

Patient Name : Mrs.SUJITHA R  
 Age/Gender : 31 Y 9 M 20 D/F  
 UHID/MR No : SKOR.0000189582  
 Visit ID : SKOROPV263282  
 Ref Doctor : Dr.SELF  
 Emp/Auth/TPA ID : 126610

Collected : 09/Sep/2023 09:40AM  
 Received : 09/Sep/2023 10:33AM  
 Reported : 09/Sep/2023 12:00PM  
 Status : Final Report  
 Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

**DEPARTMENT OF HAEMATOLOGY**

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

**PERIPHERAL SMEAR , WHOLE BLOOD EDTA**

RBCs are normocytic normochromic.

WBCs are normal in number with normal distribution and morphology.

Platelets are adequate.

No hemoparasites or abnormal cells seen.

**IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE.**



SIN No:BED230217484

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**DEPARTMENT OF HAEMATOLOGY**

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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Test Name	Result	Unit	Bio. Ref. Range	Method
<b>HEMOGRAM , WHOLE BLOOD EDTA</b>				
<b>HAEMOGLOBIN</b>				
PCV	12.9	g/dL	12-15	Spectrophotometer
	37.20	%	36-46	Electronic pulse & Calculation
<b>RBC COUNT</b>				
MCV	4.38	Million/cu.mm	3.8-4.8	Electrical Impedance
MCH	85	fL	83-101	Calculated
MCHC	29.3	pg	27-32	Calculated
R.D.W	34.6	g/dL	31.5-34.5	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	13.1	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	5,900	cells/cu.mm	4000-10000	Electrical Impedance
<b>DIFFERENTIAL LEUCOCYTIC COUNT (DLC)</b>				
NEUTROPHILS	56	%	40-80	Electrical Impedance
LYMPHOCYTES	38	%	20-40	Electrical Impedance
EOSINOPHILS	02	%	1-6	Electrical Impedance
MONOCYTES	04	%	2-10	Electrical Impedance
BASOPHILS	00	%	<1-2	Electrical Impedance
<b>ABSOLUTE LEUCOCYTE COUNT</b>				
NEUTROPHILS	3304	Cells/cu.mm	2000-7000	Electrical Impedance
LYMPHOCYTES	2242	Cells/cu.mm	1000-3000	Electrical Impedance
EOSINOPHILS	118	Cells/cu.mm	20-500	Electrical Impedance
MONOCYTES	236	Cells/cu.mm	200-1000	Electrical Impedance
PLATELET COUNT	266000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	06	mm at the end of 1 hour	0-20	Modified Westergren

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WBCs are normal in number with normal distribution and morphology.

Platelets are adequate.

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**IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE.**



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**DEPARTMENT OF BIOCHEMISTRY**

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

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, FASTING , NAF PLASMA	78	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 > or = 126 mg/dL and/or a random / 2 hr post glucose value of > or = 200 mg/dL on at least 2 occasions.
  - Very high glucose levels (>450 mg/dL in adults) may result in Diabetic Ketoacidosis & is considered critical.



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Collected : 09/Sep/2023 01:46PM  
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**DEPARTMENT OF BIOCHEMISTRY**

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

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS, SODIUM FLUORIDE PLASMA (2 HR)	100	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.  
 Ref: Marks medical biochemistry and clinical approach



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**DEPARTMENT OF BIOCHEMISTRY**

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

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>LIPID PROFILE , SERUM</b>				
TOTAL CHOLESTEROL	227	mg/dL	<200	CHE/CHO/POD
TRIGLYCERIDES	74	mg/dL	<150	
HDL CHOLESTEROL	66	mg/dL	>40	CHE/CHO/POD
NON-HDL CHOLESTEROL	161	mg/dL	<130	Calculated
LDL CHOLESTEROL	146.2	mg/dL	<100	Calculated
VLDL CHOLESTEROL	14.8	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.44		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 350 mg/dl. When Triglycerides are more than 350 mg/dl LDL cholesterol is a direct measurement.



