

Patient Name : Mrs.PRAJAKTA NAIK  
Age/Gender : 42 Y 2 M 2 D/F  
UHID/MR No : STAR.0000065177  
Visit ID : STAROPV73034  
Ref Doctor : Dr.SELF  
Emp/Auth/TPA ID : AROPK8419N

Collected : 05/Sep/2024 08:43AM  
Received : 05/Sep/2024 09:28AM  
Reported : 05/Sep/2024 01:54PM  
Status : Final Report  
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

**DEPARTMENT OF HAEMATOLOGY**

**PERIPHERAL SMEAR , WHOLE BLOOD EDTA**

Methodology : Microscopic

RBC : Normocytic normochromic

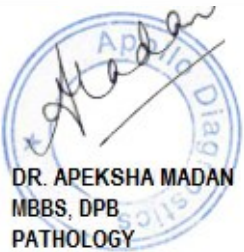
WBC : Normal in number, morphology and distribution. No abnormal cells seen

Platelets : Adequate on smear.

Parasites : No Haemoparasites seen

**IMPRESSION : Normocytic normochromic blood picture**

Note/Comment : Please Correlate clinically



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**DEPARTMENT OF HAEMATOLOGY**


**ARCOFEMI - MEDIWHEEL - PMC PACK I - PAN INDIA - FY2324**

Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>HEMOGRAM , WHOLE BLOOD EDTA</b>				
<b>HAEMOGLOBIN</b>	13.8	g/dL	12-15	CYANIDE FREE COLOUROMETER
PCV	44.30	%	40-50	PULSE HEIGHT AVERAGE
RBC COUNT	<b>5.27</b>	Million/cu.mm	3.8-4.8	Electrical Impedance
MCV	84	fL	83-101	Calculated
MCH	<b>26.1</b>	pg	27-32	Calculated
MCHC	<b>31.1</b>	g/dL	31.5-34.5	Calculated
R.D.W	12.2	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	4,700	cells/cu.mm	4000-10000	Electrical Impedance
<b>DIFFERENTIAL LEUCOCYTIC COUNT (DLC)</b>				
NEUTROPHILS	54	%	40-80	Electrical Impedance
LYMPHOCYTES	30	%	20-40	Electrical Impedance
EOSINOPHILS	06	%	1-6	Electrical Impedance
MONOCYTES	10	%	2-10	Electrical Impedance
BASOPHILS	00	%	<1-2	Electrical Impedance
<b>ABSOLUTE LEUCOCYTE COUNT</b>				
NEUTROPHILS	2538	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	1410	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	282	Cells/cu.mm	20-500	Calculated
MONOCYTES	470	Cells/cu.mm	200-1000	Calculated
Neutrophil lymphocyte ratio (NLR)	1.8		0.78- 3.53	Calculated
<b>PLATELET COUNT</b>	238000	cells/cu.mm	150000-410000	IMPEDENCE/MICROSCOPY
<b>ERYTHROCYTE SEDIMENTATION RATE (ESR)</b>	20	mm at the end of 1 hour	0-20	Modified Westergren
<b>PERIPHERAL SMEAR</b>				

Methodology : Microscopic

RBC : Normocytic normochromic

Page 2 of 9

**DR. APEKSHA MADAN**  
MBBS, DPB  
PATHOLOGY

SIN No:BED240224106

**Apollo Speciality Hospitals Private Limited**

(Formerly known as a Nova Speciality Hospitals Private Limited)

CIN- U85100TG2009PTC099414

Regd Off:1-10-62/62 ,5th Floor, Ashoka RaghupathiChambers, Begumpet, Hyderabad, Telangana - 500016

**Address:**

156, Famous Cine Labs, Behind Everest Building, Tardeo (Mumbai Central), Mumbai, Maharashtra  
Ph: 022 4332 4500

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**DEPARTMENT OF HAEMATOLOGY**

**ARCOFEMI - MEDIWHEEL - PMC PACK I - PAN INDIA - FY2324**


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

Platelets : Adequate on smear.

