.0 %

Doppler

MV TV AV PV

E :0.79m/sE --- m/sV max1.07 m/sV max0.65 m/s

A: 0.52m/sA --- m/s

MR Nil TR Nil AR Nil PR Nil

---

**CONSULTANT – NON-INVASIVE CARDIOLOGY**

---End Of The Report---



Dr. GURU PRASAD B V  
MBBS, PGDCC  
69949  
Cardiology



Patient Name	: Mrs. MANJULA M	Age	: 52Yrs 3Mths 16Days
UHID	: AHMYS.0000568037	OP Visit No.	: CMYSOPV129769
Printed On	: 25-09-2024 07:29 AM	Advised/Pres Doctor	: --
Department	: Cardiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employer Id	: 35E7605		

## DEPARTMENT OF CARDIOLOGY

Observation :-

1. Sinus Rhythm.
2. Heart rate is 70 beats per minutes.

**Impression:**

NORMAL RESTING ECG.

---End Of The Report---



Dr. GURU PRASAD B V  
MBBS, PGDCC  
69949  
Cardiology



---

Patient	Mrs. MANJULA M	Doctor	RASHMI B N	Appt ID	CMYSAPT596
Age/Gender	52Y   Female	Qualification	MBBS, DGO, DNB (GYNAECOLOGY)	Consult Date	25 Sep 2024
UHID	AHMYS.0000568037	Reg. No.	33393	Order Bill ID	CMYS-OCR-24236
				Visit Display ID	CMYSOPV129769

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## VITALS

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Weight : 64.3Kgs	Height : 152Cms
Pulse : 72 BPM	Spo2 : 97%
BP : 100 / 72 MmHg	Respiratory Rate : 20 BPM
Temperature : 97 °F	

RASHMI B N  
Doctor's Signature

**Apollo Health and Lifestyle Limited**

(CIN-U85110TG2000PLC115819)

Corporate Office: 7-1-617/A, 7\* Floor, Imperial Towers, Ameerpet, Hyderabad-500016, Telangana

Ph No: 040-4904 7777 | www.apollohl.com | Email ID:enquiry@apollohl.com

Patient Name	: Mrs. MANJULA M	Age	: 52Yrs 3Mths 16Days
UHID	: AHMYS.0000568037	OP Visit No.	: CMYSOPV129769
Printed On	: 25-09-2024 12:22 PM	Advised/Pres Doctor	: --
Department	: Radiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employer Id	: 35E7605		

### DEPARTMENT OF RADIOLOGY

Lung fields are clear.

Cardio thoracic ratio is normal.

Apices, costo and cardio phrenic 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: NORMAL STUDY .

---End Of The Report---



Dr.CHETAN HOLEPPAGOL  
MBBS, DNB(RADIO DIAGNOSIS)  
90037  
Radiology

---

Patient Name	: Mrs. MANJULA M	Age	: 52Yrs 3Mths 17Days
UHID	: AHMYS.0000568037	OP Visit No.	: CMYSOPV129769
Printed On	: 26-09-2024 06:43 AM	Advised/Pres Doctor	: --
Department	: Radiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employeer Id	: 35E7605		

---

### DEPARTMENT OF RADIOLOGY

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**LIVER:** It is normal in size No focal lesions seen. Few areas of focal fatty infiltration is noted in the segment V of right lobe of liver .IHBR are not dilated. CBD and Portal vein are normal.

**GALL BLADDER:** It is well distended and normal. No calculi seen.

**SPLEEN:** It is normal in size, outline and echopattern. No e/o focal lesions.

**PANCREAS:** It is normal.

**RIGHT KIDNEY:** It measures 9.1 cm with parenchymal thickness of 0.9 cm. It is normal in size, outline and echotexture. No e/o calculus or hydronephrosis seen.

**LEFT KIDNEY:** It measures 9.3 cm with parenchymal thickness of 1.2 cm. It is normal in size, outline and echotexture. No e/o calculus or hydronephrosis seen.

