

| | | | |
|----------------------------|----------------------|--------------------|--------------------|
| Patient Name | : Mrs. Poonam Kumari | Age/Gender | : 33 Y/F |
| UHID/MR No. | : STAR.0000061309 | OP Visit No | : STAROPV67237 |
| Sample Collected on | : | Reported on | : 12-02-2024 11:32 |
| LRN# | : RAD2232092 | Specimen | : |
| Ref Doctor | : SELF | | |
| Emp/Auth/TPA ID | : 585455255 | | |

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.

CONCLUSION :

No obvious abnormality seen



Dr. VINOD SHETTY
Radiology

OUT-PATIENT RECORD

Date : 10/2/24
MRNO :
Name : Poornam Kumari
Age/Gender : 23/Fc.
Mobile No :
Passport No :
Aadhar number :

| | | | |
|---------------|---------------|--------------|-------------------|
| Pulse : 70 | B.P. : 110/80 | Resp : 20b/m | Temp : 98°F |
| Weight : 69.4 | Height : 158 | BMI : | Waist Circum : 94 |

General Examination / Allergies History

Clinical Diagnosis & Management Plan

Marekled, Egitarwar
Sleep, @ BB @ No Allergy
No addiction rx 3/28-30 days
FH father tetrom modu: Hypertension
Lipid ↑ TSH 1h muu 13-15/pc
1) Atard oil/gluce
2) morning walk us mindfully
3) Repeat Lipid / TSH / glu ^{u/mi fall} 2 months
T. Noflex 400 → → X 10 days
Physically fit.

Follow up date:

Dr. (Mrs.) CHHAYA P. VAJA
M.D. (MUM)
Physician & Cardiologist
Reg. No. 56942

Doctor Signature

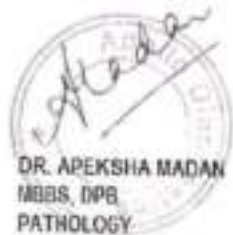


| | |
|---|--|
| Patient Name : Mrs POONAM KUMARI Age/Gender : 33 Y 6 M 4 D/F UHID/MR No : STAR.0000061309 Visit ID : STAROPV67237 Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 585455255 | Collected : 10/Feb/2024 09:38AM Received : 10/Feb/2024 12:51PM Reported : 10/Feb/2024 04:54PM Status : Final Report Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
|---|--|

DEPARTMENT OF HAEMATOLOGY

PERIPHERAL SMEAR , WHOLE BLOOD EDTA

Methodology : Microscopic
 RBC : Mild Hypochromasia, Mild anisocyte
 WBC : Normal in number, morphology and distribution. No abnormal cells seen
 Platelets : Adequate in Number
 Parasites : No Haemoparasites seen
IMPRESSION : Mild Hypochromasia, Mild anisocyte blood picture
 Note/Comment : Please Correlate clinically



DR. APEKSHA MADAN
 MBBS, DPM
 PATHOLOGY



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| Ref Doctor | : Dr. SELF | Sponsor Name | : ARCOFEMI HEALTHCARE LIMITED | |
| Emp/Auth/TPA ID | : 585455266 | | | |

DEPARTMENT OF HAEMATOLOGY

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

| Test Name | Result | Unit | Bio. Ref. Range | Method |
|--|-------------|-------------------------|-----------------|---------------------------|
| HEMOGRAM , WHOLE BLOOD EDTA | | | | |
| HAEMOGLOBIN | 10.3 | g/dL | 12-15 | CYANIDE FREE COLOURIMETER |
| PCV | 32.50 | % | 40-50 | PULSE HEIGHT AVERAGE |
| RBC COUNT | 3.75 | Million/cu.mm | 3.8-4.8 | Electrical Impedance |
| MCV | 86.5 | fL | 83-101 | Calculated |
| MCH | 27.5 | pg | 27-32 | Calculated |
| MCHC | 31.8 | g/dL | 31.5-34.5 | Calculated |
| R.D.W | 14.1 | % | 11.6-14 | Calculated |
| TOTAL LEUCOCYTE COUNT (TLC) | 5,920 | cells/cu.mm | 4000-10000 | Electrical Impedance |
| DIFFERENTIAL LEUCOCYTIC COUNT (DLC) | | | | |
| NEUTROPHILS | 48.2 | % | 40-80 | Electrical Impedance |
| LYMPHOCYTES | 42.9 | % | 20-40 | Electrical Impedance |
| EOSINOPHILS | 2.3 | % | 1-6 | Electrical Impedance |
| MONOCYTES | 5.7 | % | 2-10 | Electrical Impedance |
| BASOPHILS | 0.7 | % | <1-2 | Electrical Impedance |
| ABSOLUTE LEUCOCYTE COUNT | | | | |
| NEUTROPHILS | 2853.44 | Cells/cu.mm | 2000-7000 | Calculated |
| LYMPHOCYTES | 2539.68 | Cells/cu.mm | 1000-3000 | Calculated |
| EOSINOPHILS | 136.16 | Cells/cu.mm | 20-500 | Calculated |
| MONOCYTES | 337.44 | Cells/cu.mm | 200-1000 | Calculated |
| BASOPHILS | 41.44 | Cells/cu.mm | 0-100 | Calculated |
| PLATELET COUNT | 212000 | cells/cu.mm | 150000-410000 | IMPEDENCE/MICROSCOPY |
| ERYTHROCYTE SEDIMENTATION RATE (ESR) | 20 | mm at the end of 1 hour | 0-20 | Modified Westergren |
| PERIPHERAL SMEAR | | | | |

Methodology : Microscopic

RBC : Mild Hypochromasia, Mild anisocyte

WBC : Normal in number, morphology and distribution. No abnormal cells seen

Platelets : Adequate in Number

Page 2 of 13




DR. APEKSHA MADAN
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PATHOLOGY

SEN No-BED24003492

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Parasites : No Haemoparasites seen

IMPRESSION : Mild Hypochromasia, Mild anisocyte blood picture

Note/Comment : Please Correlate clinically



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| Test Name | Result | Unit | Bio. Ref. Range | Method |
|---|----------|------|-----------------|--|
| 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 |




DR. APEKSHA MADAN
MBBS, DPM
PATHOLOGY

SIN No:BED040033492

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Tirupathi : D No:23-9-99/3, Amaravathi Nagar, M R Pala Main Road, Tirupathi - 517501 T: 9515985968 / 8772243415 / 8227743414
Vijayawada : Parmeshwara Complex, Venkateshwara Puram, Vijayawada - 520010:09662497878 / 9100105801
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Dibrugarh : South Amalapaty, A T Road, Dibrugarh, Assam - 786001 T: 8820444418
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WEST BENGAL

Kolkata: 336 , Canal Street , VIP Road , Lake Town , Kolkata -700048, Near Lake Town Clock Tower, West Bengal 700048; T- 03340623245
Cooch Behar: B.S.Road, Near Central Bank, Cooch Behar, West Bengal, 736101; T- 9832400083
Siliguri: 3A,38 Creascent Court Building, Jhankar More, Burdwan Road, Darjeeling, Pin 734005 ; T- 8231944412
Berhampore: 13/3/A, A. C ROAD, INDTAPRASTHA,PO-KHAGRA,PS-BERHAMPORE,DIST-MURSHIDABAD,PIN- 742103; T- 0348291029

| | |
|-----------------------------------|--|
| Patient Name : Mrs. POONAM KUMARI | Collected : 10/Feb/2024 04:41PM |
| Age/Gender : 33 Y 6 M 4 D/F | Received : 10/Feb/2024 05:48PM |
| UHID/MR No : STAR.0000061309 | Reported : 10/Feb/2024 06:31PM |
| Visit ID : STAROPV67237 | Status : Final Report |
| Ref Doctor : Dr.SELF | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 585486255 | |

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 |
|-------------------------------|--------|-------|-----------------|-----------|
| GLUCOSE, FASTING , NAF PLASMA | 100 | mg/dL | 70-100 | 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:

- The diagnosis of Diabetes requires a fasting plasma glucose of ≥ 126 mg/dL and/or a random / 2 hr post glucose value of ≥ 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.

| Test Name | Result | Unit | Bio. Ref. Range | Method |
|--|--------|-------|-----------------|-----------|
| GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR) | 122 | 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. APEKSHA MADAN
MBBS, DPM
PATHOLOGY

SEN No: PLF1418072

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| | | | | | |
|------|-------------------|-------------------|----------------|-----------------------------|----------------------------|
| TOUC | Patient Name : | Mrs.POCNAM KUMARI | Collected : | 10/Feb/2024 09:38AM | Expertise. Empowering you. |
| | Age/Gender : | 33 Y 6 M 4 D/F | Received : | 10/Feb/2024 04:37PM | |
| | UHID/MR No : | STAR.0000081309 | Reported : | 10/Feb/2024 05:08PM | |
| | Visit ID : | STAROPV67237 | Status : | Final Report | |
| | Ref Doctor : | Dr.SELF | Sponsor Name : | ARCOFEMI HEALTHCARE LIMITED | |
| | Emp/Auth/TPA ID : | 585455255 | | | |

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 | | | | |
| 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.

- 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)




 Dr.Sandip Kumar Banerjee
 M.B.B.S,M.D(PATHOLOGY),D.P.B
 Consultant Pathologist

SIN No:EDT240014758

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| | |
|---|--|
| Patient Name : Mrs. POONAM KUMARI Age/Gender : 33 Y B M 4 D/F UHID/MR No : STAR.0000061309 Visit ID : STAROPV67237 Ref Doctor : Dr. SELF Emp/Auth/TPA ID : 586455255 | Collected : 10/Feb/2024 09:38AM Received : 10/Feb/2024 04:40PM Reported : 10/Feb/2024 08:05PM Status : Final Report Sponsor Name : 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. Range | Method |
|------------------------------|--------|-------|-----------------|-------------|
| LIPID PROFILE , SERUM | | | | |
| TOTAL CHOLESTEROL | 195 | mg/dL | <200 | CHE/CHO/POD |
| TRIGLYCERIDES | 84 | mg/dL | <150 | Enzymatic |
| HDL CHOLESTEROL | 42 | mg/dL | >40 | CHE/CHO/POD |
| NON-HDL CHOLESTEROL | 153 | mg/dL | <130 | Calculated |
| LDL CHOLESTEROL | 136.2 | mg/dL | <100 | Calculated |
| VLDL CHOLESTEROL | 16.8 | mg/dL | <30 | Calculated |
| CHOL / HDL RATIO | 4.64 | | 0-4.97 | Calculated |

Comment:

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

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

1. Measurements in the same patient on different days can show physiological and analytical variations.
2. NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.
3. Primary prevention algorithm now includes absolute risk estimation and lower LDL Cholesterol target levels to determine eligibility of drug therapy.
4. Low HDL levels are associated with Coronary Heart Disease due to insufficient HDL being available to participate in reverse cholesterol transport, the process by which cholesterol is eliminated from peripheral tissues.
5. As per NCEP guidelines, all adults above the age of 20 years should be screened for lipid status. Selective screening of children above the age of 2 years with a family history of premature cardiovascular disease or those with at least one parent with high total cholesterol is recommended.
6. VLDL, LDL Cholesterol Non HDL Cholesterol, CHOL/HDL RATIO, LDL/HDL RATIO are calculated parameters when Triglycerides are below 350mg/dl. When Triglycerides are more than 350 mg/dl LDL cholesterol is a direct measurement.