Parasites : No Haemoparasites seen

**IMPRESSION : Normocytic normochromic blood picture**

Note/Comment : Please Correlate clinically

  
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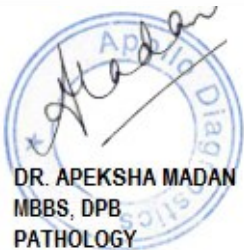
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Patient Name	: Mrs.PRAJAKTA NAIK	Collected	: 05/Sep/2024 08:43AM
Age/Gender	: 42 Y 2 M 2 D/F	Received	: 05/Sep/2024 09:28AM
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Emp/Auth/TPA ID	: AROPK8419N		

**DEPARTMENT OF HAEMATOLOGY**

**ARCOFEMI - MEDIWHEEL - PMC PACK I - PAN INDIA - FY2324**

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

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**DEPARTMENT OF BIOCHEMISTRY**

**ARCOFEMI - MEDIWHEEL - PMC PACK I - PAN INDIA - FY2324**

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, FASTING , NAF PLASMA	91	mg/dL	70-100	GOD - POD

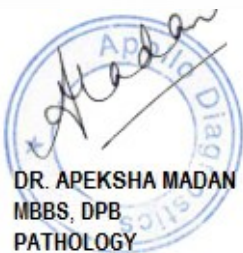
**Comment:**

**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:**

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



**DR. APEKSHA MADAN**  
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PATHOLOGY





Patient Name : Mrs.PRAJAKTA NAIK	Collected : 05/Sep/2024 11:48AM
Age/Gender : 42 Y 2 M 2 D/F	Received : 05/Sep/2024 12:37PM
UHID/MR No : STAR.0000065177	Reported : 05/Sep/2024 12:54PM
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Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
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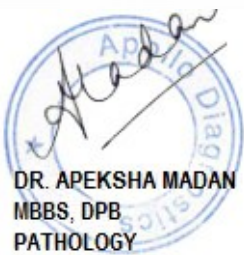
**DEPARTMENT OF BIOCHEMISTRY**

**ARCOFEMI - MEDIWHEEL - PMC PACK I - PAN INDIA - FY2324**

Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)</b>	108	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.



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**DEPARTMENT OF BIOCHEMISTRY**

**ARCOFEMI - MEDIWHEEL - PMC PACK I - PAN INDIA - FY2324**

Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>ALANINE AMINOTRANSFERASE (ALT/SGPT) , SERUM</b>	26	U/L	4-44	JSCC

**Comment:**

ALT elevations are noted in liver parenchymal diseases, leading to injury / destruction of hepatocytes.

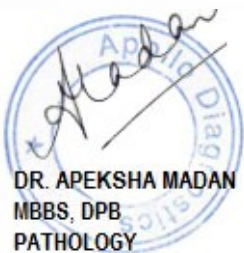
ALT levels are seen to be elevated even before the signs and symptoms of the liver injury appear.

The ALT levels remain high longer in blood as compared to AST levels. And though both the enzymes increase in liver injury, the rise in ALT is more compared to AST, thus also altering the ALT:AST ratio.

Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>BILIRUBIN, TOTAL , SERUM</b>	1.00	mg/dL	0.1-1.2	Azobilirubin

Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>BUN/CREATININE RATIO , SERUM</b>				
BLOOD UREA NITROGEN	11.0	mg/dL	8.0 - 23.0	Calculated
CREATININE	0.87	mg/dL	0.4-1.1	ENZYMATIC METHOD
BUN / CREATININE RATIO	12.62			Calculated

Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>CREATININE , SERUM</b>	0.87	mg/dL	0.4-1.1	ENZYMATIC METHOD



**DR. APEKSHA MADAN**  
MBBS, DPB  
PATHOLOGY



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**DEPARTMENT OF CLINICAL PATHOLOGY**

