

Patient Name : Mrs.BALKIES I	Collected : 09/Nov/2023 08:44AM
Age/Gender : 28 Y 1 M 18 D/F	Received : 09/Nov/2023 10:29AM
UHID/MR No : CMYS.0000058461	Reported : 09/Nov/2023 11:37AM
Visit ID : CMYSOPV119102	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 782705727037	

DEPARTMENT OF HAEMATOLOGY

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

PERIPHERAL SMEAR , WHOLE BLOOD EDTA

-



SIN No:BED230275011

APOLLO CLINICS NETWORK

Patient Name : Mrs.BALKIES I	Collected : 09/Nov/2023 08:44AM
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Test Name	Result	Unit	Bio. Ref. Range	Method
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HEMOGRAM , WHOLE BLOOD EDTA

HAEMOGLOBIN	12	g/dL	12-15	Spectrophotometer
PCV	36.50	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.11	Million/cu.mm	3.8-4.8	Electrical Impedence
MCV	89	fL	83-101	Calculated
MCH	29.2	pg	27-32	Calculated
MCHC	32.8	g/dL	31.5-34.5	Calculated
R.D.W	11.9	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	4,000	cells/cu.mm	4000-10000	Electrical Impedence

DIFFERENTIAL LEUCOCYTIC COUNT (DLC)

NEUTROPHILS	52.6	%	40-80	Electrical Impedence
LYMPHOCYTES	39.3	%	20-40	Electrical Impedence
EOSINOPHILS	3	%	1-6	Electrical Impedence
MONOCYTES	4.7	%	2-10	Electrical Impedence
BASOPHILS	0.4	%	<1-2	Electrical Impedence

ABSOLUTE LEUCOCYTE COUNT

NEUTROPHILS	2104	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	1572	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	120	Cells/cu.mm	20-500	Calculated
MONOCYTES	188	Cells/cu.mm	200-1000	Calculated
BASOPHILS	16	Cells/cu.mm	0-100	Calculated

PLATELET COUNT

PLATELET COUNT	273000	cells/cu.mm	150000-410000	Electrical impedence
ERYTHROCYTE SEDIMENTATION RATE (ESR)	12	mm at the end of 1 hour	0-20	Modified Westergren

PERIPHERAL SMEAR

R.B.C: Majority are normocytic normochromic.
W.B.C: Are normal in number,morphology and distribution.
Platelets: Adequate and are seen in singles and clumps.
Hemoparasites: Not seen.

IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE.

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

BLOOD GROUP TYPE	A			Forward & Reverse Grouping with Slide/Tube Aggluti
Rh TYPE	POSITIVE			Forward & Reverse Grouping with Slide/Tube Agglutination



SIN No:BED230275011

Patient Name : Mrs.BALKIES I	Collected : 09/Nov/2023 11:59AM
Age/Gender : 28 Y 1 M 18 D/F	Received : 09/Nov/2023 12:40PM
UHID/MR No : CMYS.0000058461	Reported : 09/Nov/2023 01:07PM
Visit ID : CMYSOPV119102	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 782705727037	

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	91	mg/dl	74-106	GOD, POD
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Comment:

As per American Diabetes Guidelines, 2023

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

Note:

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

GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	106	mg/dL	70-140	GOD - POD
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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.



Patient Name : Mrs.BALKIES I	Collected : 09/Nov/2023 08:44AM
Age/Gender : 28 Y 1 M 18 D/F	Received : 09/Nov/2023 01:22PM
UHID/MR No : CMYS.0000058461	Reported : 09/Nov/2023 03:07PM
Visit ID : CMYSOPV119102	Status : Final Report
Ref Doctor : Dr.SELF	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
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) 2023 Guidelines:

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

Note: Dietary preparation or fasting is not required.