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**DEPARTMENT OF BIOCHEMISTRY**

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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SIN No:SE04476574





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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>LIVER FUNCTION TEST (LFT) , SERUM</b>				
BILIRUBIN, TOTAL	0.40	mg/dL	0.1-1.2	Azobilirubin
BILIRUBIN CONJUGATED (DIRECT)	0.10	mg/dL	0.1-0.4	DIAZO DYE
BILIRUBIN (INDIRECT)	0.30	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	5	U/L	4-44	JSCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	14.0	U/L	8-38	JSCC
ALKALINE PHOSPHATASE	67.00	U/L	32-111	IFCC
PROTEIN, TOTAL	7.90	g/dL	6.7-8.3	BIURET
ALBUMIN	4.80	g/dL	3.8-5.0	BROMOCRESOL GREEN
GLOBULIN	3.10	g/dL	2.0-3.5	Calculated
A/G RATIO	1.55		0.9-2.0	Calculated



SIN No:SE04476574



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

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM</b>				
CREATININE	0.67	mg/dL	0.4-1.1	ENZYMATIC METHOD
UREA	<b>11.30</b>	mg/dL	17-48	Urease
BLOOD UREA NITROGEN	<b>5.3</b>	mg/dL	8.0 - 23.0	Calculated
URIC ACID	4.50	mg/dL	3.0-5.5	URICASE
CALCIUM	8.70	mg/dL	8.4-10.2	CPC
PHOSPHORUS, INORGANIC	4.00	mg/dL	2.6-4.4	PNP-XOD
SODIUM	142	mmol/L	135-145	Direct ISE
POTASSIUM	4.6	mmol/L	3.5-5.1	Direct ISE
CHLORIDE	104	mmol/L	98 - 107	Direct ISE
Result is rechecked. Kindly correlate clinically				



SIN No:SE04476574





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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT), SERUM	10.00	U/L	16-73	Glycylglycine Kinetic method

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**Reported** : 09/Sep/2023 03:49PM  
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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
<b>THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM</b>				
TRI-IODOTHYRONINE (T3, TOTAL)	1	ng/mL	0.64-1.52	CMIA
THYROXINE (T4, TOTAL)	7.26	µg/dL	4.87-11.72	CMIA
THYROID STIMULATING HORMONE (TSH)	<b>9.110</b>	µIU/mL	0.35-4.94	CMIA

**Comment:**

**Note:**

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

1. TSH is a glycoprotein hormone secreted by the anterior pituitary. TSH activates production of T3 (Triiodothyronine) and its prohormone T4 (Thyroxine). Increased blood level of T3 and T4 inhibit production of TSH.
2. TSH is elevated in primary hypothyroidism and will be low in primary hyperthyroidism. Elevated or low TSH in the context of normal free thyroxine is often referred to as sub-clinical hypo- or hyperthyroidism respectively.
3. Both T4 & T3 provides limited clinical information as both are highly bound to proteins in circulation and reflects mostly inactive hormone. Only a very small fraction of circulating hormone is free and biologically active.
4. Significant variations in TSH can occur with circadian rhythm, hormonal status, stress, sleep deprivation, medication & circulating antibodies.

TSH	T3	T4	FT4	Conditions
High	Low	Low	Low	Primary Hypothyroidism, Post Thyroidectomy, Chronic Autoimmune Thyroiditis
High	N	N	N	Subclinical Hypothyroidism, Autoimmune Thyroiditis, Insufficient Hormone Replacement Therapy.
N/Low	Low	Low	Low	Secondary and Tertiary Hypothyroidism
Low	High	High	High	Primary Hyperthyroidism, Goitre, Thyroiditis, Drug effects, Early Pregnancy
Low	N	N	N	Subclinical Hyperthyroidism
Low	Low	Low	Low	Central Hypothyroidism, Treatment with Hyperthyroidism
Low	N	High	High	Thyroiditis, Interfering Antibodies
N/Low	High	N	N	T3 Thyrotoxicosis, Non thyroidal causes