**ARCOFEMI - MEDIWHEEL - PMC PACK I - PAN INDIA - FY2324**


Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>COMPLETE URINE EXAMINATION (CUE) , URINE</b>				
<b>PHYSICAL EXAMINATION</b>				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	HAZY		CLEAR	Physical measurement
pH	6.5		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	1.020		1.002-1.030	Refractometric
<b>BIOCHEMICAL EXAMINATION</b>				
URINE PROTEIN	TRACE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE		NEGATIVE	GLUCOSE OXIDASE
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING REACTION
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	SODIUM NITRO PRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	MODIFIED EHRlich REACTION
NITRITE	NEGATIVE		NEGATIVE	Griess reaction
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	Diazonium salt
<b>CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY</b>				
PUS CELLS	25-30 with clumps	/hpf	0-5	Microscopy
EPITHELIAL CELLS	13-15	/hpf	<10	MICROSCOPY
RBC	3-5	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY
OTHERS	Bacteria large number of seen.			MICROSCOPY

Kindly correlate clinically.

**Comment:**

All urine samples are checked for adequacy and suitability before examination. All abnormal chemical examination are rechecked

Page 8 of 9



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SIN No:UR2410582

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**DEPARTMENT OF CLINICAL PATHOLOGY**


**ARCOFEMI - MEDIWHEEL - PMC PACK I - PAN INDIA - FY2324**

and verified by manual methods.

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

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

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MBBS, DPB  
PATHOLOGY



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#### 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.

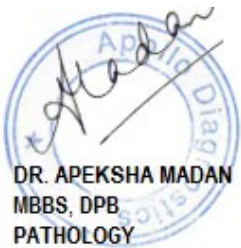
Laboratories not be responsible for any interpretation whatsoever.

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.



SIN No:UR2410582

**Dear Prajakta Naik,**

Greetings from Apollo Clinics,

Your corporate health check appointment is confirmed at **SPECTRA TARDEO clinic** on **2024-09-05** at **08:00-08:15**.

Payment Mode	
Corporate Name	<b>ARCOFEMI HEALTHCARE LIMITED</b>
Agreement Name	<b>[ARCOFEMI MEDIWHEEL PMC CREDIT PAN INDIA OP AGREEMENT]</b>
Package Name	<b>[ARCOFEMI - MEDIWHEEL - PMC PACK I - PAN INDIA - FY2324]</b>

Warm Regards,  
Apollo Clinic

आयकर विभाग  
INCOME TAX DEPARTMENT



भारत सरकार  
GOVT. OF INDIA

PRAJAKTA A NAIK

UMAKANT MORESHWAR KELKAR

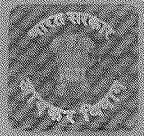
03/07/1982

Permanent Account Number

AROPK8419N

*P. Naik*

Signature



14/01/2011

**OUT- PATIENT RECORD**

Date : 5/9/24  
MRNO : 65177  
Name : MRS. PRAJAKTA NAIK  
Age/Gender : 42Y / female  
Mobile No :  
Passport No :  
Aadhar number :

Pulse : 64/min	B.P : 130/90	Resp : 18/min	Temp : (w)
Weight : 63.4	Height : 160 cm.	BMI : 24.8	Waist Circum : 89 cm.

General Examination / Allergies History

Clinical Diagnosis & Management Plan

MEUS → 02

Married Nonvegetarian

Sleep: (w) No Allergy.

No addiction

FH: Father: IHD.

Mother: Exposed of Heart Attack

Physically fit



Dr. (Mrs.) Chaitanya K. Jha  
MBBS, MD (HUM)  
Physician & Radiologist  
Reg. No. 40002

*(Signature)*  
Doctor Signature

**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, 7<sup>th</sup> Floor, Ameerpet, Hyderabad, Telangana - 500038  
Ph No: 040 - 4904 7777 | www.apollohl.com



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

Platelets : Adequate on smear.