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



SIN No: SB04625070

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| | |
|--|---|
| Patient Name : Mrs. POONAM KUMARI Age/Gender : 33 Y 6 M 4 D/F UHID/MR No : STAR.0000061309 Visit ID : STAROPV67237 Ref Doctor : Dr. SELF Emp/Audit/TPA ID : 585453255 | Collected : 10/Feb/2024 09:38AM Received : 10/Feb/2024 04:40PM Reported : 10/Feb/2024 06:05PM Status : Final Report Sponsor Name : 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. Range | Method |
|--|--------|-------|-----------------|-------------------------|
| LIVER FUNCTION TEST (LFT) , SERUM | | | | |
| BILIRUBIN, TOTAL | 1.10 | mg/dL | 0.20-1.20 | DIAZO METHOD |
| BILIRUBIN CONJUGATED (DIRECT) | 0.46 | mg/dL | 0.0-0.3 | Calculated |
| BILIRUBIN (INDIRECT) | 0.64 | mg/dL | 0.0-1.1 | Dual Wavelength |
| ALANINE AMINOTRANSFERASE (ALT/SGPT) | 13 | U/L | 9-52 | UV with P-5-P |
| ASPARTATE AMINOTRANSFERASE (AST/SGOT) | 22.0 | U/L | 14-36 | UV with P-5-P |
| ALKALINE PHOSPHATASE | 84.00 | U/L | 38-126 | p-nitrophenyl phosphate |
| PROTEIN, TOTAL | 6.80 | g/dL | 6.3-8.2 | BIURET METHOD |
| ALBUMIN | 4.20 | g/dL | 3.5 - 5 | Bromocresol Green |
| GLOBULIN | 2.60 | g/dL | 2.0-3.5 | Calculated |
| A/G RATIO | 1.62 | | 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 in increased in NAFLD, Wilson's disease, 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.



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

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| | | | | | |
|------|-------------------|--------------------|----------------|-----------------------------|----------------------------|
| TOUR | Patient Name : | Mrs. POONAM KUMARI | Collected : | 10/Feb/2024 09:38AM | Expertise. Empowering you. |
| | Age/Gender : | 33 Y 8 M 4 D/F | Received : | 10/Feb/2024 04:40PM | |
| | UHID/IR No : | STAR.0000061309 | Reported : | 10/Feb/2024 06:18PM | |
| | Visit ID : | STAROPV67237 | Status : | Final Report | |
| | Ref Doctor : | Dr. SELF | Sponsor Name : | ARCOFEMI HEALTHCARE LIMITED | |
| | Emp/Auth/TPA ID : | 685455255 | | | |

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 |
|---|--------|--------|-----------------|---------------------------|
| RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM | | | | |
| CREATININE | 0.80 | mg/dL | 0.5-1.04 | Creatinine amidohydrolase |
| UREA | 19.30 | mg/dL | 15-36 | Urease |
| BLOOD UREA NITROGEN | 9.0 | mg/dL | 8.0 - 23.0 | Calculated |
| URIC ACID | 4.30 | mg/dL | 2.5-6.2 | Uricase |
| CALCIUM | 8.80 | mg/dL | 8.4 - 10.2 | Arsenazo-III |
| PHOSPHORUS, INORGANIC | 3.40 | mg/dL | 2.5-4.5 | PMA Phenol |
| SODIUM | 140.3 | mmol/L | 135-145 | Direct ISE |
| POTASSIUM | 3.7 | mmol/L | 3.5-5.1 | Direct ISE |
| CHLORIDE | 103.0 | mmol/L | 98 - 107 | Direct ISE |



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| Test Name | Result | Unit | Bio. Ref. Range | Method |
|--|--------|------|-----------------|--------|
| GAMMA GLUTAMYL TRANSPEPTIDASE (GGT), SERUM | 11.00 | U/L | 0-37.99 | IFCC |



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| | |
|---|--|
| Patient Name : Mrs. POONAM KUMARI Age/Gender : 33 Y 8 M 4 D/F UHID/MR No : STARL0000061309 Visit ID : STAROPV67237 Ref Doctor : Dr. SELF Emp/Auth/TPA ID : 585455266 | Collected : 10/Feb/2024 09:38AM Received : 10/Feb/2024 01:13PM Reported : 10/Feb/2024 04:38PM Status : Final Report Sponsor Name : 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. Range | Method |
|--|---------------|--------|-----------------|--------|
| THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM | | | | |
| TRI-IODOETHYRONINE (T3, TOTAL) | 0.9 | ng/mL | 0.67-1.81 | ELFA |
| THYROXINE (T4, TOTAL) | 5.99 | µg/dL | 4.66-9.32 | ELFA |
| THYROID STIMULATING HORMONE (TSH) | 14.530 | µIU/mL | 0.25-5.0 | ELFA |

Kindly correlate clinically

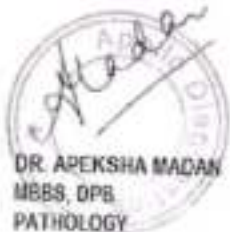
Comment:

| | |
|-----------------------------|--|
| For pregnant females | Bio Ref Range for TSH in µIU/ml (As per American Thyroid Association) |
| First trimester | 0.1 - 2.5 |
| Second trimester | 0.2 - 3.0 |
| Third trimester | 0.3 - 3.0 |

- 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.
- 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.
- 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.
- 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 |




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 PATHOLOGY

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TOUCHING LIVES

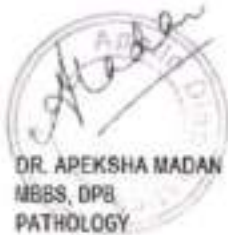
Patient Name : Mrs. POONAM KUMARI
Age/Gender : 33 Y 6 M 4 D/F
UHID/MR No : STAR.0000081309
Visit ID : STAROPV67237
Ref Doctor : Dr. SELF
Emp/Auth/TPA ID : 565455255

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DEPARTMENT OF IMMUNOLOGY

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

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| Patient Name : Mrs. POONAM KUMARI | Collected : 10/Feb/2024 09:38AM |
| Age/Gender : 33 Y 6 M 4 D/F | Received : 10/Feb/2024 05:01PM |
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| Visit ID : STAROPV67237 | Status : Final Report |
| Ref Doctor : Dr.SELF | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Ault/TPA ID : 565465255 | |

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 |
|--|-----------------------|------|------------------|----------------------------|
| COMPLETE URINE EXAMINATION (CUE) , URINE | | | | |
| PHYSICAL EXAMINATION | | | | |
| COLOUR | PALE YELLOW | | PALE YELLOW | Visual |
| TRANSPARENCY | HAZY | | CLEAR | Visual |
| pH | 6.5 | | 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 | POSITIVE | | NEGATIVE | Dipstick |
| NITRITE | NEGATIVE | | NEGATIVE | Dipstick |
| LEUCOCYTE ESTERASE | POSITIVE | | NEGATIVE | PYRROLE HYDROLYSIS |
| CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY | | | | |
| PUS CELLS | 13-15 | /hpf | 0-5 | Microscopy |
| EPITHELIAL CELLS | 8-10 | /hpf | <10 | MICROSCOPY |
| RBC | 6-8 | /hpf | 0-2 | MICROSCOPY |
| CASTS | NIL | | 0-2 Hyaline Cast | MICROSCOPY |
| CRYSTALS | ABSENT | | ABSENT | MICROSCOPY |
| OTHERS | Bacteria Present (++) | | | MICROSCOPY |

*** End Of Report ***

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 DR. APEKSHA MADAN
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Bangalore 2 : No.209, Kasturinagar Main Road, Kasturi Nagar, Bangalore- 560043 T: 9100910985

Mandya : #1135, Makam Towers, Vivekananda Road, Ashoka Nagar, Mandya - 571401 T:08232 225566

Mangalore : Shop No 002, Groundfloor, Janavi Plaza, Near Bunts Hostel Circle, Mangalore - 575003 T:9100910984

Mysore : Plot No.#485/1, Ramanuja Road, Opp JSS Hospital, Agrahara, Mysore - 570004 T:9100910975

MADHYA PRADESH

Gwalior : Shop No.1, M.K.Plaza, Hospital Road, Opposite Mahadev Dispensary, JA Group of Hospitals, Gwalior - 474001

T: 0751-2453068 MAHARASHTRA

Aurangabad : Shreeji Tower, Shop No 10,11, Kamgar Chowk, N4-Cidco, Aurangabad - 431001 T: 0240 2487444

Nashik : Shop No - 4A, Archit Royale Apartment, Opp. Eassar Petrol Pump Mahatma Nagar, Nashik 422007 T: 0253 6603130,9100910967

Pune : 1011,1st Floor, Farena Corporate Park, Near Season's Mall, Magarpatta Road, Hadapsar, Pune - 411028 T: 9100105826

Solapur : Plot No B-3, B-4 Vishwakiran Park, Jule Solapur - 413008 T: 0217 3344242

ODISHA

Bhubaneswar : Plot No. 305/1615, Surya Vihar, Patia Bhubaneswar, Odisha - 751024 T: 8230944413

Sambalpur : Aithapally Main Road, Sambalpur, Odisha - 768004 T: 8231944411

TAMILNADU

Chennai : Plot No-8143(Part),9 Avenue, Ashok Nagar, Chennai - 600083 T: 044 42167277

Madurai : 9/B, V P Rathinaswamy Nadar Street, Bibikulam, Madurai - 625002 T: 9100910974

Pondicherry : 59, VVP Nagar, Kamaraj Salai, Thattanchavady, Pondichery - 605 009 T: 0413 4201 244

Tirunelveli : Tirunelveli High Ground, Main Road, DB/11, Everest Building, Tirunelveli - 627011 T: 0462 - 2580940

Trichy : G6 and F6, Bharath Shopping Mall, 2/50, E.V.R Road, (Opp G.H), Puthur, Trichy, Tamil Nadu - 620017 T: 9100910982

TELANGANA

Hyderabad 1 : Survey Nos. 140/A, 140/B, 140/C, 141/A, 141/B and 141/C, Thokatta Village, Bowenpally, Secunderabad - 500011 T: 9100911393

Hyderabad 2 : Plot No: 187, Category-UG of the Nallaganolla Residential Complex, Serilingampally Mandal, Ranga Reddy - 500018 T: 8121234059

Warangal : 2-5-850, 2-5-227, Circult House Road, Nakkallagulta, Hanamkonda, Telangana - 508002 T:9100910976

TRIPURA

Agartala : H. No.233873, HoldingNo 70 A, Ward No 23, A A Road, Near Joyguru Stand Area, Dhaleswar, Agartala - 799007 T: 8336978924

WEST BENGAL

Kolkata : 336 , Canal Street , VIP Road , Lake Town , Kolkata - 700048, Near Lake Town Clock Tower, West Bengal 700048; T- 03340623245

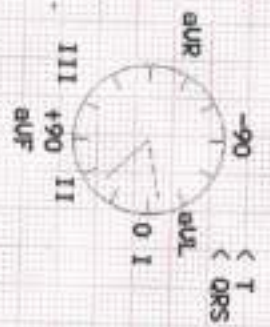
Cooch Behar: B.S.Road, Near Central Bank, Cooch Behar, West Bengal, 735101; T- 9832400083

Siliguri: 3A,3B Creascent Court Building, Jhankar More, Bardwan Road, Darjeeling, Pin 734005 ; T- 8231944412

Berhampore: 13/3/A, A. C ROAD, INDIA PRASTHA, PO-KHAGRA,PS-BERHAMPORE,DIST-MURSHIDABAD,PIN- 742103; T- 0348281028

Measurement Results:

| | | | |
|---------|---|-----------|---------|
| QRS | : | 98 | ms |
| QT/QTcB | : | 374 / 403 | ms |
| PR | : | | ms |
| P | : | | ms |
| RR/PP | : | 842 / 830 | ms |
| P/ORS/T | : | / 46/ -11 | degrees |



Interpretation:
 12SL - Interpretation:
 Accelerated Junctional rhythm
 Abnormal ECG