**URINARY BLADDER:** It is well distended. The UB wall is normal. No calculi seen.

**UTERUS and OVARIES** post operative status

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**OTHERS:** No e/o free fluid in the abdomen. No e/o lymphadenopathy. No e/o gut wall thickening. No mass lesion seen in the abdomen.

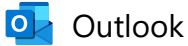
**IMPRESSION: NORMAL STUDY.**

**Dr. Karthik H V MDRD , DNB  
Consultant Radiologist.**

---End Of The Report---



**Dr. CHETAN HOLEPPAGOL**  
**MBBS, DNB (RADIO DIAGNOSIS)**  
90037  
Radiology



Your appointment is confirmed

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

Date Mon 23-09-2024 11:07

To ubin0912310@unionbankofindia.bank <ubin0912310@unionbankofindia.bank>

Cc Mysore Apolloclinic <mysore@apolloclinic.com>; Yogeesh KV <mkt.mysore@apolloclinic.com>; Syamsunder M <syamsunder.m@apollohl.com>



Dear M MANJULA,

Greetings from Apollo Clinics,

Your corporate health check appointment is confirmed at **KALIDASA RAOD clinic** on **2024-09-25** at **08:15-08:30**.

Payment Mode	
Corporate Name	<b>ARCOFEMI HEALTHCARE LIMITED</b>
Agreement Name	<b>[ARCOFEMI MEDIWHEEL FEMALE AHC CREDIT PAN INDIA OP AGREEMENT]</b>
Package Name	<b>[ARCOFEMI - MEDIWHEEL -FULL BODY COMPREHENSIVE PLUS VITAMINS - FEMALE - 2D ECHO - PAN INDIA - FY2324]</b>

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

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

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

**Instructions to be followed for a health check:**

1. Please ensure you are on complete fasting for 10-To-12-Hours prior to check.
2. During fasting time do not take any kind of alcohol, cigarettes, tobacco or any other liquids (except Water) in the morning. If any medications taken, pls inform our staff before health check.

3. Please bring all your medical prescriptions and previous health medical records with you.
4. Kindly inform our staff, if you have a history of diabetes and cardiac problems.

**For Women:**

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

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

**Clinic Address: 23, KALIDASA ROAD, VV MOHLLA, MYSORE.**

**Contact No: (0821) 400 6040 - 41.**

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



Issue Date: 23/12/2010



भारत सरकार

Government of India



ಮಂಜುಳ.ಎಮ್

Manjula.M

ಜನ್ಮ ದಿನಾಂಕ / DOB : 10/06/1972

ಸ್ತ್ರೀ / Female

आधार पहचान का प्रमाण है, नागरिकता का नहीं।  
 Aadhaar is a proof of identity, not of citizenship.