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



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DEPARTMENT OF BIOCHEMISTRY

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

TOTAL CHOLESTEROL	144	mg/dl	0-200	CHOD
TRIGLYCERIDES	40	mg/dl	0-150	GPO, Trinder
HDL CHOLESTEROL	41	mg/dL	>40	CHE/CHO/POD
NON-HDL CHOLESTEROL	103	mg/dL	<130	Calculated
LDL CHOLESTEROL	94.79	mg/dL	<100	Calculated
VLDL CHOLESTEROL	7.95	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.49		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 on different days can show physiological and analytical variations.
- NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.
- Primary prevention algorithm now includes absolute risk estimation and lower LDL Cholesterol target levels to determine eligibility of drug therapy.
- Low HDL levels are associated with Coronary Heart Disease due to insufficient HDL being available to participate in reverse cholesterol transport, the process by which cholesterol is eliminated from peripheral tissues.
- As per NCEP guidelines, all adults above the age of 20 years should be screened for lipid status. Selective screening of children above the age of 2 years with a family history of premature cardiovascular disease or those with at least one parent with high total cholesterol is recommended.
- VLDL, LDL Cholesterol Non HDL Cholesterol, CHOL/HDL RATIO, LDL/HDL RATIO are calculated parameters when Triglycerides are below 350mg/dl. When Triglycerides are more than 350 mg/dl LDL cholesterol is a direct measurement.



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DEPARTMENT OF BIOCHEMISTRY

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Test Name	Result	Unit	Bio. Ref. Range	Method
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LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.49	mg/dl	0-1.2	NBD
BILIRUBIN CONJUGATED (DIRECT)	0.19	mg/dl	0-0.2	Diazotized sulfanilic acid
BILIRUBIN (INDIRECT)	0.30	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	21	U/l	0-45	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	23.0	U/l	0-31	IFCC
ALKALINE PHOSPHATASE	71.00	U/l	42-98	IFCC (AMP buffer)
PROTEIN, TOTAL	6.60	g/dl	6.4-8.3	Biuret
ALBUMIN	4.52	g/dl	3.5-5.2	Bromocresol Green
GLOBULIN	2.08	g/dL	2.0-3.5	Calculated
A/G RATIO	2.17		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.
- Bilirubin may be elevated.
- AST: ALT (ratio) – In case of hepatocellular injury AST: ALT > 1 In Alcoholic Liver Disease AST: ALT usually >2. This ratio is also seen to be increased in NAFLD, Wilson's diseases, Cirrhosis, but the increase is usually not >2.

2. Cholestatic Pattern:

- ALP – Disproportionate increase in ALP compared with AST, ALT.
- Bilirubin may be elevated.
- ALP elevation also seen in pregnancy, impacted by age and sex.
- To establish the hepatic origin correlation with GGT helps. If GGT elevated indicates hepatic cause of increased ALP.

3. Synthetic function impairment:

- Albumin- Liver disease reduces albumin levels.
- Correlation with PT (Prothrombin Time) helps.

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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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SIN No:SE04535206

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Age/Gender : 28 Y 1 M 18 D/F	Received : 09/Nov/2023 10:29AM
UHID/MR No : CMYS.0000058461	Reported : 09/Nov/2023 11:45AM
Visit ID : CMYSOPV119102	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 782705727037	

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/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM

CREATININE	0.62	mg/dL	0.5-1.04	Creatinine amidohydrolase
UREA	13.42	mg/dl	13-43	Urease, UV
BLOOD UREA NITROGEN	6.3	mg/dL	8.0 - 23.0	Calculated
URIC ACID	5.60	mg/dL	2.5-6.2	Uricase
CALCIUM	9.52	mg/dl	8.6-10.3	Arsenazo III
PHOSPHORUS, INORGANIC	4.36	mg/dl	2.7-4.5	Molybdate
SODIUM	144	mmol/L	135-145	Direct ISE
POTASSIUM	3.8	mmol/L	3.5-5.1	Direct ISE
CHLORIDE	102	mmol/L	98 - 107	Direct ISE