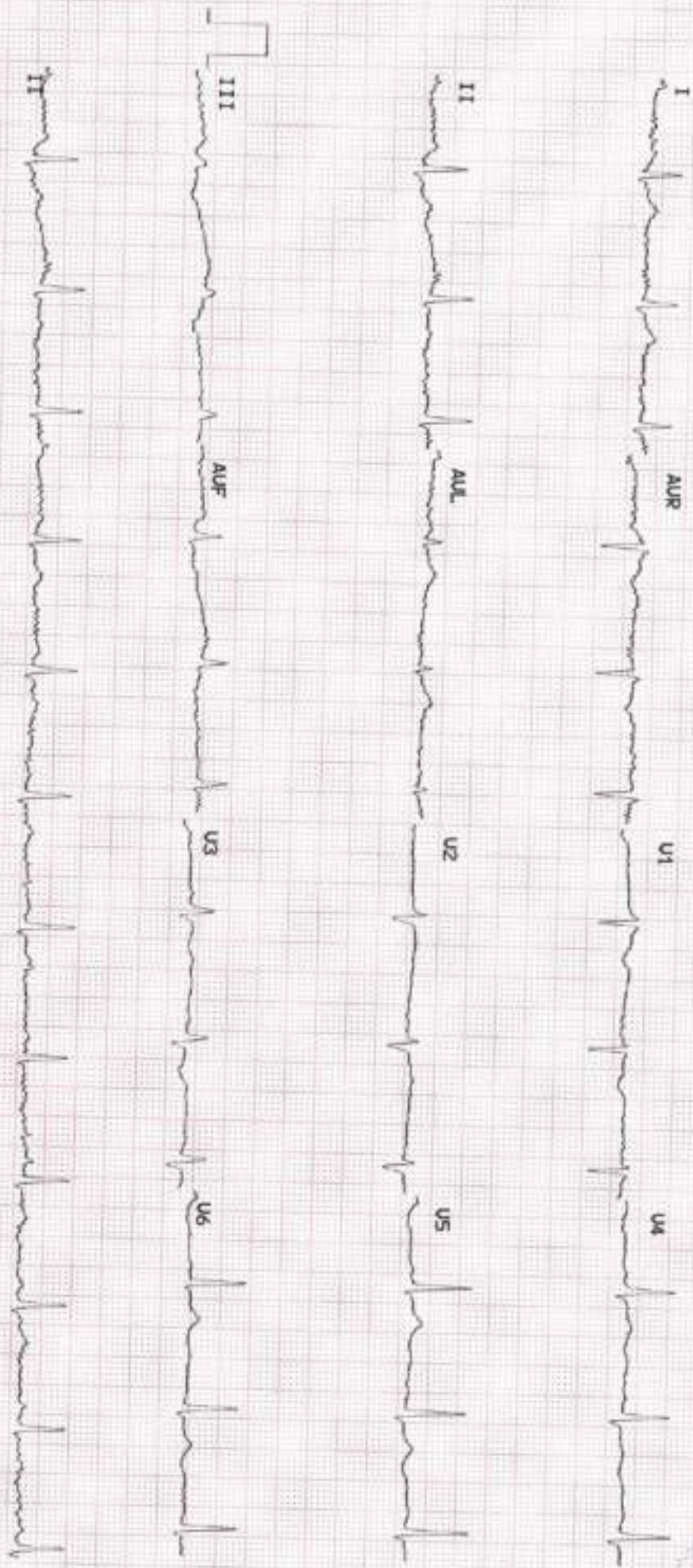
Incomplete RBBB

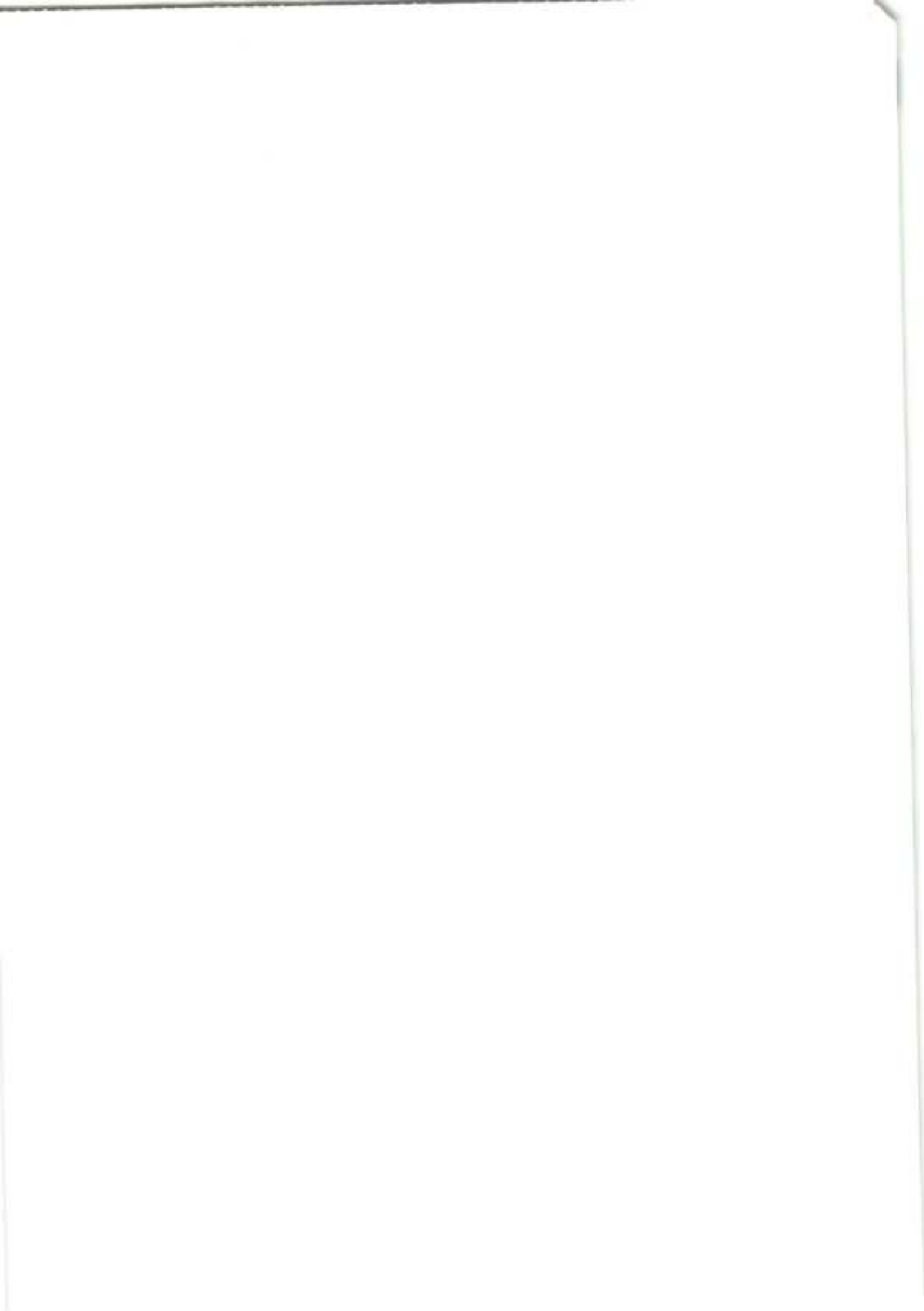
[Signature]
 Unconfirmed report.



Dr. (Mrs.) CHHAYA P. VAJA
 M.D. (MUM)
 Physician & Cardiologist
 Reg. No. 56942

HR 70 bpm





Patient Name : Mrs. Poonam Kumari
UHID : STAR.0000061309
Reported on : 12-02-2024 11:32
Adm/Consult Doctor :

Age : 33 Y F
OP Visit No : STAROPV67237
Printed on : 12-02-2024 11:32
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.

CONCLUSION :

No obvious abnormality seen

Printed on:12-02-2024 11:32

---End of the Report---



Dr. VINOD SHETTY
Radiology

Name : Mrs.Poonam Kumari
Age : 33 Year(s)

Date : 10/02/2024
Sex : Female
Visit Type : OPD


ECHO Cardiography

Comments:

Normal cardiac dimensions.
Structurally normal valves.
No evidence of LVH.
Intact IAS/IVS.
No evidence of regional wall motion abnormality.
Normal LV systolic function (LVEF 60%).
No diastolic dysfunction.
Normal RV systolic function.
No intracardiac clots / vegetation/ pericardial effusion.
No evidence of pulmonary hypertension.PASP=30mmHg.
IVC 12 mm collapsing with respiration.

Final Impression:

NORMAL 2DECHOCARDIOGRAPHY REPORT.


DR.CHHAYA P.VAJA. M. D.(MUM)
NONINVASIVE CARDIOLOGIST

Name : Mrs.Poonam Kumari
Age : 33 Year(s)

Date : 10/02/2024
Sex : Female
Visit Type : OPD

Dimension:

| | |
|----------|--------------|
| EF Slope | 130mm/sec |
| EPSS | 04mm |
| LA | 28mm |
| AO | 30mm |
| LVID (d) | 45mm |
| LVID(s) | 21mm |
| IVS (d) | 11mm |
| LVPW (d) | 11mm |
| LVEF | 60% (visual) |


DR.CHHAYA P.VAJA. M. D.(MUM)
NONINVASIVE CARDIOLOGIST

Apollo Spectra Hospitals: 156, Famous Cine Labs, Behind Everest Building, Tardeo, Mumbai - 400034
Ph No:022 - 4332 4500 | www.apollospectra.com

Apollo Specialty Hospitals Pvt. Ltd. (CIN - U85100TG2009PTC099414)
(Formerly known as Nova Specialty Hospital Pvt. Ltd.)

Regd. Office: 7-1-617/A, 615 & 616, Imperial Towers, 7th Floor, Ameerpet, Hyderabad, Telangana - 500038
Ph No:040 - 4904 7777 | www.apollohl.com

Patient Name : MRS.POONAM KUMARI
Ref. By : HEALTH CHECK UP

Date : 10-02-2024
Age : 33 years

SONOGRAPHY OF ABDOMEN AND PELVIS

LIVER : The liver is normal in size, shape & echotexture. No focal mass lesion is seen. The intrahepatic biliary tree & venous radicles appear normal. The portal vein and CBD appear normal.

GALL BLADDER : The gall bladder is normal in size with a normal wall thickness and there are no calculi seen in it.

PANCREAS : The pancreas is normal in size and echotexture. No focal mass lesion is seen.

SPLEEN : The spleen is normal in size and echotexture. No focal parenchymal mass lesion is seen. The splenic vein is normal.

KIDNEYS : The **RIGHT KIDNEY** measures 10.5 x 4.2 cms and the **LEFT KIDNEY** measures 11.0 x 4.6 cms in size. Both kidneys are normal in shape and echotexture. There is no evidence of hydronephrosis or calculi seen on either side.

The para-aortic & iliac fossa regions appear normal. There is no free fluid or any lymphadenopathy seen in the abdomen.

URINARY BLADDER : The urinary bladder distends well and is normal in shape and contour. No intrinsic lesion or calculus is seen in it. The bladder wall is normal in thickness.

UTERUS : The uterus is anteverted & it appears normal in size, shape and echotexture. It measures 7.9 x 5.3 x 3.9 cms. Normal myometrial & endometrial echoes are seen. Endometrial thickness is 10.8 mms. No focal mass lesion is noted within the uterus.

OVARIES : Both ovaries reveal normal size, shape and echopattern. Right ovary measures 2.8x 1.9 cms. Left ovary measures 2.5 x 1.6 cms. There is no free fluid seen in cul de.

IMPRESSION : Normal Ultrasound examination of the Abdomen and Pelvis.

Report with compliments.


DR. VINOD V. SHETTY
MD, D.M.R.D.

CONSULTANT SONOLOGIST

Apollo Spectra Hospitals: 156, Famous Cine Labs, Behind Everest Building, Tardeo, Mumbai - 400034
Ph No: 022 - 4332 4500 | www.apollospectra.com

Apollo Specialty Hospitals Pvt. Ltd. (CIN - U85100TG2009PTC099414)
(Formerly known as Nova Specialty Hospital Pvt. Ltd.)