Parasites : No Haemoparasites seen

IMPRESSION : Normocytic normochromic blood picture

Note/Comment : Please Correlate clinically

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MBBS, DPB  
PATHOLOGY

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ARCOFEMI - MEDIWHEEL - PMC PACK I - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
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RBC COUNT	5.27	Million/cu.mm	3.8-4.8	Electrical Impedance
MCV	84	fL	83-101	Calculated
MCH	26.1	pg	27-32	Calculated
MCHC	31.1	g/dL	31.5-34.5	Calculated
R.D.W	12.2	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	4,700	cells/cu.mm	4000-10000	Electrical Impedance
<b>DIFFERENTIAL LEUCOCYTIC COUNT (DLC)</b>				
NEUTROPHILS	54	%	40-80	Electrical Impedance
LYMPHOCYTES	30	%	20-40	Electrical Impedance
EOSINOPHILS	06	%	1-6	Electrical Impedance
MONOCYTES	10	%	2-10	Electrical Impedance
BASOPHILS	00	%	<1-2	Electrical Impedance
<b>ABSOLUTE LEUCOCYTE COUNT</b>				
NEUTROPHILS	2538	Cells/cu.mm	2000-7000	Calculated
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EOSINOPHILS	282	Cells/cu.mm	20-500	Calculated
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Neutrophil lymphocyte ratio (NLR)	1.8		0.78- 3.53	Calculated
PLATELET COUNT	238000	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 : Normocytic normochromic

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Platelets : Adequate on smear.

Parasites : No Haemoparasites seen

**IMPRESSION :** Normocytic normochromic blood picture

Note/Comment : Please Correlate clinically

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TOUCHING LIVES  
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 Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY  
 ARCOFEMI - MEDIWHEEL - PMC PACK I - PAN INDIA - FY2324

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



*(Handwritten Signature)*

DR. APEKSHA MADAN  
 MBBS, DPB  
 PATHOLOGY

SIN No:BED240224106

Patient Name : Mrs.PRAJAKTA NAIK  
 Age/Gender : 42 Y 2 M 2 D/F  
 UHID/MR No : STAR.0000065177  
 Visit ID : STAROPV73034  
 Ref Doctor : Dr.SELF  
 Emp/Auth/TPA ID : AROPK8419N

Collected : 05/Sep/2024 08:43AM  
 Received : 05/Sep/2024 09:28AM  
 Reported : 05/Sep/2024 11:10AM  
 Status : Final Report  
 Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY  
 ARCOFEMI - MEDIWHEEL - PMC PACK I - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, FASTING , NAF PLASMA	91	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  $\geq 126$  mg/dL and/or a random / 2 hr post glucose value of  $\geq 200$  mg/dL on at least 2 occasions.
- Very high glucose levels ( $>450$  mg/dL in adults) may result in Diabetic Ketoacidosis & is considered critical.




DR. APEKSHA MADAN  
 MBBS, DPE  
 PATHOLOGY

SIN No:PLF02206121





TOUCHING LIVES  
 Patient Name : Mrs.PRAJAKTA NAIK  
 Age/Gender : 42 Y 2 M 2 D/F  
 UHID/MR No : STAR.0000065177  
 Visit ID : STAROPV73034  
 Ref Doctor : Dr.SELF  
 Emp/Auth/TPA ID : AROPK8419N

Collected : 05/Sep/2024 11:48AM  
 Received : 05/Sep/2024 12:37PM  
 Reported : 05/Sep/2024 12:54PM  
 Status : Final Report  
 Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY  
 ARCOFEMI - MEDIWHEEL - PMC PACK I - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	108	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

SIN No:PLP1485102

Patient Name : Mrs.PRAJAKTA NAIK  
Age/Gender : 42 Y 2 M 2 D/F  
UHID/MIR No : STAR.0000065177  
Visit ID : STAROPV73034  
Ref Doctor : Dr.SELF  
Emp/Auth/TPA ID : AROPK8419N