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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
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	15.00	U/l	0-38	IFCC



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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, T4, TSH) , SERUM

TRI-IODOTHYRONINE (T3, TOTAL)	0.79	ng/mL	0.64-1.52	CMIA
THYROXINE (T4, TOTAL)	6.37	µg/dL	4.87-11.72	CMIA
THYROID STIMULATING HORMONE (TSH)	0.790	µIU/mL	0.35-4.94	CMIA

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 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
High	High	High	High	Pituitary Adenoma; TSHoma/Thyrotropinoma



SIN No:SPL23158244

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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 (CUE) , URINE

PHYSICAL EXAMINATION

COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pH	5.5		5-7.5	Bromothymol Blue
SP. GRAVITY	1.015		1.002-1.030	Dipstick

BIOCHEMICAL EXAMINATION

URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE		NEGATIVE	GOD-POD
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	NITROPRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	EHRlich
BLOOD	NEGATIVE		NEGATIVE	Dipstick
NITRITE	NEGATIVE		NEGATIVE	Dipstick
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	PYRROLE HYDROLYSIS

CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY

PUS CELLS	6 - 8	/hpf	0-5	Microscopy
EPITHELIAL CELLS	8 - 10	/hpf	<10	MICROSCOPY
RBC	2 - 3	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY



SIN No:UR2216643

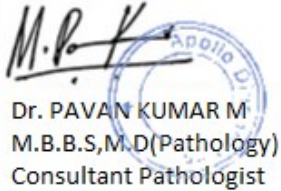
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Test Name	Result	Unit	Bio. Ref. Range	Method
URINE GLUCOSE(POST PRANDIAL)	NEGATIVE		NEGATIVE	Dipstick
URINE GLUCOSE(FASTING)	NEGATIVE		NEGATIVE	Dipstick

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



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



CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

of Mrs BALKIES on 09/10/2023

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

	Tick
<ul style="list-style-type: none"> • Medically Fit 	<input checked="" type="checkbox"/>
<ul style="list-style-type: none"> • Fit with restrictions/recommendations <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"> • Currently Unfit. Review after _____ recommended 	
<ul style="list-style-type: none"> • Unfit 	

Dr. A. Nimesh

Medical Officer

Apollo Clinic

23, 1st Floor,

Kollalapalli Road, Mysore - 02

Ph : 0821-4006040/41

This certificate is not meant for medical purposes.

Date : 09-11-2023
MR NO : CMYS.0000058461

Department : GENERAL
Doctor : *D. N. Manjunath* #03

Name : Mrs. BALKIES I

Registration No : 64024

Age/ Gender : 28 Y / Female

Qualification : *M.B.B.S. MD*

Consultation Timing: 08:27

Height : 155	Weight : 48.1	BMI :	Waist Circum :
Temp :	Pulse : 64/100	Resp : 20	B.P : 100/70

General Examination /
Allergies History

*C/S
N/S
P/A / N/A*

Clinical Diagnosis & Management Plan

Acute URTI

R Dolo 650 HT (10)

T Bactoclar 625 (10)

I Erylast - 100 (10)

Follow up date :

[Signature]
Doctor Signature

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

Date : 09-11-2023
MR NO : CMYS.0000058461

Department : GENERAL
Doctor :

Name : Mrs. BALKIES I
Age/ Gender : 28 Y / Female

Registration No :
Qualification :

Consultation Timing: 08:27

Height : 155	Weight : 48.1	BMI :	Waist Circum :
Temp :	Pulse :	Resp :	B.P : 100/70

ml → 700ml . P313

General Examination /
Allergies History

Clinical Diagnosis & Management Plan

NSH - normal studies . OLE → breasts - RAD .
PH → MS .
FH → DM +
hypertension +
hypothyroid + .