Regd. Office: 7-1-617/A, 615 & 616, Imperial Towers, 7th Floor, Ameerpet, Hyderabad, Telangana - 500038
Ph No: 040 - 4904 7777 | www.apollohl.com

Name: Mrs Poornam Kumari
Age: 33y/f

10/02/2024


- For Health Consultation
- offers no complaints

O/E - Ears -  B/L TM intact, mobile

Nose -  Septum deviated to (R)
Mucosa @
No discharge
Airblast equal both sides

Throat - NAD

Imp: ENT - NAD


MAJ (DR) SHRUTI ANIL SHARMA
M.S. (ENT), PGDHHM, PGDMLS
MMC - 2019096177

EYE REPORT

Name: *Pooja Kulkarni*

Date: *10/02/2014*

Age / Sex:

Ref No.:

Complaint:

*No ocular clo
No old spec*

Examination

Spectacle Rx

*6/6
6/6*

Near 6/12

| | Right Eye | | | | | | | |
|----------|-----------|--------|------|------|--------|--------|------|------|
| | Vision | Sphere | Cyl. | Axis | Vision | Sphere | Cyl. | Axis |
| Distance | | | | | | | | |
| Read | | | | | | | | |

Remarks:

Color vision

Medications:

As per

| Trade Name | Frequency | Duration |
|------------|-----------|----------|
| | | |
| | | |
| | | |

Follow up:

As per

Consultant:

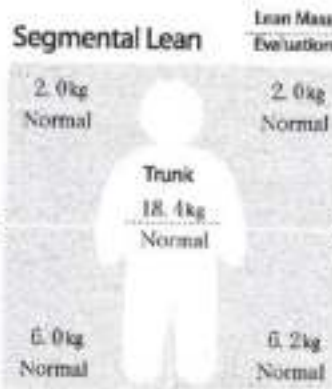


ID: _____ Height 158cm Date 10.2.2024 APOLLO SPECTRA HOSPITAL
 Age 33 Gender Female Time 13:32:48

Body Composition

| | Under | Normal | Over | Normal Range |
|---|-----------------------|--------|--|-----------------------|
| Weight | | | | 44.6 ~ 60.3 |
| Muscle Mass <small>Skeletal Muscle Mass</small> | | | | 19.8 ~ 24.2 |
| Body Fat Mass | | | | 10.5 ~ 16.8 |
| TBW <small>Total Body Water</small> | 29.7 kg (26.7 ~ 32.6) | | FFM <small>Fat Free Mass</small> | 40.4 kg (34.1 ~ 43.5) |
| Protein | 7.8 kg (7.2 ~ 8.7) | | Mineral* | 2.89 kg (2.47 ~ 3.02) |

* Mineral is estimated.



Obesity Diagnosis

| | Value | Normal Range |
|---|-------|--------------|
| BMI <small>Body Mass Index (kg/m²)</small> | 27.5 | 18.5 ~ 25.0 |
| PBF <small>Percent Body Fat (%)</small> | 41.1 | 18.0 ~ 28.0 |
| WHR <small>Waist-Hip Ratio</small> | 0.92 | 0.75 ~ 0.85 |
| BMR <small>Basal Metabolic Rate (kcal)</small> | 1244 | 1398 ~ 1627 |

Nutritional Evaluation

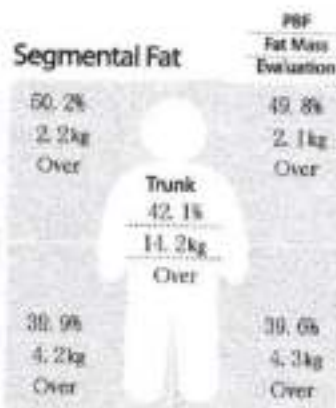
| | | | |
|---------|--|------------------------------------|---|
| Protein | <input checked="" type="checkbox"/> Normal | <input type="checkbox"/> Deficient | |
| Mineral | <input checked="" type="checkbox"/> Normal | <input type="checkbox"/> Deficient | |
| Fat | <input type="checkbox"/> Normal | <input type="checkbox"/> Deficient | <input checked="" type="checkbox"/> Excessive |

Weight Management

| | | | |
|--------|--|--------------------------------|--|
| Weight | <input type="checkbox"/> Normal | <input type="checkbox"/> Under | <input checked="" type="checkbox"/> Over |
| SMM | <input checked="" type="checkbox"/> Normal | <input type="checkbox"/> Under | <input type="checkbox"/> Strong |
| Fat | <input type="checkbox"/> Normal | <input type="checkbox"/> Under | <input checked="" type="checkbox"/> Over |

Obesity Diagnosis

| | | | | |
|-----|---------------------------------|--------------------------------|--|---|
| BMI | <input type="checkbox"/> Normal | <input type="checkbox"/> Under | <input checked="" type="checkbox"/> Over | <input type="checkbox"/> Extremely Over |
| PBF | <input type="checkbox"/> Normal | <input type="checkbox"/> Under | <input checked="" type="checkbox"/> Over | |
| WHR | <input type="checkbox"/> Normal | <input type="checkbox"/> Under | <input checked="" type="checkbox"/> Over | |



* Segmental Fat is estimated.

Muscle-Fat Control

| | | | | | |
|-----------------------|--------|--------------------|-----------|----------------------|----|
| Muscle Control | 0.0 kg | Fat Control | - 16.2 kg | Fitness Score | 64 |
|-----------------------|--------|--------------------|-----------|----------------------|----|

Impedance

| Z | RA | LA | TR | RL | LL |
|--------|-------|-------|------|-------|-------|
| 20kHz | 376.0 | 382.8 | 25.5 | 257.7 | 267.1 |
| 100kHz | 341.9 | 349.1 | 22.4 | 235.1 | 244.8 |

* Use your results as reference when consulting with your physician or fitness trainer.

Exercise Planner

Plan your weekly exercises from the followings and estimate your weight loss from those activities.

| Energy expenditure of each activity (base weight: 68.7 kg / Duration: 30min. / unit: kcal) | | | | | | | |
|--|------------------|----------------------|------------------------|------------------------|--------------|-------------------|-----------------------|
| Walking: 137 | Jogging: 240 | Bicycle: 206 | Swim: 240 | Mountain Climbing: 224 | Aerobic: 240 | Table tennis: 155 | Tennis: 206 |
| Racket ball: 344 | Tai-kwon-do: 344 | Squash: 344 | Basketball: 206 | Rope jumping: 240 | Golf: 121 | Football: 240 | Oriental fencing: 344 |
| Push-ups: 137 | Sit-ups: 137 | Weight training: 137 | Dumbbell exercise: 137 | Elastic band: 137 | Squats: 137 | Gate ball: 131 | Badminton: 155 |

How to do

1. Choose practicable and preferable activities from the left.
2. Choose exercises that you are going to do for 7 days.
3. Calculate the total energy expenditure for a week.
4. Estimate expected total weight loss for a month using the formula shown below.

Recommended calorie intake per day
 1300 kcal

* Calculation for expected total weight loss for 4 weeks: **Total energy expenditure (kcal/week) X 4weeks ÷ 7700**

OUT-PATIENT RECORD

Date : 10/2/24
MRNO :
Name : Poonam Kumari
Age/Gender : 23/Fc.
Mobile No :
Passport No :
Aadhar number :

| | | | |
|---------------|---------------|--------------|-------------------|
| Pulse : 70 | B.P. : 110/80 | Resp : 20b/m | Temp : 98°F |
| Weight : 69.4 | Height : 158 | BMI : | Waist Circum : 94 |

General Examination / Allergies
History

Clinical Diagnosis & Management Plan

Mareked, Egitarwar
Sleep, @ BB @ No Allergy
No addiction rx 3/28-30 days
FH father tetrom modu: Hypertension
Lipid ↑ TSH 1h muu 13-15/pc
1) Atard oil/gluce
2) morning walk us mindfully
3) Repeat Lipid / TSH / glu ^{u/mi} 2 months
T. Noflex 400 ~~o~~ r x 10 days
Physically fit.

Follow up date:

Dr. (Mrs.) CHHAYA P. VAJA
M.D. (MUM)
Physician & Cardiologist
Reg. No. 56942

Doctor Signature

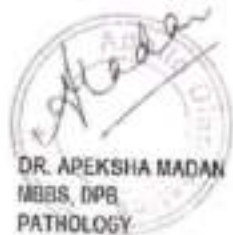


| | |
|--|--|
| TOUGHER TESTS Patient Name : Mrs POONAM KUMARI Age/Gender : 33 Y 6 M 4 D/F UHID/MR No : STAR.0000061309 Visit ID : STAROPV67237 Ref Doctor : Dr.SELF Emp/Audit/TPA ID : 585455255 | Collected : 10/Feb/2024 09:38AM <i>Expertise. Empowering you.</i> Received : 10/Feb/2024 12:51PM Reported : 10/Feb/2024 04:54PM Status : Final Report Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
|--|--|

DEPARTMENT OF HAEMATOLOGY

PERIPHERAL SMEAR , WHOLE BLOOD EDTA

Methodology : Microscopic
 RBC : Mild Hypochromasia, Mild anisocyte
 WBC : Normal in number, morphology and distribution. No abnormal cells seen
 Platelets : Adequate in Number
 Parasites : No Haemoparasites seen
IMPRESSION : Mild Hypochromasia, Mild anisocyte blood picture
 Note/Comment : Please Correlate clinically



DR. APEKSHA MADAN
 MBBS, DPM
 PATHOLOGY

Page 1 of 13



SIN No:BED240033492

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.

OUR LAB NETWORK

ANDHRA PRADESH

Guntur : Ground Floor 4-15-91/1, Bharat Peta Road, Guntur - 522007 T: 9642101777 / 0863 223 2213

Rajahmundry : 22-9-15/2, Karukonda Road, Opp. Bijili Ice Factory, Jayakrishna Puram, Rajahmundry - 533105 T: 9100910996

Tirupathi : D No:23-9-99/3, Amaravathi Nagar, M.R Pala Main Road, Tirupathi - 517501 T: 9515965968 / 8772243415 / 8227743414

Vijayawada : Parmeshwara Complex, Venkateshwara Puram, Vijayawada - 520010:08662497878 / 9100105801

Visakhapatnam : Plot NO- MIG-76, Sector-3, D No-1-83-18/1/1, Double Road, MVP Colony, Vizag - 530017 T: 9100910952

BIHAR

Chhapra : Ward No 23, Circle No 17, Hoarding No 479, Dahiyawan Tola, Chhapra, Saran, Bihar - 841301 T: 8336978921

Muzaffarpur : House No - AI, Moti Mandir, Professor Colony, Kalambagh Road, Near Agharia Bazar, Muzaffarpur, Bihar 842002.T: 0612 3344242

Patna: Suhavana Complex, 105p, Saguna More, Danapur, Patna-801503:8336976922

ASSAM

Dibrugarh : South Amalapaty, A T Road, Dibrugarh, Assam - 786001 T: 8820444418

Guwahati : Royal Orchard, Beltola Basistha Road, Wireless, Dispur, Guwahati - 781036 T: 8820144414

Silchar : Montl Mansion, Opposite Surana Motors, Hailakandi Road T: 03842 241147 / 9957644441

KARNATAKA

Hubli : Marvel Signet Shop no.13 Shrirur Park, Marvel Properties, Hubli, Karnataka - 560030 T: 9100910983

Bangalore 1: 35/1, Old No. 472/5A, AVS Compound, Near Sony Centre, 80 Ft. Road, Koramangala, Bangalore - 560047 T: 9100105814

Bangalore 2 : No.209, Kasturinagar Main Road, Kasturi Nagar, Bangalore- 560045 T: 9100910985

Mandya : #1135, Makam Towers, Vivekananda Road, Ashoka Nagar, Mandya - 571401 T:08232 225588

Mangalore : Shop No 002, Groundfloor, Janavi Plaza, Near Bunts Hostel Circle, Mangalore - 575003 T:9100910984

Mysore : Plot No.#485/1, Ramanuja Road, Opp JSS Hospital, Agrahara, Mysore - 570004 T:9100910975

MADHYA PRADESH

Gwalior : Shop No.1, M.K.Plaza, Hospital Road, Opposite Mahadev Dispensary, JA Group of Hospitals, Gwalior - 474001

T: 0751-2453058 MAHARASHTRA

Aurangabad : Shreeji Tower, Shop No 10,11, Kamgar Chowk, N4-Cidco, Aurangabad - 431001 T: 0240 2467444

Nashik : Shop No - 4A, Archit Royale Apartment, Opp. Eassar Petrol Pump Mahatma Nagar, Nashik 422007 T: 0253 8603130,9100910997

Pune : 1011,1st Floor, Farena Corporate Park, Near Season's Mall, Magarapatta Road, Hadapsar, Pune - 411028 T: 9100105826

Solapur : Plot No 8-3, B-4 Vishwakiran Park, Jule Solapur - 413008 T: 0217 3344242

ODISHA

Bhubaneswar : Plot No. 308/1815, Surya Vihar, Patia Bhubaneswar, Odisha - 751024 T: 8230944413

Sambalpur : Aithapally Main Road, Sambalpur, Odisha - 768004 T: 8231944411

TAMILNADU

Chennai : Plot No-8143(Part),9th Avenue, Ashok Nagar, Chennai - 600083 T: 044 42167277

Madurai : 9/B, V P Rathanaswamy Nadar Street, Bibikulam, Madurai - 625002 T: 9100910974