Collected : 05/Sep/2024 08:43AM  
Received : 05/Sep/2024 09:28AM  
Reported : 05/Sep/2024 11:10AM  
Status : Final Report  
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY  
ARCOFEMI - MEDIWHEEL - PMC PACK I - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
ALANINE AMINOTRANSFERASE (ALT/SGPT), SERUM	26	U/L	4-44	JSCC

**Comment:**

ALT elevations are noted in liver parenchymal diseases, leading to injury / destruction of hepatocytes. ALT levels are seen to be elevated even before the signs and symptoms of the liver injury appear. The ALT levels remain high longer in blood as compared to AST levels. And though both the enzymes increase in liver injury, the rise in ALT is more compared to AST, thus also altering the ALT:AST ratio.

Test Name	Result	Unit	Bio. Ref. Interval	Method
BILIRUBIN, TOTAL, SERUM	1.00	mg/dL	0.1-1.2	Azobilirubin

Test Name	Result	Unit	Bio. Ref. Interval	Method
BUN/CREATININE RATIO, SERUM				
BLOOD UREA NITROGEN	11.0	mg/dL	8.0 - 23.0	Calculated
CREATININE	0.87	mg/dL	0.4-1.1	ENZYMATIC METHOD
BUN / CREATININE RATIO	12.62			Calculated

Test Name	Result	Unit	Bio. Ref. Interval	Method
CREATININE, SERUM	0.87	mg/dL	0.4-1.1	ENZYMATIC METHOD

Page 7 of 9




DR. APEKSHA MADAN  
MBBS, DPE  
PATHOLOGY

SIN No:SE04821078

Patient Name : Mrs.PRAJAKTA NAIK  
Age/Gender : 42 Y 2 M 2 D/F  
UHID/MR No : STAR.0000065177  
Visit ID : STAROPV73034  
Ref Doctor : Dr.SELF  
Emp/Auth/TPA ID : AROPK8419N

Collected : 05/Sep/2024 08:43AM  
Received : 05/Sep/2024 11:14AM  
Reported : 05/Sep/2024 11:35AM  
Status : Final Report  
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF CLINICAL PATHOLOGY  
ARCOFEMI - MEDIWHEEL - PMC PACK 1 - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>COMPLETE URINE EXAMINATION (CUE) , URINE</b>				
<b>PHYSICAL EXAMINATION</b>				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	HAZY		CLEAR	Physical measurement
pH	6.5		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	1.020		1.002-1.030	Refractometric
<b>BIOCHEMICAL EXAMINATION</b>				
URINE PROTEIN	TRACE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE		NEGATIVE	GLUCOSE OXIDASE
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING REACTION
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	SODIUM NITRO PRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	MODIFIED EHRlich REACTION
NITRITE	NEGATIVE		NEGATIVE	Griess reaction
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	Diazonium salt
<b>CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY</b>				
PUS CELLS	25-30 with clumps	/hpf	0-5	Microscopy
EPITHELIAL CELLS	13-15	/hpf	<10	MICROSCOPY
RBC	3-5	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY
OTHERS	Bacteria large number of seen.			MICROSCOPY

Kindly correlate clinically.

**Comment:**

All urine samples are checked for adequacy and suitability before examination. All abnormal chemical examination are rechecked

Page 8 of 9




DR. APEKSHA MADAN  
MBBS, DNB  
PATHOLOGY

SIN No:UR2410582



Patient Name : Mrs.PRAJAKTA NAIK  
Age/Gender : 42 Y 2 M 2 D/F  
UHID/MR No : STAR.0000065177  
Visit ID : STAROPV73034  
Ref Doctor : Dr.SELF  
Emp/Auth/TPA ID : AROPK8419N

Collected : 05/Sep/2024 08:43AM  
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DEPARTMENT OF CLINICAL PATHOLOGY  
ARCOFEMI - MEDIWHEEL - PMC PACK I - PAN INDIA - FY2324

and verified by manual methods.  
Microscopy findings are reported as an average of 10 high power fields.