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Certificate No. IM/1004  
NABL Accredited

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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
High   High   High   High   Pituitary Adenoma; TSHoma/Thyrotropinoma				

SIN No:SPL23128663



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**DEPARTMENT OF CLINICAL PATHOLOGY**

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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**COMPLETE URINE EXAMINATION (CUE) , URINE**

**PHYSICAL EXAMINATION**

COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pH	6.0		5-7.5	Bromothymol Blue
SP. GRAVITY	1.010		1.002-1.030	Dipstick

**BIOCHEMICAL EXAMINATION**

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

**CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY**

PUS CELLS	4 - 5	/hpf	0-5	Microscopy
EPITHELIAL CELLS	3 - 4	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	ABSENT		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY
OTHERS	ABSENT			MICROSCOPY



SIN No:UR2181145

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

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

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

Result/s to Follow:  
BLOOD GROUP ABO AND RH FACTOR, HBA1C (GLYCATED HEMOGLOBIN)

*Anie*  
DR. Anie Role  
M.B.B.S.,M.D(Pathology)  
Consultant Pathologist

*Shetty*  
DR.SHIVARAJA SHETTY  
M.B.B.S.,M.D(Biochemistry)  
CONSULTANT BIOCHEMIST

*Anushree R*  
Dr. Anushree R  
M.B.B.S.,M.D(Pathology)  
Consultant Pathologist





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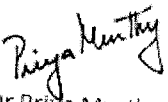
DEPARTMENT OF CLINICAL PATHOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
URINE GLUCOSE(POST PRANDIAL)	109		NEGATIVE	Dipstick

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

Result/s to Follow:  
 BLOOD GROUP ABO AND RH FACTOR, HBA1C (GLYCATED HEMOGLOBIN)

  
 Dr Priya Murthy  
 M.B.B.S,M.D(Pathology)  
 Consultant Pathologist

SIN No:UPP015464



NAME: SUJITHA R

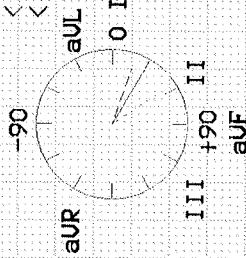
AGE: 31

GENDER: F

Measurement Results:

QRS : 100 ms  
 QT/QTcB : 408 / 420 ms  
 PR : 138 ms  
 P : 108 ms  
 RR/PP : 942 / 940 ms  
 P/QRS/T : 55/ 30/ 20 degrees  
 QT/QTcBD : 80 / 82 ms  
 Sokolow : 0.9 mV  
 NK : 9