Pondicherry : 5B, VVP Nagar, Kamaraj Salai, Thattanchavady, Pondichery - 605 009 T: 0413 4201 244

Tirunelveli : Tirunelveli High Ground, Main Road, D8/11, Everest Building, Tirunelveli - 627011 T: 0462 - 2580940

Trichy : G5 and F6, Bharath Shopping Mall, 2/50, E.V.R Road, (Opp G.H), Puthur, Trichy, Tamil Nadu - 620017 T: 9100910982

TELANGANA

Hyderabad 1 : Survey Nos. 140/A, 140/B, 140/C, 141/A, 141/B and 141/C, Thotatto Village, Bowenpally, Secunderabad - 500011 T: 9100911393

Hyderabad 2 : Plot No: 187, Category-UG of the Nalligandla Residential Complex, Serilingampally Mandal, Ranga Reddy - 500019 T: 9121234059

Warangal : 2-5-850, 2-5-227, Circuit House Road, Nakkallogulla, HanamKonda, Telangana - 506002 T:9100910976

TRIPURA

Agartala : H. No.233873, HoldingNo 70 A, Ward No.23, A A Road, Near Joyguru Stand Area, Dhaleswar, Agartala - 799007 T: 8336978924

WEST BENGAL

Kolkata: 336, Canal Street, VIP Road, Lake Town, Kolkata -700048, Near Lake Town Clock Tower, West Bengal 700048; T- 03340623245

Cooch Behar: B.S.Road, Near Central Bank, Cooch Behar, West Bengal, 736101; T- 9832400083

Siliguri: 3A,3B Crescent Court Building, Jhankar More, Burdwan Road, Darjeeling, Pin 734005 ; T- 8231944412

Berhampore: 13/3/A, A. C. ROAD, INDIA PRASTHA,PO-KHAGRA,PS-BERHAMPORE,DIST-MURSHIDABAD,PIN- 742103; T- 0348291029

| | | | | |
|-----------------|----------------------|--------------|-------------------------------|----------------------------|
| Patient Name | : Mrs. POONAM KUMARI | Collected | : 10/Feb/2024 09:38AM | Expertise. Empowering you. |
| Age/Gender | : 33 Y 6 M 4 D/F | Received | : 10/Feb/2024 12:51PM | |
| UHD/MR No | : STAR.0000061309 | Reported | : 10/Feb/2024 04:54PM | |
| Visit ID | : STAROPV67237 | Status | : Final Report | |
| Ref Doctor | : Dr. SELF | Sponsor Name | : ARCOFEMI HEALTHCARE LIMITED | |
| Emp/Auth/TPA ID | : 585455266 | | | |

DEPARTMENT OF HAEMATOLOGY

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

| Test Name | Result | Unit | Bio. Ref. Range | Method |
|--|-------------|-------------------------|-----------------|---------------------------|
| HEMOGRAM , WHOLE BLOOD EDTA | | | | |
| HAEMOGLOBIN | 10.3 | g/dL | 12-15 | CYANIDE FREE COLOURIMETER |
| PCV | 32.50 | % | 40-50 | PULSE HEIGHT AVERAGE |
| RBC COUNT | 3.75 | Million/cu.mm | 3.8-4.8 | Electrical Impedance |
| MCV | 86.5 | fL | 83-101 | Calculated |
| MCH | 27.5 | pg | 27-32 | Calculated |
| MCHC | 31.8 | g/dL | 31.5-34.5 | Calculated |
| R.D.W | 14.1 | % | 11.6-14 | Calculated |
| TOTAL LEUCOCYTE COUNT (TLC) | 5,920 | cells/cu.mm | 4000-10000 | Electrical Impedance |
| DIFFERENTIAL LEUCOCYTIC COUNT (DLC) | | | | |
| NEUTROPHILS | 48.2 | % | 40-80 | Electrical Impedance |
| LYMPHOCYTES | 42.9 | % | 20-40 | Electrical Impedance |
| EOSINOPHILS | 2.3 | % | 1-6 | Electrical Impedance |
| MONOCYTES | 5.7 | % | 2-10 | Electrical Impedance |
| BASOPHILS | 0.7 | % | <1-2 | Electrical Impedance |
| ABSOLUTE LEUCOCYTE COUNT | | | | |
| NEUTROPHILS | 2853.44 | Cells/cu.mm | 2000-7000 | Calculated |
| LYMPHOCYTES | 2539.68 | Cells/cu.mm | 1000-3000 | Calculated |
| EOSINOPHILS | 136.16 | Cells/cu.mm | 20-500 | Calculated |
| MONOCYTES | 337.44 | Cells/cu.mm | 200-1000 | Calculated |
| BASOPHILS | 41.44 | Cells/cu.mm | 0-100 | Calculated |
| PLATELET COUNT | 212000 | cells/cu.mm | 150000-410000 | IMPEDENCE/MICROSCOPY |
| ERYTHROCYTE SEDIMENTATION RATE (ESR) | 20 | mm at the end of 1 hour | 0-20 | Modified Westergren |
| PERIPHERAL SMEAR | | | | |

Methodology : Microscopic

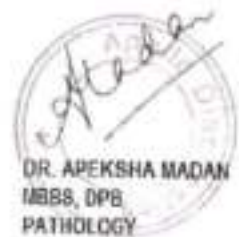
RBC : Mild Hypochromasia, Mild anisocyte

WBC : Normal in number, morphology and distribution. No abnormal cells seen

Platelets : Adequate in Number

Page 2 of 13




DR. APEKSHA MADAN
 MBBS, DPM
 PATHOLOGY

SEN No-BED24003492

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Mandya : #1135, Makam Towers, Vivekananda Road, Ashoka Nagar, Mandya - 571401 T:08232 225566

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WEST BENGAL

Kolkata: 335 , Canal Street , VIP Road , Lake Town , Kolkata -700048, Near Lake Town Clock Tower, West Bengal 700048; T- 03340623245

Cooch Behar: B.S.Road, Near Central Bank, Cooch Behar, West Bengal, 736101; T- 9832400083

Siliguri: 3A,3B Creascent Court Building, Jhankar More, Burdwan Road, Darjeeling, Pin 734005 ; T- 8231944412

Berhampore: 13/3/A, A, C ROAD, INDAPRASTHA,PO-KHAGRA,PS-BERHAMPORE,DIST-MURSHIDABAD,PIN- 742103; T- 0348291029

| | | | | |
|-----------------|----------------------|--------------|-------------------------------|----------------------------|
| Patient Name | : Mrs. POONAM KUMARI | Collected | : 10/Feb/2024 09:38AM | Expertise. Empowering you. |
| Age/Gender | : 33 Y 6 M 4 D/F | Received | : 10/Feb/2024 12:51PM | |
| UHID/MR No | : STAR.0000061309 | Reported | : 10/Feb/2024 04:54PM | |
| Visit ID | : STAROPV67237 | Status | : Final Report | |
| Ref Doctor | : Dr. SELF | Sponsor Name | : ARCOFEMI HEALTHCARE LIMITED | |
| Emp/Auth/TPA ID | : 585455255 | | | |


DEPARTMENT OF HAEMATOLOGY

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

Parasites : No Haemoparasites seen

IMPRESSION : Mild Hypochromasia, Mild anisocyte blood picture

Note/Comment : Please Correlate clinically



DR. APEKSHA MADAN
MBBS, DPM
PATHOLOGY

SIN No:BED240033492

Page 3 of 13



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| | |
|-----------------------------------|--|
| Patient Name : Mrs. POONAM KUMARI | Collected : 10/Feb/2024 09:38AM |
| Age/Gender : 33 Y 8 M 4 D/F | Received : 10/Feb/2024 12:51PM |
| UHID/MR No : STAR.0000061309 | Reported : 10/Feb/2024 06:18PM |
| Visit ID : STAROPV67237 | Status : Final Report |
| Ref Doctor : Dr.SELF | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 585455255 | |

DEPARTMENT OF HAEMATOLOGY

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

| Test Name | Result | Unit | Bio. Ref. Range | Method |
|---|----------|------|-----------------|--|
| 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 |



DR. APEKSHA MADAN
MBBS, DPM
PATHOLOGY

SIN No:BED040033492

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| | |
|-----------------------------------|--|
| Patient Name : Mrs. POONAM KUMARI | Collected : 10/Feb/2024 04:41PM |
| Age/Gender : 33 Y 6 M 4 D/F | Received : 10/Feb/2024 05:48PM |
| UHID/MR No : STAR.0000061309 | Reported : 10/Feb/2024 06:31PM |
| Visit ID : STAROPV67237 | Status : Final Report |
| Ref Doctor : Dr.SELF | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 585486255 | |

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 |
|-------------------------------|--------|-------|-----------------|-----------|
| GLUCOSE, FASTING , NAF PLASMA | 100 | mg/dL | 70-100 | 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:

- The diagnosis of Diabetes requires a fasting plasma glucose of ≥ 126 mg/dL and/or a random / 2 hr post glucose value of ≥ 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.

| Test Name | Result | Unit | Bio. Ref. Range | Method |
|--|--------|-------|-----------------|-----------|
| GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR) | 122 | 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. APEKSHA MADAN
MBBS, DPM
PATHOLOGY

SEN No: PLF1418072

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| | | | | |
|-------------------|-------------------|----------------|-----------------------------|----------------------------|
| Patient Name : | Mrs.POCNAM KUMARI | Collected : | 10/Feb/2024 09:38AM | Expertise. Empowering you. |
| Age/Gender : | 33 Y 6 M 4 D/F | Received : | 10/Feb/2024 04:37PM | |
| UHID/MR No : | STAR.0000081309 | Reported : | 10/Feb/2024 05:08PM | |
| Visit ID : | STAROPV67237 | Status : | Final Report | |
| Ref Doctor : | Dr.SELF | Sponsor Name : | ARCOFEMI HEALTHCARE LIMITED | |
| Emp/Auth/TPA ID : | 585455255 | | | |

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 | | | | |
| HBA1C, GLYCATED HEMOGLOBIN | 5.1 | % | | HPLC |
| ESTIMATED AVERAGE GLUCOSE (eAG) | 100 | mg/dL | | Calculated |

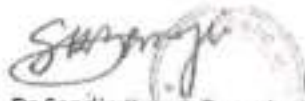
Comment:

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.

- 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)

Dr.Sandip Kumar Banerjee
M.B.B.S,M.D(PATHOLOGY),D.P.B
Consultant Pathologist

SIN No:EDT240014758

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| | |
|---|--|
| Patient Name : Mrs. POONAM KUMARI Age/Gender : 33 Y B M 4 D/F UHID/MR No : STAR.0000061309 Visit ID : STAROPV67237 Ref Doctor : Dr. SELF Emp/Auth/TPA ID : 586455255 | Collected : 10/Feb/2024 09:38AM Received : 10/Feb/2024 04:40PM Reported : 10/Feb/2024 08:05PM Status : Final Report Sponsor Name : 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. Range | Method |
|------------------------------|--------|-------|-----------------|-------------|
| LIPID PROFILE , SERUM | | | | |
| TOTAL CHOLESTEROL | 195 | mg/dL | <200 | CHE/CHO/POD |
| TRIGLYCERIDES | 84 | mg/dL | <150 | Enzymatic |
| HDL CHOLESTEROL | 42 | mg/dL | >40 | CHE/CHO/POD |
| NON-HDL CHOLESTEROL | 153 | mg/dL | <130 | Calculated |
| LDL CHOLESTEROL | 136.2 | mg/dL | <100 | Calculated |
| VLDL CHOLESTEROL | 16.8 | mg/dL | <30 | Calculated |
| CHOL / HDL RATIO | 4.64 | | 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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| Age/Gender | : 33 Y 6 M 4 D/F | Received | : 10/Feb/2024 04:40PM | |
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| Visit ID | : STAROPV67237 | Status | : Final Report | |
| Ref Doctor | : Dr. SELF | Sponsor Name | : ARCOFEMI HEALTHCARE LIMITED | |
| Emp/Audit/TPA ID | : 585453255 | | | |