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

Page 9 of 9

DR. APEKSHA MADAN  
MBBS, DPM  
PATHOLOGY

SIN No:UR2410582





TOUCHING LIVES

Patient Name : Mrs.PRAJAKTA NAIK  
Age/Gender : 42 Y 2 M 2 D/F  
UHID/MR No : STAR.0000065177  
Visit ID : STAROPV73034  
Ref Doctor : Dr.SELF  
Emp/Auth/TPA ID : AROPK8419N



Collected : 05/Sep/2024 08:43AM  
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Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

#### TERMS AND CONDITIONS GOVERNING THIS REPORT

The reported results are for information and interpretation of the referring doctor or such other medical professionals, who understand reporting units, reference ranges and limitations of technologies. Laboratories not be responsible for any interpretation whatsoever. It is presumed that the tests performed are, on the specimen / sample being to the patient named or identified and the verifications of the particulars have been cleared out by the patient or his / her representative at the point of generation of said specimen. The reported results are restricted to the given specimen only. Results may vary from lab to lab and from time to time for the same parameter for the same patient. Assays are performed in accordance with standard procedures. The reported results are dependent on individual assay methods / equipment used and quality of specimen received. This report is not valid for medico legal purposes.

DR. APEKSHA MADAN  
MBBS, DPM  
PATHOLOGY  
SIN No:UR2410582





05/09/2024 12:07

prajakta  
Unknown

42Years

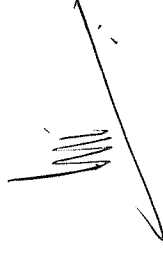
Rate: 64 . Sinus rhythm  
. RSR' in V1 or V2, probably normal variant