2357 0877 6017

भारत आधर, भारी पहचान





Name : Mrs. MANJULAM

Age : 52Y 3M 15D

UHID : AHMYS 000568037

Address : Gokulam Mysore Karnataka INDIA 570002

sex : Female



AHMY5.000568037

Plan : ARCOFEMI MEDIWHEEL FEMALE AHC  
CREDIT PAN INDIA OP AGREEMENT

OP No: CMYSOPV129769

Bill No: CMYS-OCR-24236

Date: Sep 25th, 2024, 8:19 AM

Sno.	Service Type/Service Name	Department
1	ARCOFEMI - MEDIWHEEL - FULL BODY COMPREHENSIVE PLUS VITAMINS - FEMALE - 2D FULL - PAN INDIA - FY 2024	
1	FITNESS BY GENERAL PHYSICIAN → P	Consultation
2	2 D ECHO → P	Cardiology
3	COMPLETE URINE EXAMINATION	Clinical Pathology
4	RENAL PROFILE/RENAL FUNCTION TEST (RI/CKD)	Biochemistry
5	ECG	Cardiology
6	GAMMA GLUTAMYL TRANSFERASE (GGT)	Biochemistry
7	URINE GLUCOSE (FASTING)	Clinical Pathology
8	BODY MASS INDEX (BMI)	General
9	GYNACOLOGY CONSULTATION → P	Consultation
10	HEMOGRAM + PERIPHERAL SMEAR	Haematology
11	PERIPHERAL SMEAR	Haematology
12	THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)	Biochemistry
13	BLOOD GROUP ABO AND RH FACTOR	Blood Bank
14	X-RAY CHEST PA	X Ray Radiology
15	LBC PAP TEST PAPSURI S for	Histopathology
16	LIPID PROFILE	Biochemistry
17	DIET CONSULTATION → P	General
18	ALKALINE PHOSPHATASE - SERUM/PLASMA	Biochemistry
19	GLUCOSE - POST PRANDIAL (PP) 2 HOURS (POST MEAL)	Biochemistry
20	GLUCOSE - FASTING	Biochemistry
21	LIVER FUNCTION TEST (LFT)	Biochemistry
22	HbA1c, GLYCATED HEMOGLOBIN	Biochemistry
23	OPHTHAL BY GENERAL PHYSICIAN	Consultation
24	VITAMIN B12	Biochemistry
25	DENTAL CONSULTATION	Consultation
26	URINE GLUCOSE (POST PRANDIAL)	Clinical Pathology
27	ENT CONSULTATION → P	Consultation
28	VITAMIN D 25 HYDROXY (125-D3)	Biochemistry
29	SONO MAMMOGRAPHY - SCREENING	Mammography
30	ULTRASOUND - WHOLE ABDOMEN	Ultrasound Radiology

**CERTIFICATE OF MEDICAL FITNESS**

This is to certify that I have conducted the clinical examination

of Mrs Manjula on 25/09/24

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

	Tick
<ul style="list-style-type: none"> <li>Medically Fit</li> </ul>	✓
<ul style="list-style-type: none"> <li>Fit with restrictions/recommendations</li> </ul> <p>Though following restrictions have been revealed, in my opinion, these are not impediments to the job.</p> <p>1.....</p> <p>2.....</p> <p>3.....</p> <p>However the employee should follow the advice/medication that has been communicated to him/her.</p> <p>Review after _____</p>	
<ul style="list-style-type: none"> <li>Currently Unfit.</li> </ul> <p>Review after _____ recommended</p>	
<ul style="list-style-type: none"> <li>Unfit</li> </ul>	

Dr. [Signature]  
Medical Officer  
The Apollo Clinic, Mysore.

Apollo Health and Lifestyle Limited

CIN: U65110TG2000PLC115819  
Regd Office: 1, 10/10/02, Ashoka Raghupathi Chetty Street, Mysore  
Ph. No.: 0824 4646 7777 Fax No: 4964 7744 | Email ID: enquiry@apollohi.com | www.apollohi.com

APOLLO CLINICS NETWORK KARNATAKA

Bangalore: Basavanahalli | Bellandur | Electronic City | Fraser Town | HSR Layout | Indra Nagar | JP Nagar | Kundalahalli  
Kuvempunagar | Varadhar Road, Mysore (VV Mohalla)

Online appointments: www.apolloclinic.com

*This certificate is not meant for medico-legal purpose.*

**Apollo Clinic**  
# 23, 1st Floor,  
Kaldasa Road, Mysore - 02  
Ph: 0821 418605007788

Date : 9/25/2024 Department : General Physician  
 Patient Name : Mrs. MANJULA M Doctor : Dr. UMESH H B  
 UHID : AHMYS.0000568037 Registration No. : 67084  
 Age / Gender : 52Yrs 3Mths 15Days / Female Qualification : MBBS, MD (INTERNAL MEDICINE)  
 Consultation Timing : 6:37 PM

Height :	Weight :	BMI :	Waist Circum :
Temp :	Pulse : 50/min	Resp : 20/min	B.P : 120/80 mmHg

General Examination /  
Allergies History

Clinical Diagnosis & Management Plan

AS  
 AS  
 P/A / N/A

Acute

T- ALT - D<sub>3</sub> 60k once in wk (10)

T- Pantamuc plus - (30)  
010

T- Skeletal - 500 - (30)  
010

Regular Exercise

T- Ultracet 107 - 10

RTA 1 month

Follow up date :