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 |
|--|--------|-------|-----------------|-------------------------|
| LIVER FUNCTION TEST (LFT) , SERUM | | | | |
| BILIRUBIN, TOTAL | 1.10 | mg/dL | 0.20-1.20 | DIAZO METHOD |
| BILIRUBIN CONJUGATED (DIRECT) | 0.46 | mg/dL | 0.0-0.3 | Calculated |
| BILIRUBIN (INDIRECT) | 0.64 | mg/dL | 0.0-1.1 | Dual Wavelength |
| ALANINE AMINOTRANSFERASE (ALT/SGPT) | 13 | U/L | 9-52 | UV with P-5-P |
| ASPARTATE AMINOTRANSFERASE (AST/SGOT) | 22.0 | U/L | 14-36 | UV with P-5-P |
| ALKALINE PHOSPHATASE | 84.00 | U/L | 38-126 | p-nitrophenyl phosphate |
| PROTEIN, TOTAL | 6.80 | g/dL | 6.3-8.2 | BIURET METHOD |
| ALBUMIN | 4.20 | g/dL | 3.5 - 5 | Bromocresol Green |
| GLOBULIN | 2.60 | g/dL | 2.0-3.5 | Calculated |
| A/G RATIO | 1.62 | | 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 in increased in NAFLD, Wilson's disease, 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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Mandya : #1135, Malak Towers, Vivekananda Road, Ashoka Nagar, Mandya - 571401 T:08232 225566

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TELANGANA

Hyderabad 1 : Survey Nos. 140/A, 140/B, 140/C, 141/A, 141/B and 141/C, Thokatta Village, Bowenpally, Secunderabad - 500011 T: 9100911393

Hyderabad 2 : Plot No: 187, Category-LIG of the Nallagandla Residential Complex, Seelilingampally Mandal, Ranga Reddy - 500019 T: 9121234059

Warangal : 2-5-850, 2-5-227, Circuit House Road, Nakkalagutta, Hanamkonda, Telangana - 506002 T:9100910976

TRIPURA

Agartala : H. No.233873, Holding No 70 A, Ward No.23, A A Road, Near Joyguru Stand Area, Dhaleswar, Agartala - 799007 T: 8336978924

WEST BENGAL

Kolkata : 336 , Canal Street , VIP Road , Lake Town , Kolkata -700048, Near Lake Town Clock Tower, West Bengal 700048; T- 03340823245

Cooch Behar : B.S.Road, Near Central Bank, Cooch Behar, West Bengal, 736101; T- 9832400083

Siliguri : 3A,3B Creascent Court Building, Jhankar More, Burdwan Road, Darjeeling, Pin 734006 ; T- 8231944412

Berhampore : 13/3/A, A. C ROAD, INDTAPRASTHA,PO-KHAGRA,PS-BERHAMPORE,DIST-MURSHIDABAD,PIN- 742103; T- 0348291029

| | | | | | |
|------|-------------------|--------------------|----------------|-----------------------------|----------------------------|
| TOUR | Patient Name : | Mrs. POONAM KUMARI | Collected : | 10/Feb/2024 09:38AM | Expertise. Empowering you. |
| | Age/Gender : | 33 Y 8 M 4 D/F | Received : | 10/Feb/2024 04:40PM | |
| | UHID/IR No : | STAR.0000061309 | Reported : | 10/Feb/2024 06:18PM | |
| | Visit ID : | STAROPV67237 | Status : | Final Report | |
| | Ref Doctor : | Dr. SELF | Sponsor Name : | ARCOFEMI HEALTHCARE LIMITED | |
| | Emp/Auth/TPA ID : | 685455255 | | | |

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 |
|---|--------|--------|-----------------|---------------------------|
| RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM | | | | |
| CREATININE | 0.80 | mg/dL | 0.5-1.04 | Creatinine amidohydrolase |
| UREA | 19.30 | mg/dL | 15-36 | Urease |
| BLOOD UREA NITROGEN | 9.0 | mg/dL | 8.0 - 23.0 | Calculated |
| URIC ACID | 4.30 | mg/dL | 2.5-6.2 | Uricase |
| CALCIUM | 8.80 | mg/dL | 8.4 - 10.2 | Arsenazo-III |
| PHOSPHORUS, INORGANIC | 3.40 | mg/dL | 2.5-4.5 | PMA Phenol |
| SODIUM | 140.3 | mmol/L | 135-145 | Direct ISE |
| POTASSIUM | 3.7 | mmol/L | 3.5-5.1 | Direct ISE |
| CHLORIDE | 103.0 | mmol/L | 98 - 107 | Direct ISE |



Dr. Sandip Kumar Banerjee
M.B.B.S, M.D (PATHOLOGY), D.P.B
Consultant Pathologist



SIN No: SE04625070

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| Patient Name : Mrs. POONAM KUMARI Age/Gender : 33 Y 6 M 4 D/F UHID/MR No : STAR.0000061309 Visit ID : STAROPV67237 Ref Doctor : Dr. SELF Emp/Auth/TPA ID : 585455255 | Collected : 10/Feb/2024 09:38AM Received : 10/Feb/2024 04:40PM Reported : 10/Feb/2024 06:45PM Status : Final Report Sponsor Name : 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. Range | Method |
|--|--------|------|-----------------|--------|
| GAMMA GLUTAMYL TRANSPEPTIDASE (GGT), SERUM | 11.00 | U/L | 0-37.99 | IFCC |



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

SIN No: SE04625070



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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 |
|--|---------------|--------|-----------------|--------|
| THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM | | | | |
| TRI-IODOETHYRONINE (T3, TOTAL) | 0.9 | ng/mL | 0.67-1.81 | ELFA |
| THYROXINE (T4, TOTAL) | 5.99 | µg/dL | 4.66-9.32 | ELFA |
| THYROID STIMULATING HORMONE (TSH) | 14.530 | µIU/mL | 0.25-5.0 | ELFA |

Kindly correlate clinically

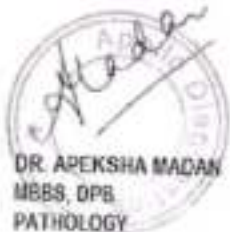
Comment:

| | |
|-----------------------------|--|
| For pregnant females | Bio Ref Range for TSH in µIU/ml (As per American Thyroid Association) |
| First trimester | 0.1 - 2.5 |
| Second trimester | 0.2 - 3.0 |
| Third trimester | 0.3 - 3.0 |

- 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.
- 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.
- 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.
- 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 |




DR. APEKSHA MADAN
 MBBS, DPM
 PATHOLOGY

SIN No. SPL24022035

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Bangalore 1: 35/1, Old No. 472/5A, AVS Compound, Near Sony Centre, 80 Ft. Road, Koramangala, Bangalore - 560047 T: 9100105814

Bangalore 2 : No:209, Kasturinagar Main Road, Kasturi Nagar, Bangalore- 560043 T: 9100910995

Mandya : #1135, Makam Towers, Vivekananda Road, Ashoka Nagar, Mandya - 571401 T:08232 225566

Mangalore : Shop No 002, Groundfloor, Janavi Plaza, Near Bunts Hostel Circle, Mangalore - 575003 T:9100910984

Mysore : Plot No.#465/1, Ramanuja Road, Opp JSS Hospital, Agrahara, Mysore - 570004 T:9100910975

MADHYA PRADESH

Gwalior : Shop No.7, M.K.Plaza, Hospital Road, Opposite Mahadev Dispensary, JA Group of Hospitals, Gwalior - 474001

T: 0751-2453068 MAHARASHTRA

Aurangabad : Shreeji Tower, Shop No 10,11, Kamgar Chowk, N4-Cidco, Aurangabad - 431001 T: 0240 2487444

Nashik : Shop No - 4A, Archit Royale Apartment, Opp. Essar Petrol Pump Mahatma Nagar, Nashik 422007 T: 0253 6603130,9100910997

Pune : 1011, 1st Floor, Farena Corporate Park, Near Season's Mall, Magarapatta Road, Hadapsar, Pune - 411028 T: 9100105826

Solapur : Plot No B-3, B-4 Vishwakiran Park, Jule Solapur - 413008 T: 0217 3344242

ODISHA

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Sambalpur : Althapally Main Road, Sambalpur, Odisha - 768004 T: 8231944411

TAMILNADU

Chennai : Plot No-B143(Part),9th Avenue, Ashok Nagar, Chennai - 600083 T: 044 42167277

Madurai : 9/B, V P Rathnaswamy Nadar Street, Bibikulam, Madurai - 625002 T: 9100910974

Pondicherry : 5B, VVP Nagar, Kamaraj Salai, Thattanchavady, Pondichery - 605 009 T: 0413 4201 244

Tirunelveli : Tirunelveli High Ground, Main Road, DB/11, Everest Building, Tirunelveli - 627011 T: 0462 - 2580940

Trichy : G6 and F6, Bharath Shopping Mall, 2/50, E.V.R Road, (Opp G.H), Puthur, Trichy, Tamil Nadu - 620017 T: 9100910982

TELANGANA

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Warangal : 2-5-850, 2-5-227, Circuit House Road, Nakkallagutta, Hanamkonda, Telangana - 506002 T:9100910976

TRIPURA

Agartala : H. No.233873, HoldingNo 70 A, Ward No.23, A A Road, Near Joyguru Stand Area, Dholeswar, Agartala - 798007 T: 8336978924

WEST BENGAL

Kolkata: 336, Canal Street, VIP Road, Lake Town, Kolkata -700048, Near Lake Town Clock Tower, West Bengal 700048; T- 03340623245

Cooch Behar: B.S.Road, Near Central Bank, Cooch Behar, West Bengal, 736101; T- 9832400083

Siliguri: 3A,3B Creascent Court Building, Jhankar More, Burdwan Road, Darjeeling, Pin 734005 ; T- 8231944412

Berhampore: 13/3/A, A. C ROAD, INDAPRASTHA,PO-KHAGRA,PS-BERHAMPORE,DIST-MURSHIDABAD,PIN- 742103; T- 0348291029

TOUCHING LIVES

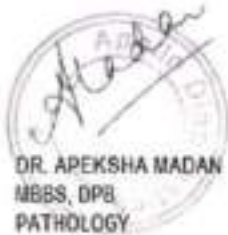
Patient Name : Mrs. POONAM KUMARI
Age/Gender : 33 Y 6 M 4 D/F
UHID/MR No : STAR.0000081309
Visit ID : STAROPV67237
Ref Doctor : Dr. SELF
Emp/Auth/TPA ID : 565455255

Collected : 10/Feb/2024 09:38AM
Received : 10/Feb/2024 01:13PM
Reported : 10/Feb/2024 04:38PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF IMMUNOLOGY

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

Page 12 of 13



DR. APEKSHA MADAN
MBBS, DPM
PATHOLOGY

SIN No: SPL24022035

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OUR LAB NETWORK

ANDHRA PRADESH

Guntur : Ground Floor 4-15-91/1, Bharat Peta Road, Guntur - 522007 T: 9642101777 / 0863 223 2213

Rajahmundry : 22-9-15/2, Korukonda Road, Opp. Bijili Ice Factory, Jayakrishna Puram, Rajahmundry - 533105 T: 9100910995

Tirupathi : D No.23-9-99/3, Amaravathi Nagar, M R Pala Main Road, Tirupathi - 517501 T: 9515965958 / 8772243415 / 8227743414

Vijayawada : Parmeshwara Complex, Venkateshwara Puram, Vijayawada - 5200101-08662497878 / 9100105801

Visakhapatnam : Plot NO- MIG-76, Sector-3, D No-1-83-16/1/1, Double Road, MVP Colony, Vizag - 530017 T: 9100910952

BIHAR

Chhapra : Ward No 23, Circle No 17, Hoarding No 47B, Dahiyawan Tola, Chhapra, Saran, Bihar - 841301 T: 8336978921

Muzaffarpur : House No - A1, Moti Mandir, Professor Colony, Kalambogh Road, Near Aghoria Bazar, Muzaffarpur, Bihar 842002.T: 0612 3344242

Patna: Suhavana Complex, 105p, Seguna More, Danapur, Patna-8015031:8336978922

ASSAM

Dibrugarh : South Amolapatty, A T Road, Dibrugarh, Assam - 786001 T: 8820444418

Guwahati : Royal Orchard, Baltala Basistha Road, Wireless, Dispur, Guwahati - 781036 T: 8820144414