Both DS .
Tubectomised

Adv : TAB . DICALIS 1-1-0
x6M

- PROHANCE ACTIV POWDER

milk
- regular walk / exercise

Follow up date :


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

Date : 09-11-2023
MR NO : CMYS.0000058461

Department : GENERAL
Doctor :

Name : Mrs. BALKIES I

Registration No : Dr. Praveen Kumar

Age/ Gender : 28 Y / Female

Qualification :

Consultation Timing: 08:27

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

General Examination /
Allergies History

Clinical Diagnosis & Management Plan

Cause of unilateral nasal discharge

EOR - Bilateral TM - @

NOSE - Nasal muscle @

oral cavity on explore - Tamilean

no @

As
Recur

Follow up date :

Doctor Signature

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

Date : 09-11-2023
MR NO : CMYS.0000058461

Department : GENERAL Dietetics
Doctor : Madhura. B.P

Name : Mrs. BALKIES I

Registration No :

Age/ Gender : 28 Y / Female

Qualification : M.Sc Nutrition & Dietetics
PHD*

Consultation Timing: 08:27

IBW - 52 kg

Height : 155	Weight : 48.1	BMI : 20 kg/m ²	Waist Circum :
Temp :	Pulse :	Resp :	B.P : 100/70

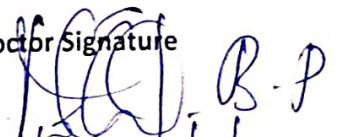
General Examination /
Allergies History

Clinical Diagnosis & Management Plan

- ⇒⇒⇒ Advised "Balanced diet" with fiber rich foods.
- ⇒ Take small frequent meals. Do not skip meals.
- ⇒ Include all variety of seasonal fruits, vegetables and green leafy vegetables on regular basis.
- ⇒ Include nuts like Almonds and walnuts.
- ⇒ Include dry - fruits like dry-dates and raisins on regular basis.
- ⇒ Avoid maida, sugar, too much of salt, bakery soda and any form of cream.
- ⇒ Avoid bakery products, chats, junk foods, deep fried foods, packed and processed foods completely.

Follow up date :

Doctor Signature


9/11/2023

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

Date : 09-11-2023
MR NO : CMYS.0000058461
Name : Mrs. BALKIES I
Age/ Gender : 28 Y / Female

Department : GENERAL
Doctor :
Registration No :
Qualification :

Consultation Timing: 08:27

Height : 155	Weight : 48.1	BMI :	Waist Circum :
Temp :	Pulse :	Resp :	B.P :

General Examination /
Allergies History

Clinical Diagnosis & Management Plan

	<u>Right eye</u>	<u>Left eye</u>
Distance vn	6/6	6/6
Near vn	6/6	6/6
Colour vn	normal	normal

Follow up date :