Doctor Signature

**Apollo Clinic**  
 # 23, 1st Floor,  
 Kaldasa Road, Mysore - 02  
 Ph : 0821-4006040/41

Date : 9/25/2024 Department : Obstetrics & Gynaecology  
 Patient Name : Mrs. MANJULA M Doctor : Dr. RASHMI B N  
 UHID : AHMYS.0000568037 Registration No. : 33393  
 Age / Gender : 52 Yrs 3 Mths 15 Days / Female Qualification : MBBS, DGO, DNB (GYNAECOLOGY)  
 Consultation Timing : 10:04 AM

Height : 160	Weight : 55	BMI :	Waist Circum :
Temp :	Pulse :	Resp :	B.P : 120/80

General Examination /  
Allergies History

Clinical Diagnosis & Management Plan

MI -> 34 yrs.

2/2 -  
FINDS  
Subnormal

menopausal - 12 yrs back.

sm mammogram. } normal study.  
Add Epelw's com }

903, skeletal XT (30).

0-1-0 x 6m

Follow up date :

*Rashmi*  
Doctor Signature

**Apollo Clinic**  
# 23, 1st Floor,  
Kalidasa Road, Mysore - 02  
Ph : 0821-4006040/41

Date : 9/25/2024 Department : ENT  
 Patient Name : Mrs. MANJULA M Doctor : Dr. PRAVEEN KUMAR R  
 UHID : AHMYS.0000568037 Registration No. : 66012  
 Age / Gender : 52Yrs 3Mths 15Days / Female Qualification : MBBS, MS (ENT)  
 Consultation Timing : 10:00 AM

Height : 160	Weight : 55	BMI :	Waist Circum :
Temp :	Pulse :	Resp :	B.P : 120/80

General Examination /  
Allergies History

Clinical Diagnosis & Management Plan

Came for regular health checkup

Ear - (R) IM - normal

(L) IM sustained perforation of  
posterior part of tympanic membrane

Nose - nasal mucosa - normal

Oral cavity & oropharynx - (L)

PM - bilateral VC normal (L)

concern of post glenoid

neck (L)

HL - r. montair LL - 15 days

Follow up date :

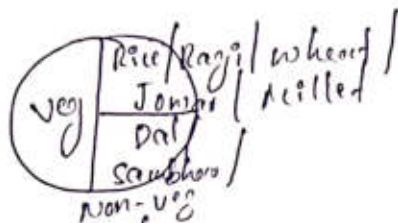
Doctor Signature

**Apollo Clinic**  
# 23, 1st Floor,  
Kalidasa Road, Mysore - 02  
Ph : 0821-4005040/41

Cap. Soupraz - 040  
Cefu hai - 00  
R/A & ween

- 10 days

fl



Date : 9/25/2024 Department : Nutrition & Dietetics  
 Patient Name : Mrs. MANJULA M Doctor : Miss.MADHURA B P  
 UHID : AHMYS.0000568037 Registration No. : A104102  
 Age / Gender : 52Yrs 3Mths 15Days / Female Qualification : M.Sc. Nutrition and Dietetics  
 Consultation Timing : 10:05 AM PHD\*

Height : 160	Weight : 55	BMI : 21 kg/m <sup>2</sup>	Waist Circum : 56 cm
Temp :	Pulse :	Resp :	B.P : 120/80

General Examination / Allergies History

Hb - 12.9  
 ESR - 22  
 Non HDL - 149  
 LDL - 121.75  
 Vitamin D - 21.96  
 Vitamin B<sub>12</sub> - 55

Clinical Diagnosis & Management Plan

- Advise a balanced diet with fiber rich foods.
- Take small frequent meals, do not skip meals.
- Include all variety of seasonal fruits, vegetables & green leafy vegetables.
- Include nuts like Almonds, walnuts & dry fruits like dried dates & raisins.
- Include seeds like Flax seeds, pumpkin seeds, sunflower seeds, watermelon seeds & sesame seeds. 1-teaspoon each, dry roasted.
- Avoid maida, sugar, too much of salt, bakery soda & creams.
- Avoid bakery products, chats, junk foods, deep fried foods, packed & processed foods.