Silchar : Monti Mansion, Opposite Surana Motors, Hallakandi Road T: 03842 241147 / 9867544441

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Kolkata: 336 , Canal Street , VIP Road , Lake Town , Kolkata -700048, Near Lake Town Clock Tower, West Bengal 700048; T- 03340623245

Cooch Behar: B.S.Road, Near Central Bank, Cooch Behar, West Bengal, 736101; T - 9832400083

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Berhampore: 13/3/A, A. C ROAD, INDTAPRASTHA,PO-KHAGRA,PS-BERHAMPORE,DIST-MURSHIDABAD,PIN- 742103; T- 0348291029

| | |
|-----------------------------------|--|
| Patient Name : Mrs. POONAM KUMARI | Collected : 10/Feb/2024 09:38AM |
| Age/Gender : 33 Y 6 M 4 D/F | Received : 10/Feb/2024 05:01PM |
| UHID/MR No : STAR.0000061309 | Reported : 10/Feb/2024 08:40PM |
| Visit ID : STAROPV67237 | Status : Final Report |
| Ref Doctor : Dr.SELF | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Ault/TPA ID : 565465255 | |

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 |
|--|-----------------------|------|------------------|----------------------------|
| COMPLETE URINE EXAMINATION (CUE) , URINE | | | | |
| PHYSICAL EXAMINATION | | | | |
| COLOUR | PALE YELLOW | | PALE YELLOW | Visual |
| TRANSPARENCY | HAZY | | CLEAR | Visual |
| pH | 6.5 | | 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 | POSITIVE | | NEGATIVE | Dipstick |
| NITRITE | NEGATIVE | | NEGATIVE | Dipstick |
| LEUCOCYTE ESTERASE | POSITIVE | | NEGATIVE | PYRROLE HYDROLYSIS |
| CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY | | | | |
| PUS CELLS | 13-15 | /hpf | 0-5 | Microscopy |
| EPITHELIAL CELLS | 8-10 | /hpf | <10 | MICROSCOPY |
| RBC | 6-8 | /hpf | 0-2 | MICROSCOPY |
| CASTS | NIL | | 0-2 Hyaline Cast | MICROSCOPY |
| CRYSTALS | ABSENT | | ABSENT | MICROSCOPY |
| OTHERS | Bacteria Present (++) | | | MICROSCOPY |

*** End Of Report ***

Page 13 of 13




 DR. APEKSHA MADAN
 MBBS, DPM
 PATHOLOGY

SIN No:UR2279466

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Berhampore: 13/3/A, A. C ROAD, INDIA PRASTHA, PO-KHAGRA,PS-BERHAMPORE,DIST-MURSHIDABAD,PIN- 742103; T- 0348281028

HR 70 bpm

Measurement Results:

| | | | |
|---------|---|-----------|---------|
| QRS | : | 98 | ms |
| QT/QTcB | : | 374 / 403 | ms |
| PR | : | | ms |
| P | : | | ms |
| RR/PP | : | 842 / 830 | ms |
| P/ORS/T | : | / 46/ -11 | degrees |



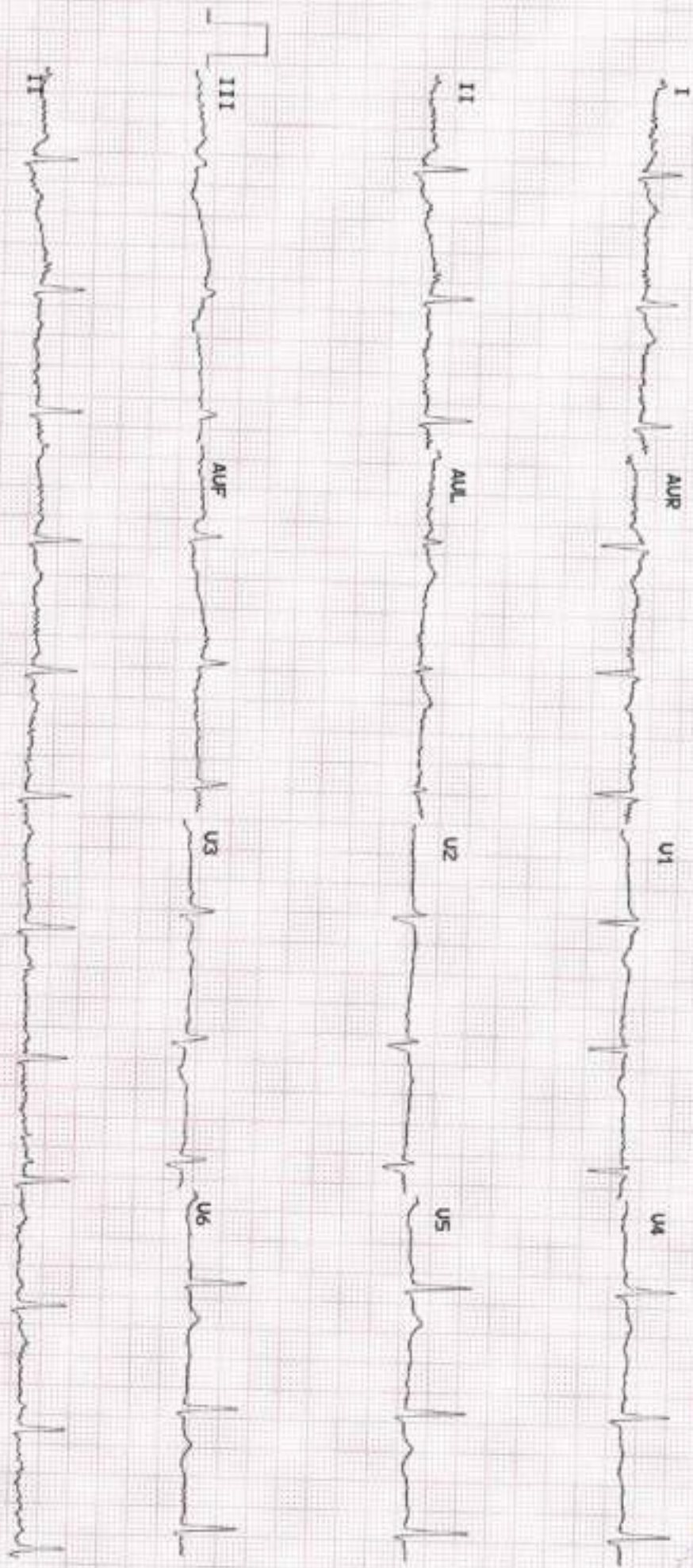
Interpretation:
 12SL - Interpretation:
 Accelerated Junctional rhythm
 Abnormal ECG

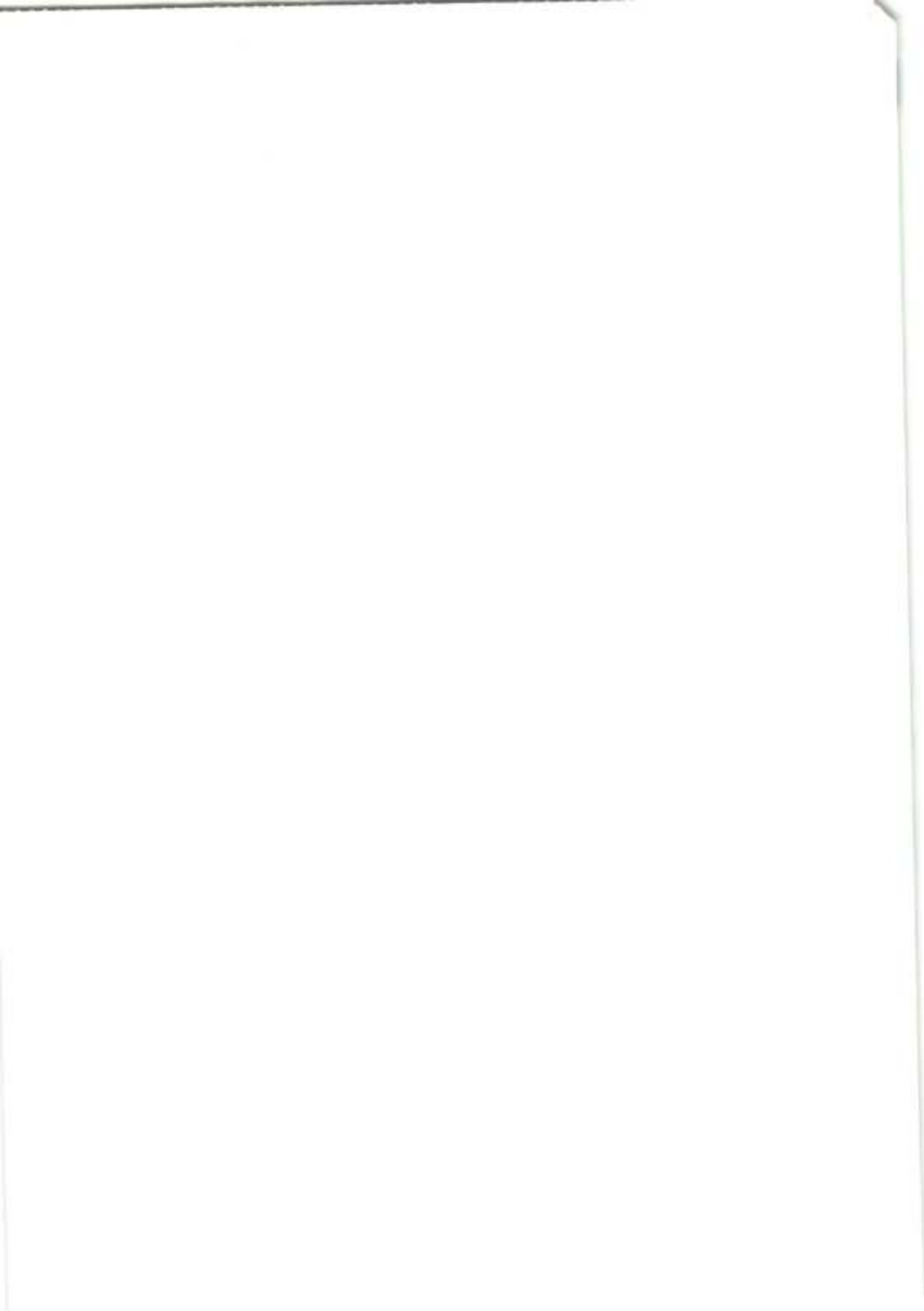
Incomplete RBBB

[Signature]
 Unconfirmed report.



Dr. (Mrs.) CHHAYA P. VAJA
 M.D. (MUM)
 Physician & Cardiologist
 Reg. No. 56942





Patient Name : Mrs. Poonam Kumari
UHID : STAR.0000061309
Reported on : 12-02-2024 11:32
Adm/Consult Doctor :

Age : 33 Y F
OP Visit No : STAROPV67237
Printed on : 12-02-2024 11:32
Ref Doctor : SELF

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

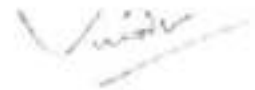
Both lung fields and hila are normal .
No obvious active pleuro-parenchymal lesion seen .
Both costophrenic and cardiophrenic angles are clear .
Both diaphragms are normal in position and contour .
Thoracic wall and soft tissues appear normal.

CONCLUSION :

No obvious abnormality seen

Printed on:12-02-2024 11:32

---End of the Report---



Dr. VINOD SHETTY
Radiology

Name : Mrs.Poonam Kumari
Age : 33 Year(s)

Date : 10/02/2024
Sex : Female
Visit Type : OPD


ECHO Cardiography

Comments:

Normal cardiac dimensions.
Structurally normal valves.
No evidence of LVH.
Intact IAS/IVS.
No evidence of regional wall motion abnormality.
Normal LV systolic function (LVEF 60%).
No diastolic dysfunction.
Normal RV systolic function.
No intracardiac clots / vegetation/ pericardial effusion.
No evidence of pulmonary hypertension.PASP=30mmHg.
IVC 12 mm collapsing with respiration.

Final Impression:

NORMAL 2DECHOCARDIOGRAPHY REPORT.