Doctor Signature


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

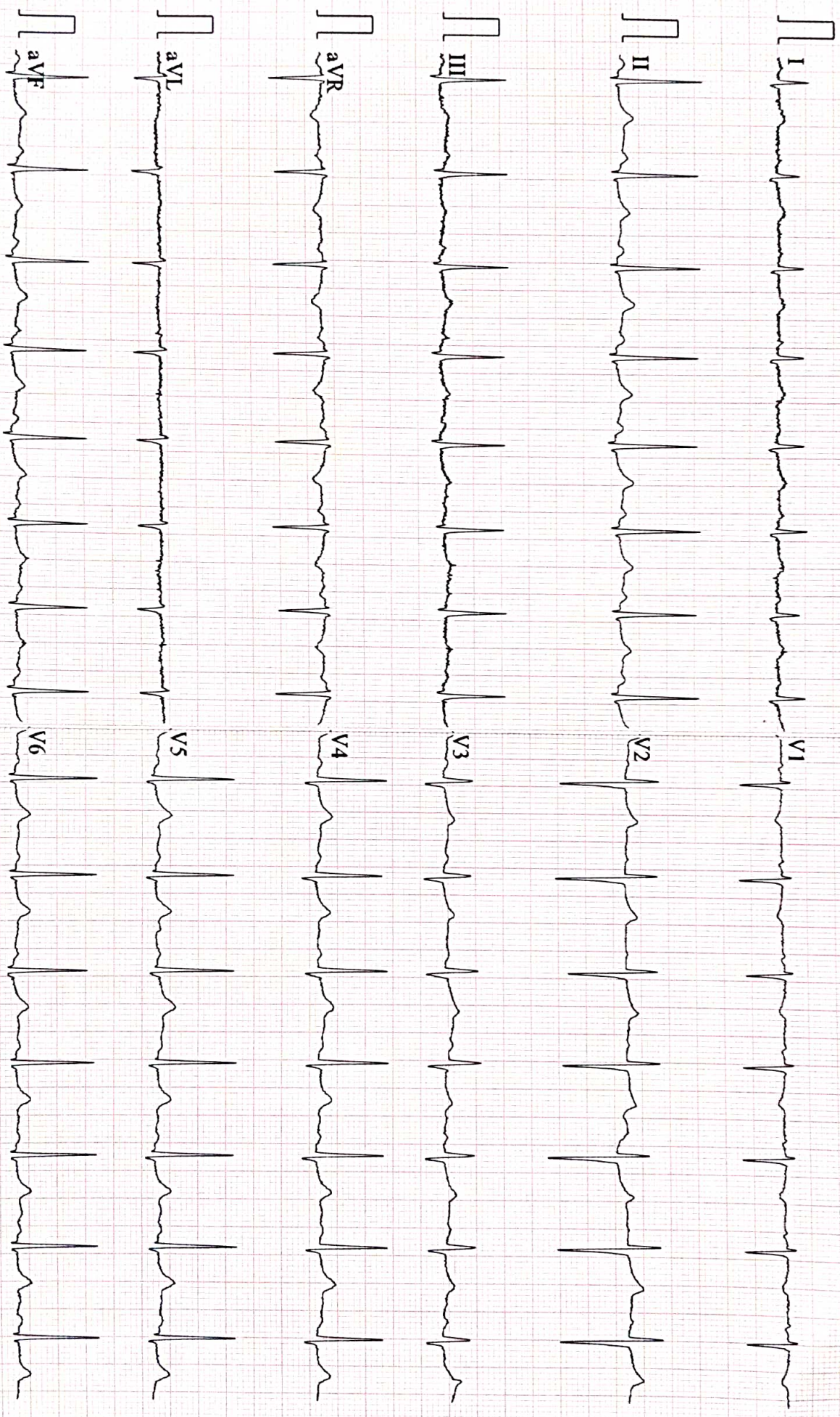
ID: 58461
MRS BALKIES I
Female 28Years
155cm 48kg 100/70 mmHg

09-11-2023 11:28:25 AM

Diagnosis Information:

Unconfirmed Report.

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



0.5~45Hz AC50 25mm/s 10mm/mV 2*5.0s 89 CARDIART 9 D V1.43 Glasgow V28.6.0 APOLLO CLINIC MYSURU

Patient Name : Mrs. BALKIES I Age : 28 Y F
UHID : CMYS.0000058461 OP Visit No : CMYSOPV119102
Reported on : 09-11-2023 12:04 Printed on : 09-11-2023 12:04
Adm/Consult Doctor : Ref Doctor : SELF

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

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.

IMPRESSION :NORMAL STUDY. ✓

Printed on:09-11-2023 12:04

---End of the Report---

Pradeep

Dr. PRADEEP KUMAR C N
MBBS DNB(RADIOLOGY)
Radiology

Apollo Health and Lifestyle Limited

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Regd Office : 1-10-10-102, A/Naka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016
Ph No : 040 4994 1177 Fax No : 4904 7244 | Email ID : enquiry@apollohi.com | www.apollohi.com

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Koramangala | Sarjapur Road | Mysore | VV Mohalla

Online appointments: www.apollohi.com

TO BOOK AN APPOINTMENT

1860 500 7788

Page 1 of 1

Patient Name: Mrs .Balakies I	Date : 09.11.2023	Referring Doctor: Dr .Self
Age / Sex: 28 Yrs/Female	UHID NO:58461	Location : OP
ULTRASONOGRAPHY- ABDOMEN & PELVIS		

LIVER: It is normal in size and echotexture. No focal lesions seen. 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 105x34 mm with parenchymal thickness of 11 mm. It is normal in size, outline and echotexture. No e/o calculus or hydronephrosis seen.