PR 151  
QRSD 90  
QT 410  
QTcB 424

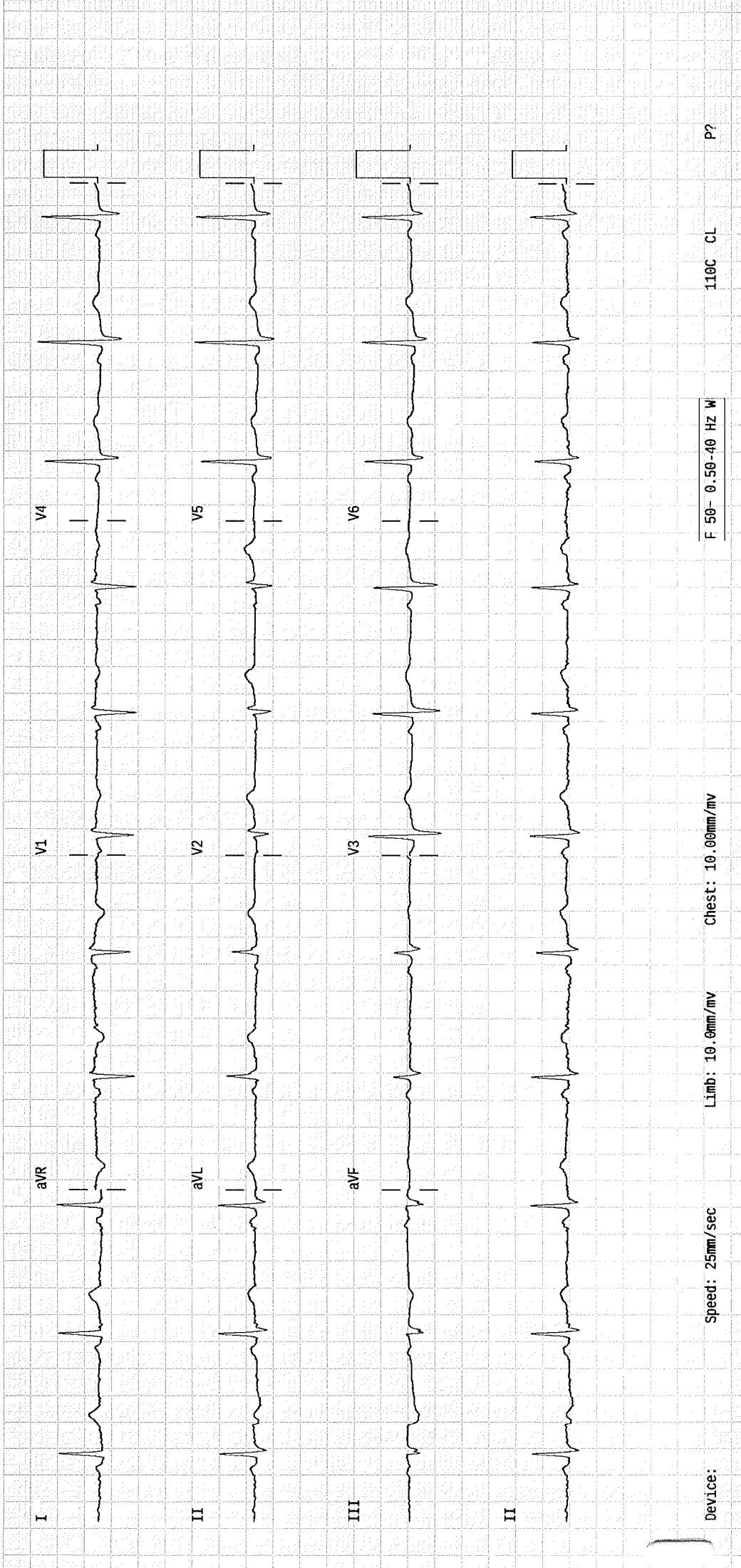
--AXIS--  
P 41  
QRS 7  
T 4

12 Leads; Standard Placement

*Incomplete RBBB*



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



Device:

Speed: 25mm/sec

Limb: 10.0mm/mv

Chest: 10.00mm/mv

F 50- 0.50-40 Hz W

110C CL

P?

Patient Name	: Mrs. PRAJAKTA NAIK	Age	: 42 Y F
UHID	: STAR.0000065177	OP Visit No	: STAROPV73034
Reported on	: 05-09-2024 10:14	Printed on	: 05-09-2024 10:14
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.

**CONCLUSION :**

No obvious abnormality seen

Printed on:05-09-2024 10:14

---End of the Report---



**Dr. VINOD SHETTY**  
Radiology

**EYE REPORT**

Name: *Prajakta Naik*

Date: *5/9/24*

Age / Sex: *42 / F*

Ref No.:

Complaint: *Uses glasses only for near.*

*Nil.*

*Ant & post (undil) segments were  
0.4:1  
FRI*

**Examination**

**Spectacle Rx**

	Right Eye							
	Vision	Sphere	Cyl.	Axis	Vision	Sphere	Cyl.	Axis
Distance	<i>6/6</i>	<i>+</i>			<i>6/6</i>	<i>+</i>		
Read	<i>N6</i>	<i>1.0</i>			<i>N6</i>	<i>0.75</i>		
		<i>+2.25</i>				<i>+2.0</i>		