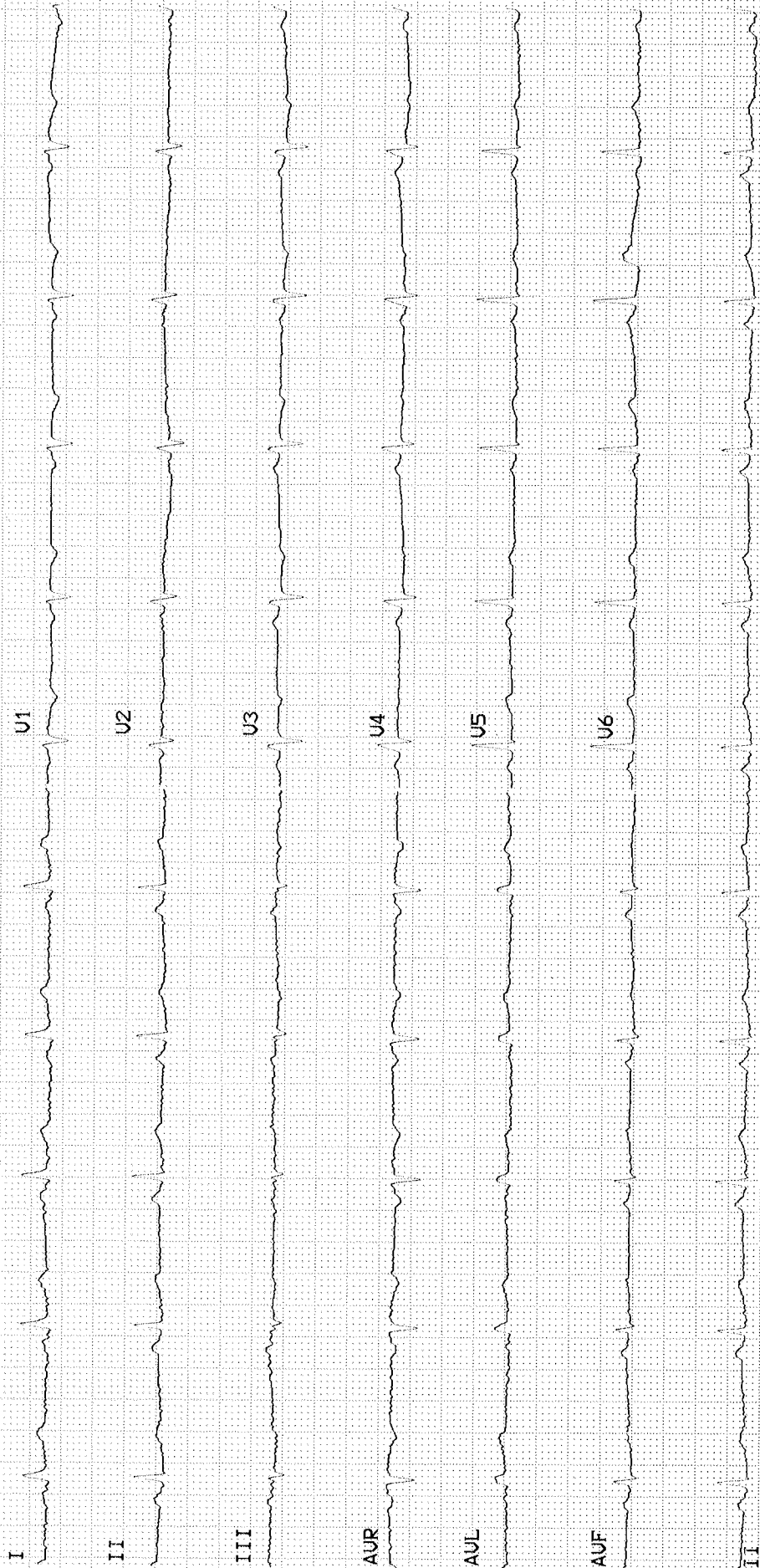
< P  
 < T  
 < QRS



Interpretation:  
 T-wave near baseline (anterior)  
 low QRS amplitudes  
 probably abnormal ECG

*Handwritten signature*

Unconfirmed report



<b>Pt. Name: MRS SUJITHA R</b>	<b>Age/Sex: 31Y/ F</b>
<b>Ref By: H.C</b>	<b>Date:09-09-2023</b>

**X-RAY CHEST PA VIEW**

Both the lung parenchyma appears normal.

Heart and mediastinum are unremarkable

Trachea and main stem bronchi are unremarkable.

Pulmonary vasculature is normal.

Both the cardiophrenic and costophrenic angles are clear.

Soft tissues and bony thorax are unremarkable.

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**IMPRESSION: NORMAL STUDY.**

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Please correlate clinically.

Thanks for reference.



**Dr. R. K. KALYANI**

M.B.B.S., D.N.B.