Follow up date :

Doctor Signature B.P.

→ Drink 12-14 big glasses of water/day. 25/09/2024

[Ophthal]

Date : 9/25/2024 Department : General Practice  
Patient Name : Mrs. MANJULA M Doctor : Dr.SUJATHA T R  
UHID : AHMYS.0000568037 Registration No. : 69649  
Age / Gender : 52Yrs 3Mths 15Days / Female Qualification : MBBS, PGDMCH  
Consulation Timing : 10:03 AM

Height : 160	Weight : 55	BMI :	Waist Circum :
Temp :	Pulse :	Resp :	B.P : 120/80

General Examination /  
Allergies History

Clinical Diagnosis & Management Plan

Distance  
vision

no glasses < 6/6  
6/6

near  
vision

un { 6/9 6/6  
6/9 } eph

Colour  
vision

N10

no glasses = +1.25(BE)sp

(CV) = normal

Follow up date : 25/9/24

Ateeba  
Archi  
Doctor Signature

**Apollo Clinic**  
# 23, 1st Floor,  
Kaidasa Road, Mysore - 02  
Ph : 0822-4006040/41

Date : 9/25/2024 Department : Dental  
 Patient Name : Mrs. MANJULA M Doctor : Dr. JYOTHISHREE P V  
 UHID : AHMYS.0000568037 Registration No. : 33268A  
 Age / Gender : 52Yrs 3Mths 15Days / Female Qualification : B.D.S.[Bachelor of Dental Surgery]  
 Consultation Timing : 10:01 AM

Height : 160	Weight : 55	BMI :	Waist Circum :
Temp :	Pulse :	Resp :	B.P : 120/80

General Examination /  
 Allergies History

Clinical Diagnosis & Management Plan

O/E

$$\begin{array}{r|l} 7654 & 4567 \\ \hline 765 & 567 \end{array}$$

H/O RCT? + <sup>APFN</sup> Crowns present

C.A.T. 561

Follow up date :