DR.CHHAYA P.VAJA. M. D.(MUM)
NONINVASIVE CARDIOLOGIST

Name : Mrs.Poonam Kumari
Age : 33 Year(s)

Date : 10/02/2024
Sex : Female
Visit Type : OPD

Dimension:

| | |
|----------|--------------|
| EF Slope | 130mm/sec |
| EPSS | 04mm |
| LA | 28mm |
| AO | 30mm |
| LVID (d) | 45mm |
| LVID(s) | 21mm |
| IVS (d) | 11mm |
| LVPW (d) | 11mm |
| LVEF | 60% (visual) |


DR.CHHAYA P.VAJA. M. D.(MUM)
NONINVASIVE CARDIOLOGIST

Apollo Spectra Hospitals: 156, Famous Cine Labs, Behind Everest Building, Tardeo, Mumbai - 400034
Ph No:022 - 4332 4500 | www.apollospectra.com

Apollo Specialty Hospitals Pvt. Ltd. (CIN - U85100TG2009PTC099414)
(Formerly known as Nova Specialty Hospital Pvt. Ltd.)

Regd. Office: 7-1-617/A, 615 & 616, Imperial Towers, 7th Floor, Ameerpet, Hyderabad, Telangana - 500038
Ph No:040 - 4904 7777 | www.apollohl.com

Patient Name : MRS.POONAM KUMARI
Ref. By : HEALTH CHECK UP

Date : 10-02-2024
Age : 33 years

SONOGRAPHY OF ABDOMEN AND PELVIS

LIVER : The liver is normal in size, shape & echotexture. No focal mass lesion is seen. The intrahepatic biliary tree & venous radicles appear normal. The portal vein and CBD appear normal.

GALL BLADDER : The gall bladder is normal in size with a normal wall thickness and there are no calculi seen in it.

PANCREAS : The pancreas is normal in size and echotexture. No focal mass lesion is seen.

SPLEEN : The spleen is normal in size and echotexture. No focal parenchymal mass lesion is seen. The splenic vein is normal.

KIDNEYS : The **RIGHT KIDNEY** measures 10.5 x 4.2 cms and the **LEFT KIDNEY** measures 11.0 x 4.6 cms in size. Both kidneys are normal in shape and echotexture. There is no evidence of hydronephrosis or calculi seen on either side.

The para-aortic & iliac fossa regions appear normal. There is no free fluid or any lymphadenopathy seen in the abdomen.

URINARY BLADDER : The urinary bladder distends well and is normal in shape and contour. No intrinsic lesion or calculus is seen in it. The bladder wall is normal in thickness.

UTERUS : The uterus is anteverted & it appears normal in size, shape and echotexture. It measures 7.9 x 5.3 x 3.9 cms. Normal myometrial & endometrial echoes are seen. Endometrial thickness is 10.8 mms. No focal mass lesion is noted within the uterus.

OVARIES : Both ovaries reveal normal size, shape and echopattern. Right ovary measures 2.8x 1.9 cms. Left ovary measures 2.5 x 1.6 cms. There is no free fluid seen in cul de.

IMPRESSION : Normal Ultrasound examination of the Abdomen and Pelvis.

Report with compliments.


DR. VINOD V. SHETTY
MD, D.M.R.D.

CONSULTANT SONOLOGIST

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Ph No: 040 - 4904 7777 | www.apollohl.com

Name: Mrs Poornam Kumari
Age: 33y/f

10/02/2024


- For Health Consultation
- offers no complaints

O/E - Ears -  B/L TM intact, mobile

Nose -  Septum deviated to (R)
Mucosa @
No discharge
Airblast equal both sides

Throat - NAD

Imp: ENT - NAD


MAJ (DR) SHRUTI ANIL SHARMA
M.S. (ENT), PGDHHM, PGDMLS
MMC - 2019096177

EYE REPORT

Name: *Pooja Kulkarni*

Date: *10/02/2011*

Age / Sex:

Ref No.:

Complaint:

*No ocular clo
No old spec*

Examination

Spectacle Rx

*6/6
6/6*

Near 6/12

| | Right Eye | | | | | | | |
|----------|-----------|--------|------|------|--------|--------|------|------|
| | Vision | Sphere | Cyl. | Axis | Vision | Sphere | Cyl. | Axis |
| Distance | | | | | | | | |
| Read | | | | | | | | |

Remarks:

Color vision

Medications:

As per

| Trade Name | Frequency | Duration |
|------------|-----------|----------|
| | | |
| | | |
| | | |

Follow up:

As per

Consultant:



ID: _____ Height 158cm Date 10.2.2024 APOLLO SPECTRA HOSPITAL
 Age 33 Gender Female Time 13:32:48

Body Composition

| | Under | Normal | Over | Normal Range |
|---|-----------------------|--------|--|-----------------------|
| Weight | | | | 44.6 ~ 60.3 |
| Muscle Mass <small>Skeletal Muscle Mass</small> | | | | 19.8 ~ 24.2 |
| Body Fat Mass | | | | 10.5 ~ 16.8 |
| TBW <small>Total Body Water</small> | 29.7 kg (26.7 ~ 32.6) | | FFM <small>Fat Free Mass</small> | 40.4 kg (34.1 ~ 43.5) |
| Protein | 7.8 kg (7.2 ~ 8.7) | | Mineral* | 2.89 kg (2.47 ~ 3.02) |

* Mineral is estimated.

Segmental Lean



Obesity Diagnosis

| | Value | Normal Range |
|---|-------|--------------|
| BMI <small>Body Mass Index (kg/m²)</small> | 27.5 | 18.5 ~ 25.0 |
| PBF <small>Percent Body Fat (%)</small> | 41.1 | 18.0 ~ 28.0 |
| WHR <small>Waist-Hip Ratio</small> | 0.92 | 0.75 ~ 0.85 |
| BMR <small>Basal Metabolic Rate (kcal)</small> | 1244 | 1398 ~ 1627 |

Nutritional Evaluation

| | | | |
|---------|--|------------------------------------|---|
| Protein | <input checked="" type="checkbox"/> Normal | <input type="checkbox"/> Deficient | |
| Mineral | <input checked="" type="checkbox"/> Normal | <input type="checkbox"/> Deficient | |
| Fat | <input type="checkbox"/> Normal | <input type="checkbox"/> Deficient | <input checked="" type="checkbox"/> Excessive |

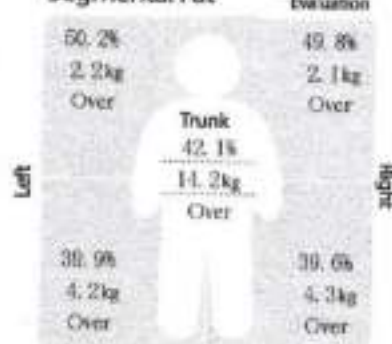
Weight Management

| | | | |
|--------|--|--------------------------------|--|
| Weight | <input type="checkbox"/> Normal | <input type="checkbox"/> Under | <input checked="" type="checkbox"/> Over |
| SMM | <input checked="" type="checkbox"/> Normal | <input type="checkbox"/> Under | <input type="checkbox"/> Strong |
| Fat | <input type="checkbox"/> Normal | <input type="checkbox"/> Under | <input checked="" type="checkbox"/> Over |

Obesity Diagnosis

| | | | | |
|-----|---------------------------------|--------------------------------|--|---|
| BMI | <input type="checkbox"/> Normal | <input type="checkbox"/> Under | <input checked="" type="checkbox"/> Over | <input type="checkbox"/> Extremely Over |
| PBF | <input type="checkbox"/> Normal | <input type="checkbox"/> Under | <input checked="" type="checkbox"/> Over | |
| WHR | <input type="checkbox"/> Normal | <input type="checkbox"/> Under | <input checked="" type="checkbox"/> Over | |

Segmental Fat



* Segmental Fat is estimated.

Muscle-Fat Control

| | | | | | |
|-----------------------|--------|--------------------|-----------|----------------------|----|
| Muscle Control | 0.0 kg | Fat Control | - 16.2 kg | Fitness Score | 64 |
|-----------------------|--------|--------------------|-----------|----------------------|----|

Impedance

| Z | RA | LA | TR | RL | LL |
|--------|-------|-------|------|-------|-------|
| 20kHz | 376.0 | 382.8 | 25.5 | 257.7 | 267.1 |
| 100kHz | 341.9 | 349.1 | 22.4 | 235.1 | 244.8 |

* Use your results as reference when consulting with your physician or fitness trainer.

Exercise Planner

Plan your weekly exercises from the followings and estimate your weight loss from those activities.

| Energy expenditure of each activity (base weight: 68.7 kg / Duration: 30min. / unit: kcal) | | | | | | | |
|--|---------------------------|-----------------|-------------------|-------------------|-----------------|--|--|
| Walking | Jogging | Bicycle | Swim | Mountain Climbing | Aerobic | | |
| 137 | 240 | 206 | 240 | 224 | 240 | | |
| Table tennis | Tennis | Football | Oriental fencing | Golf ball | Badminton | | |
| 155 | 206 | 240 | 344 | 131 | 155 | | |
| Racket ball | Tae-kwon-do | Squash | Basketball | Rope jumping | Golf | | |
| 344 | 344 | 344 | 206 | 240 | 121 | | |
| Push-ups | Sit-ups | Weight training | Dumbbell exercise | Elastic band | Squats | | |
| development of upper body | abdominal muscle training | muscle strength | muscle strength | muscle strength | muscle strength | | |

How to do

1. Choose practicable and preferable activities from the left.
2. Choose exercises that you are going to do for 7 days.
3. Calculate the total energy expenditure for a week.
4. Estimate expected total weight loss for a month using the formula shown below.

• Recommended calorie intake per day
1300 kcal

* Calculation for expected total weight loss for 4 weeks: **Total energy expenditure (kcal/week) X 4weeks ÷ 7700**

| | | | |
|----------------------------|----------------------|--------------------|--------------------|
| Patient Name | : Mrs. Poonam Kumari | Age/Gender | : 33 Y/F |
| UHID/MR No. | : STAR.0000061309 | OP Visit No | : STAROPV67237 |
| Sample Collected on | : | Reported on | : 12-02-2024 09:45 |
| LRN# | : RAD2232092 | Specimen | : |
| Ref Doctor | : SELF | | |
| Emp/Auth/TPA ID | : 585455255 | | |

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

LIVER : The liver is normal in size, shape & echotexture. No focal mass lesion is seen. The intrahepatic biliary tree & venous radicles appear normal. The portal vein and CBD appear normal.

GALL : The gall bladder is normal in size with a normal wall thickness and there are no calculi seen in it.

PANCREAS : The pancreas is normal in size and echotexture. No focal mass lesion is seen.

SPLEEN : The spleen is normal in size and echotexture. No focal parenchymal mass lesion is seen. The splenic vein is normal.

KIDNEYS : The **RIGHT KIDNEY** measures 10.5 x 4.2 cms and the **LEFT KIDNEY** measures 11.0 x 4.6 cms in size. Both kidneys are normal in shape and echotexture. There is no evidence of hydronephrosis or calculi seen on either side.

The para-aortic & iliac fossa regions appear normal. There is no free fluid or any lymphadenopathy seen in the abdomen.

URINARY The urinary bladder distends well and is normal in shape and contour No intrinsic

BLADDER: lesion or calculus is seen in it. The bladder wall is normal in thickness.

UTERUS : The uterus is anteverted & it appears normal in size, shape and echotexture. It measures 7.9 x 5.3 x 3.9 cms. Normal myometrial & endometrial echoes are seen. Endometrial thickness is 10.8 mms. No focal mass lesion is noted within the uterus.

OVARIES : Both ovaries reveal normal size, shape and echopattern. Right ovary measures 2.8x 1.9 cms. Left ovary measures 2.5 x 1.6 cms. There is no free fluid seen in cul de.

IMPRESSION : Normal Ultrasound examination of the Abdomen and Pelvis.

(The sonography findings should always be considered in correlation with the clinical and other investigation finding where applicable.) It is only a professional opinion, Not valid for medico legal purpose.

Patient Name : Mrs. Poonam Kumari

Age/Gender : 33 Y/F



Dr. VINOD SHETTY
Radiology

Dear Poonam Kumari,

Greetings from Apollo Clinics,

Your corporate health check appointment is confirmed at **SPECTRA TARDEO clinic** on **2024-02-10** at **08:45-09:00**.

| | |
|----------------|--|
| Payment Mode | Credit |
| 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] |

Warm Regards,
Apollo Clinic