CONSULTANT RADIOLOGIST



<b>Pt. Name: MRS. SUJITHA R</b>	<b>Age/Sex: 31 Y / F</b>
<b>Ref By: H.C</b>	<b>Date: 09 - 09 - 2023</b>

### ULTRASOUND ABDOMEN AND PELVIS

- LIVER:** Normal in size measures 13.6 cms, and normal in echotexture. No focal lesion is seen. No IHBR dilatation is seen. Portal vein and CBD are normal.
- GALL BLADDER:** Is well distended with normal wall thickness. No pericholecystic collection is seen. No intraluminal content or calculi are seen.
- PANCREAS:** Normal in size and echotexture. No focal lesion is seen. Peri-pancreatic fat planes are well preserved.
- SPLEEN:** Normal in size measures 8.3 cms and normal in echotexture. No focal lesion is seen. Splenic vein is normal.
- KIDNEYS:** Right Kidney measures 9.2 x 3.8 cms, Left Kidney measures 9.7 x 4.3 cms. Both kidneys are normal in size, shape, position, contour and echotexture. Cortico-medullary differentiation is well maintained. No calculi / hydronephrosis are seen.
- URINARY BLADDER:** Is well-distended with normal wall thickness. No intraluminal content or calculi are seen.
- URINARY BLADDER:** Is well-distended with normal wall thickness. No intraluminal content or calculi are seen.
- UTERUS:** Is antverted, Normal in size and echotexture. Normal endomyometrial echoes are seen. No focal lesion is seen.
- OVARIES:** Normal in size and echotexture. No focal lesion is seen.
- Both the adnexa are clear. No lymphadenopathy or ascites are seen.

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**IMPRESSION: NORMAL STUDY.**

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Thanks for reference.



**Dr. R. K. KALYANI**

M.B.B.S., D.N.B.

CONSULTANT RADIOLOGIST

**2D ECHOCARDIOGRAPHY REPORT**

<b>NAME</b>	<b>MRS. SUJATHA</b>		<b>DATE:09/09/2023</b>
<b>AGE</b>	<b>31YRS</b>	<b>KRM NUMBER</b>	<b>189582</b>
<b>GENDER</b>	<b>FEMALE</b>	<b>REFERRED BY</b>	<b>DR.SELF</b>

**DIMENSIONS:**

<b>AORTA:2.6 cms</b>	<b>IVSD: 0.9 cms</b>	<b>LVDd: 3.6 cms</b>	<b>LVPWD :1.0 cms</b>
<b>LA : 2.7 cms</b>	<b>IVSS : 1.0 cms</b>	<b>LVDs:2.5 cms</b>	<b>LVPWS:1.1 cms</b>
<b>EF : 60%</b>			<b>EDV :55 ML</b>
			<b>ESV :22 ML</b>

**VALVES:**

**MITRAL : NORMAL.**  
**TRICUSPID : NORMAL.**  
**AORTIC : NORMAL.**  
**PULMONARY : NORMAL.**

**2D – ECHO:**

**IAS : Intact.**  
**IVS : Intact.**  
**RA : Normal.**  
**RV : Normal.**  
**LA : NORMAL.**  
**LV : NORMAL;**  
**IVC, AORTA AND PULMONARY ARTERY: NORMAL.**  
**PERICARDIUM : NORMAL.**

**DOPPLER DAT**

**Mitral valve : E-0.75M/sec A-0.51 m/sec, NO MR.**  
**Tricuspid valve : NO TR**  
**Aortic valve : V max –1.0 m /sec, NO AR.**  
**Pulmonary valve : NO PR.**

**FINAL IMPRESSION:**

**NORMAL CHAMBERS AND VALVES**  
**NO LV REGIONAL WALL MOTION ABNORMALITIES AT REST**  
**NORMAL LV & RV SYSTOLIC FUNCTION, EF- 60%**  
**NO PERICARDIAL EFFUSION/CLOT/ VEGETATION.**

  
**DR. MOHAN MURALI**  
**Consultant Cardiologist**

**Dr. Manaswini Ramachandra,** MBBS, MS (ENT)  
Consultant ENT and Head & Neck Surgeon  
Fellowship in Endoscopic Sinus Surgery  
Trained in Allergy (AASC)  
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Ms. SUJITHA  
✓

31yr / F

9-9-23

Health Check  
✓

Ear : B/L TM intact

Nose : (C) MTU

OC/OP : NS

Sujatha R 3141F

2/9/2022

THJ → NAD

Hard tissues → undergoing orthodontic Rx.

Soft tissues → NAD