*Jyothishree*

Doctor Signature

**Apollo Clinic**  
 # 23, 1st Floor,  
 Kalidasa Road, Mysore - 02  
 Ph : 0821-4006040/41



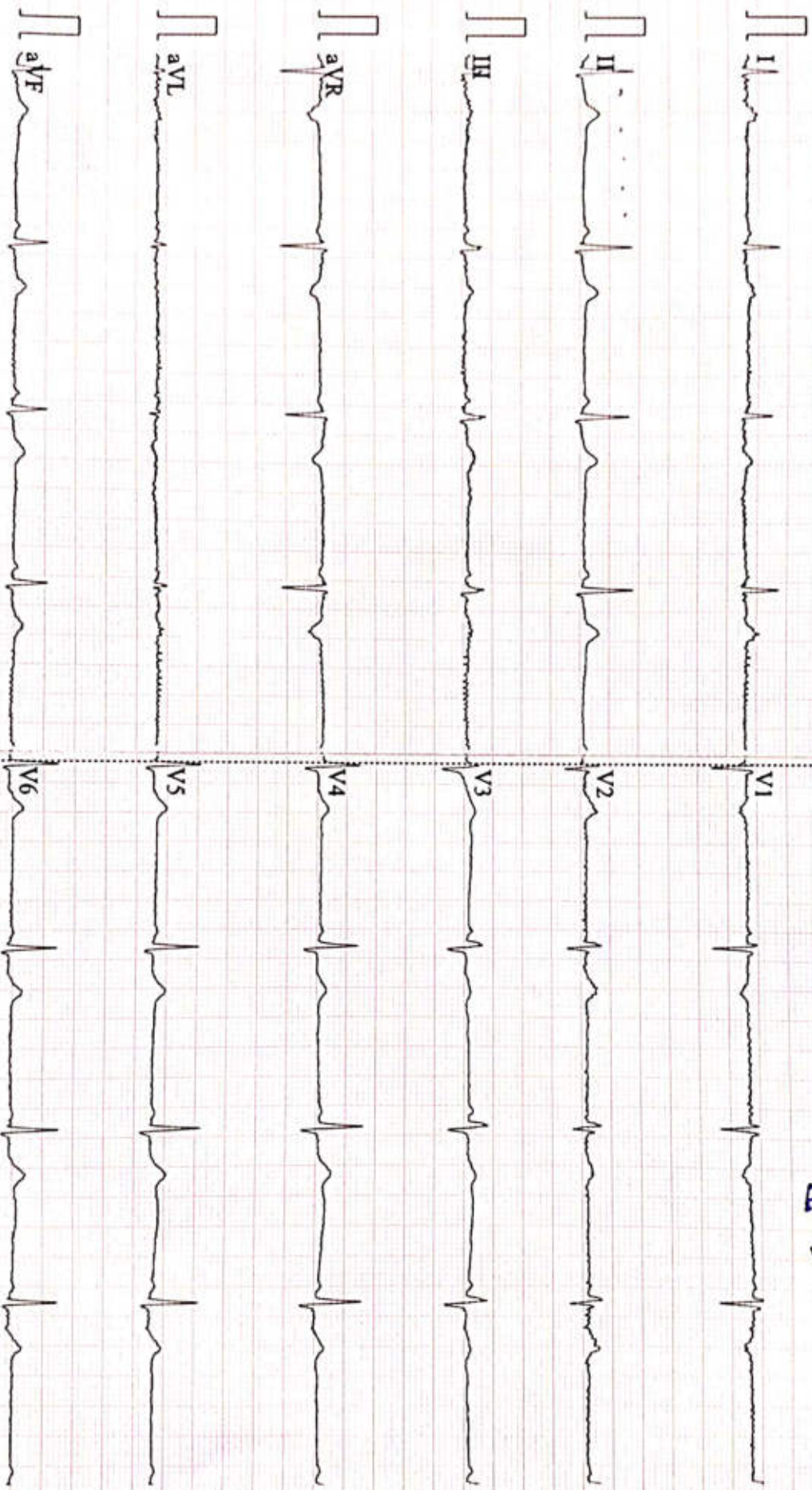
ID: 568037  
MRS MANJULA M  
Female 52Years  
160cm 55kg 120/80 mmHg

25-09-2024 10:18:26 AM

Diagnosis Information:

Unconfirmed Report.

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Kalidasa Road, Mysore - 02  
Ph : 0821-4006040/41



0.5-45Hz AC50 25mm/s 10mm/mV 2\*5.0s 48 CARDIART

D V1.43 Glasgow V28.6.0 APOLLO CLINIC MYSURU

---

Patient Name	: Mrs. MANJULA M	Age	: 52Yrs 3Mths 15Days
UHID	: AHMYS 0000568037	OP Visit No.	: CMYSOPV129769
Printed On	: 25-09-2024 05:52 PM	Advised/Pres Doctor	: --
Department	: Radiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employer Id	: 35E7605		

**DEPARTMENT OF RADIOLOGY**

Lung fields are clear.

Cardio thoracic ratio is normal.

Apices, costo and cardio phrenic 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: NORMAL STUDY .

---End Of The Report---

Dr.CHETAN HOLEPPAGOL  
MBBS, DNB(RADIO DIAGNOSIS)  
90037  
Radiology

---

Patient Name: Mrs. MANJULA M	Date :25 .09.2024	Referring Doctor: Dr .Self
Age / Sex: 52Yrs/Female	UHID No: 568037	Location : OP
<b>ULTRASONOGRAPHY- BREAST</b>		

**RIGHT BREAST:** It is normal in echopattern. No e/o focal nodular or mass lesions seen. No e/o calcifications. The skin over the breast is normal. Nipple and areola are normal. The subcutaneous, mammary and retro mammary zones are normal.

No e/o axillary lymphadenopathy

**LEFT BREAST:** It is normal in echopattern. No e/o focal nodular or mass lesions seen. No e/o calcifications. The skin over the breast is normal. Nipple and areola are normal. The subcutaneous, mammary and retro mammary zones are normal.

A subcentimetric left axillary lymph node measuring ~0.7 cm in short axis is noted in left axilla .No enlarged lymph nodes seen .