**Remarks:**

**Medications:**

Trade Name	Frequency	Duration

**Follow up:**



**Consultant:**

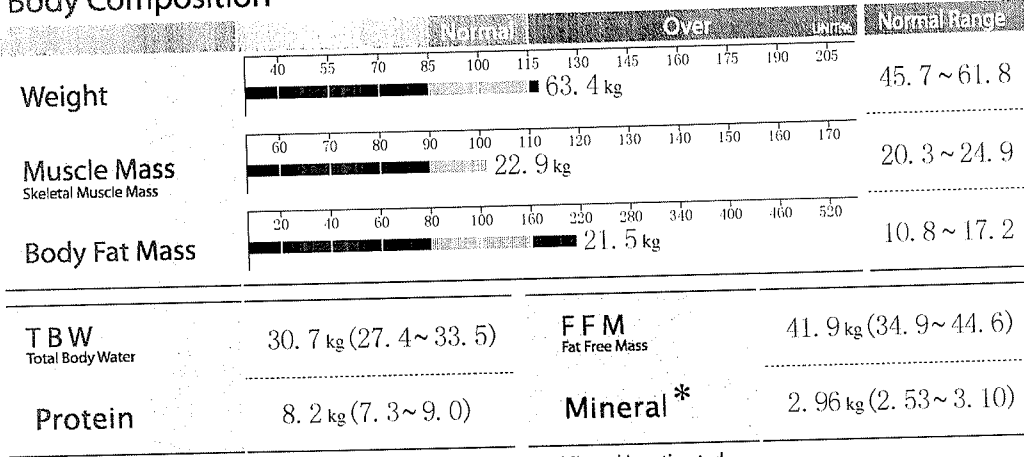
*Dr. Nusrat J. Bakhari (Mistry)*  
M.D., D.O.M.S. (GOLD MEDALIST)  
Reg. No. 2012/10/2914  
Mob:- 8850 1858 73

mky. Prayakar  
ID

Height 160cm | Date 5. 9. 2024  
Gender Female | Time 12:18:30

Age 42

## Body Composition



\* Mineral is estimated.

## Obesity Diagnosis

<b>BMI</b> Body Mass Index (kg/m <sup>2</sup> )	24.8	18.5 ~ 25.0
<b>PBF</b> Percent Body Fat (%)	33.9	18.0 ~ 28.0
<b>WHR</b> Waist-Hip Ratio	0.95	0.75 ~ 0.85
<b>BMR</b> Basal Metabolic Rate (kcal)	1275	1319 ~ 1530

## 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 checked="" type="checkbox"/> Normal	<input type="checkbox"/> Under	<input 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 Lean

2.2kg	2.3kg
Normal	Normal
<b>Trunk</b>	
19.8kg	
Normal	
6.2kg	6.1kg
Normal	Normal

## Segmental Fat

39.0%	36.9%
1.5kg	1.4kg
Over	Normal
<b>Trunk</b>	
35.3%	
11.4kg	
Over	
31.6%	31.8%
3.0kg	3.0kg
Normal	Normal

\* Segmental Fat is estimated.

## Muscle-Fat Control

Muscle Control 0.0 kg | Fat Control 9.0 kg | Fitness Score 72

## Impedance

Z	RA	LA	TR	RL	LL
20kHz	374.0	391.2	25.6	325.0	312.7
100kHz	335.0	354.7	21.3	291.1	279.0

\* 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: 63.4 kg / Duration: 30min. / unit: kcal)											
Walking	Jogging	Bicycle	Swim	Mountain Climbing	Aerobic	Table tennis	Tennis	Football	Oriental Fencing	Gate ball	Badminton
127	222	190	222	207	222	143	190	222	317	120	143
Racket ball	Tae-kwon-do	Squash	Basketball	Rope Jumping	Golf	317	317	317	190	222	112
Push-ups	Sit-ups	Weight training	Dumbbell exercise	Elastic band	Squats	development of upper body	abdominal muscle training	backache prevention	muscle strength	muscle strength	maintenance of lower body muscle

### 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

1700 kcal

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

**Patient Name** : Mrs. PRAJAKTA NAIK

**Age/Gender** : 42 Y/F

**UHID/MR No.** : STAR.0000065177

**OP Visit No** : STAROPV73034

**Sample Collected on** :

**Reported on** : 05-09-2024 10:14

**LRN#** : RAD2413024

**Specimen** :

**Ref Doctor** : SELF

**Emp/Auth/TPA ID** : AROPK8419N

**DEPARTMENT OF RADIOLOGY**

**X-RAY CHEST PA**

Both lung fields and hila are normal .

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Thoracic wall and soft tissues appear normal.

**CONCLUSION :**

No obvious abnormality seen



**Dr. VINOD SHETTY**  
Radiology