LEFT KIDNEY: It measures 100x46 mm with parenchymal thickness of 13mm. 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: It is anteverted and measures 68x46x59 mm with ET= 10mm. It is normal in size, outline and echotexture. No mass lesion.

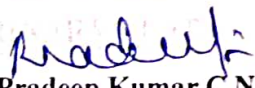
Rt. OVARY: It measures 22x32 mm. It is normal. No mass lesion seen.

Lt. OVARY: It measures 27x29 mm. It is normal. No mass lesion seen.

RIF: No evidence of focal collection or mass lesion seen. Appendix is not visualized.

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. Pradeep Kumar C N, DNB
Consultant Radiologist.

Apollo Health and Lifestyle Limited

(CIN) U65110TU2009PLC115819

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TO BOOK AN APPOINTMENT

 **1860 500 7788**

Patient's Name : Mrs. Balkies I	Age & Sex :28yrs/Female
Date :09.11.2023	UHID No : 58461

MORPHOLOGICAL DATA:

Left Atrium	Normal
Left Ventricle	Normal
Right Atrium	Normal
Right Ventricle	Normal
Interatrial septum	Intact
Interventricular septum	Intact
Aorta	Normal
Pulmonary artery	Normal
Mitral valve	Normal
Tricuspid valve	Normal
Aortic valve	Normal
Pulmonary valve	Normal
Pericardium	Normal

DIMENSIONS:

RVIDd	1.36 cms
LVIDd	3.81 cms
LVIDs	2.41cms
IVSd	0.76Cms
LVPWd	0.67Cms
AORTA	2.38 cms
LA	2.63 Cms
LVEF	68 %

Apollo Health and Lifestyle Limited

Regd. Office: 100/101/102, Ashoka Rajhupath, Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016
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 Kowthangudi | Sarjapur Road | Mysore | CV Mohanali

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TO BOOK AN APPOINTMENT

1860 500 7788

Patient's Name : Mrs. Balkies I

Age & Sex : 28yrs/Female

Date : 09.11.2023

UHID No : 58461

DOPPLER DATA:

VALVES	Velocity (Cm/s)	Peak Gradient (mmHg)	Mean Gradient (mmHg)	Regurgitation
Mitral	E : 0.71 A : 0.46 E/A : 1.55 E/e' : 6.39	2.01		NIL
Tricuspid	E: 0.49 A: 0.32			NIL
Aortic	0.97	3.83		NIL
Pulmonary	0.78	2.47		NIL

IMPRESSION:

NORMAL VALVES AND CHAMBERS
NO RWMA
NORMAL LV FUNCTION
NO e/o CLOT/ VEGETATION/ PE


DR. GOWTHAM H G

MD, DM CARDIOLOGY

Apollo Health and Lifestyle Limited

(Cite: URS 11022100R1C115R19)
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Ph: No. 011-4960 7777 | Fax: No. 4904 7744 | Email: ID.enquiry@apolloh.com | www.apolloh.com

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24x7x365 APPOINTMENT

1860 500 7788

Scanned with CamScanner

Informed Consent/Declaration For Test Exclusion

Patient Name: Mrn Balkies Age: 58/61

UHID Number: 58461

Please tick and sign the relevant part

I certify that I will skip LBC pap smear Test from my own.

No refund is provided for the above excluded test and i have been informed about the same.

Patient signature x Balkies Date 9/14/2023

Witness signature: [Signature] Date: 9/14/2023