**IMPRESSION: NORMAL STUDY.**

  
**Dr. Karthik H V MDRD , DNB**  
Consultant Radiologist.

Apollo Health and Lifestyle Limited

CIN: U65110/2000/PLC/115814

Regd Office: 1-10-60-02, Ashika Kaghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016

Ph No: 041 4904 7777 Fax No: 4904 7744 | mail ID: enquiry@apollohi.com | www.apollohi.com

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Koramangala | Sarajpur Road | Mysore: VV Mahallal

Online appointments: www.apolloclinics.com

TO BOOK AN APPOINTMENT

 **1860 500 7788**

Patient Name: Mrs MANJULA M	Date : .25.09.2024	Referring Doctor: Dr. Self
Age / Sex: 52Yrs/Female	UHID No : 568037	Location : OP
<b>ULTRASONOGRAPHY- ABDOMEN &amp; PELVIS</b>		

**LIVER:** It is normal in size. No focal lesions seen. Few areas of focal fatty infiltration is noted in the segment V of right lobe of liver. IHBR are not dilated. CBD and Portal vein are normal.

**GALL BLADDER:** It is well distended and normal. No calculi seen.

**SPLEEN:** It is normal in size, outline and echopattern. No e/o focal lesions.

**PANCREAS:** It is normal.

**RIGHT KIDNEY:** It measures 9.1 cm with parenchymal thickness of 0.9 cm. It is normal in size, outline and echotexture. No e/o calculus or hydronephrosis seen.

**LEFT KIDNEY:** It measures 9.3 cm with parenchymal thickness of 1.2 cm. It is normal in size, outline and echotexture. No e/o calculus or hydronephrosis seen.

**URINARY BLADDER:** It is well distended. The UB wall is normal. No calculi seen.

**UTERUS and OVARIES** post operative status

**OTHERS:** No e/o free fluid in the abdomen. No e/o lymphadenopathy. No e/o gut wall thickening. No mass lesion seen in the abdomen.

**IMPRESSION: NORMAL STUDY.**

  
**Dr. Karthik HV** MDRD, DNB  
 Consultant Radiologist.

**Apollo Health and Lifestyle Limited**


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TO BOOK AN APPOINTMENT

 **1860 500 7788**

Patient's Name :Mrs Manjula

Age & Sex :52 Yrs /Female

Date :25.09.2024

UHID No:

## 2D ECHOCARDIOGRAPHY STUDY

### Impression:

- Normal chamber volumes
- No regional wall motion abnormality
- Normal left ventricular systolic function. EF 61 %
- No clots. No pericardial effusion

### Findings

Left Ventricle:	Normal
Right Ventricle	Normal
Left Atrium	Normal
Right Atrium	Normal
Aorta	Normal
Pulmonary Artery	Normal
IAS	Intact
IVS	Intact
Valves	Normal
Pericardium	Normal
Doppler	Normal

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### Apollo Health and Lifestyle Limited

ICIN: DR51107020KNPLC115819

Regd Office: 1-10-10-12, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016

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TO BOOK AN APPOINTMENT

 **1860 500 7788**

**Patient's Name : Mrs Manjula**

**Age & Sex : 52 Yrs / Female**

**Date : 25.09.2024**

**UHID No:**

Measurements

AO : 2.5 cm

LA : 2.7 cm

RV : 2.7 cm

LVIDd : 4.54 cm

LVIDs : 2.92 cm

IVSd : 0.70 cm

IVSs : 1.95 cm

PWd : 0.89 cm

PWs : 1.14 cm

EF : 61.0 %

FS : 35.0 %

Doppler

MV	TV	AV	PV
E: 0.79 m/s	E --- m/s	V max 1.07 m/s	V max 0.65 m/s

A: 0.52 m/s    A --- m/s

MR Nil            TR Nil            AR Nil            PR Nil

**Dr. GURU PRASAD. B. V, MBBS, PGDCC**  
**CONSULTANT – NON-INVASIVE CARDIOLOGY**

**Apollo Health and Lifestyle Limited**

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