



: Mrs.KAMBLE SUREKHA

Age/Gender

: 49 Y 6 M 0 D/F

UHID/MR No

: CAUN.0000132992

Visit ID Ref Doctor : CAUNOPV152106

Emp/Auth/TPA ID

: Dr.SELF

: 60433

Collected

: 30/Mar/2023 08:55AM

Received

: 30/Mar/2023 02:28PM

Reported

: 30/Mar/2023 05:33PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

### **DEPARTMENT OF HAEMATOLOGY**

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

### PERIPHERAL SMEAR, WHOLE BLOOD-EDTA

RBCs ARE NORMOCYTIC NORMOCHROMIC.

TLC , DLC WITHIN NORMAL LIMIT. NO IMMATURE CELLS ARE SEEN.

PLATELETS ARE ADEQUATE.

NO HEMOPARASITES SEEN

Page 1 of 12



SIN No:BED230080417





: Mrs.KAMBLE SUREKHA

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### **DEPARTMENT OF HAEMATOLOGY**

Test Name	Result	Unit	Bio. Ref. Range	Method
HEMOGRAM, WHOLE BLOOD-EDTA			¥	
HAEMOGLOBIN	12.6	g/dL	12-15	Spectrophotometer
PCV	37.90	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.69	Million/cu.mm	3.8-4.8	Electrical Impedence
MCV	80.9	fL	83-101	Calculated
MCH	26.9	pg	27-32	Calculated
MCHC	33.2	g/dL	31.5-34.5	Calculated
R.D.W	16.9	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	6,070	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (D	LC)			
NEUTROPHILS	51.3	%	40-80	Electrical Impedance
LYMPHOCYTES	38.2	%	20-40	Electrical Impedance
EOSINOPHILS	5	%	1-6	Electrical Impedance
MONOCYTES	4.9	%	2-10	Electrical Impedance
BASOPHILS	0.6	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	3113.91	Cells/cu.mm	2000-7000	Electrical Impedance
LYMPHOCYTES	2318.74	Cells/cu.mm	1000-3000	Electrical Impedance
EOSINOPHILS	303.5	Cells/cu.mm	20-500	Electrical Impedance
MONOCYTES	297.43	Cells/cu.mm	200-1000	Electrical Impedance
BASOPHILS	36.42	Cells/cu.mm	0-100	Electrical Impedance
PLATELET COUNT	288000	cells/cu.mm	150000-410000	Electrical impedence
ERYTHROCYTE SEDIMENTATION RATE (ESR)	7	mm at the end of 1 hour	0-20	Modified Westergren
PERIPHERAL SMEAR				

RBCs ARE NORMOCYTIC NORMOCHROMIC.

TLC, DLC WITHIN NORMAL LIMIT. NO IMMATURE CELLS ARE SEEN.

PLATELETS ARE ADEQUATE.

NO HEMOPARASITES SEEN

Page 2 of 12

SIN No:BED230080417



This test has been performed at Apollo Health and Lifestyle ltd- Sadashiv Peth Pune, Diagnostics Lab

Centriole, Plot #90, Survey #129, 130/1+2, ITI Road, Aundh, Pune, Maharashtra, India - 411007





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Sponsor Name

: Final Report

: ARCOFEMI HEALTHCARE LIMITED

Emp/Addit/11 A IB . 00433					
DEPARTMENT OF HAEMATOLOGY					
ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - 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	В		4	Microplate Hemagglutination	
Rh TYPE	Positive			Microplate Hemagglutination	

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SIN No:BED230080417







: Mrs.KAMBLE SUREKHA

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: 30/Mar/2023 08:55AM

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Reported

: 30/Mar/2023 05:00PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

### **DEPARTMENT OF BIOCHEMISTRY**

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY2324				
Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, FASTING , NAF PLASMA	102	mg/dL	70-100	HEXOKINASE

### **Comment:**

### As per American Diabetes Guidelines

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

GLUCOSE, POST PRANDIAL (PP), 2	184	mg/dL	70-140	HEXOKINASE
HOURS , NAF PLASMA				

### **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





: Mrs.KAMBLE SUREKHA

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### DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD-EDTA	5.7	%	*	HPLC
<b>ESTIMATED AVERAGE GLUCOSE (eAG)</b> , WHOLE BLOOD-EDTA	117	mg/dL		Calculated

### **Comment:**

Reference Range as per American Diabetes Association (ADA):

REFERENCE GROUP	HBA1C IN %
NON DIABETIC ADULTS >18 YEARS	<5.7
AT RISK (PREDIABETES)	5.7 – 6.4
DIAGNOSING DIABETES	≥ 6.5
DIABETICS	
· EXCELLENT CONTROL	6 – 7
FAIR TO GOOD CONTROL	7 – 8
· UNSATISFACTORY CONTROL	8 – 10
POOR CONTROL	>10

Note: Dietary preparation or fasting is not required.

- 1. A1C test should be performed at least two times a year in patients who are meeting treatment goals (and who have stable glycemic control).
- 2. Lowering A1C to below or around 7% has been shown to reduce microvascular and neuropathic complications of type 1 and type 2 diabetes. When mean annual HbA1c is <1.1 times ULN (upper limit of normal), renal and retinal complications are rare, but complications occur in >70% of cases when HbA1c is >1.7 times ULN.
- 3. 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. Fructosamine may be used as an alternate measurement of glycemic control

Page 5 of 12

SIN No:PLF01952617,PLP1317390,EDT230033057







Patient Name : Mrs.KAMBLE SUREKHA

Age/Gender : 49 Y 6 M 0 D/F

UHID/MR No : CAUN.0000132992 Visit ID : CAUNOPV152106

Ref Doctor : Dr.SELF

Emp/Auth/TPA ID : 60433 Collected : 30/Mar/2023 08:55AM

Received : 30/Mar/2023 02:26PM Reported : 30/Mar/2023 04:23PM

Status : Final Report

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

### **DEPARTMENT OF BIOCHEMISTRY**

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY2324				
Test Name	Result	Unit	Bio. Ref. Range	Method
LIPID PROFILE , SERUM			7	
TOTAL CHOLESTEROL	187	mg/dL	<200	CHO-POD
TRIGLYCERIDES	109	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	48	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	139	mg/dL	<130	Calculated
LDL CHOLESTEROL	116.82	mg/dL	<100	Calculated
VLDL CHOLESTEROL	21.71	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.88		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 can show physiological and analytical variations.

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

Page 6 of 12

SIN No:SE04336099







: Mrs.KAMBLE SUREKHA

Age/Gender

: 49 Y 6 M 0 D/F

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: ARCOFEMI HEALTHCARE LIMITED

### DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY2324				
Test Name	Result	Unit	Bio. Ref. Range	Method
LIVER FUNCTION TEST (LFT) , SERUM			¥	
BILIRUBIN, TOTAL	0.42	mg/dL	0.3–1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.08	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.34	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	16.42	U/L	<35	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	16.7	U/L	<35	IFCC
ALKALINE PHOSPHATASE	67.85	U/L	30-120	IFCC
PROTEIN, TOTAL	7.86	g/dL	6.6-8.3	Biuret
ALBUMIN	4.33	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.53	g/dL	2.0-3.5	Calculated
A/G RATIO	1.23	40	0.9-2.0	Calculated

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SIN No:SE04336099





: Mrs.KAMBLE SUREKHA

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Sponsor Name

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### **DEPARTMENT OF BIOCHEMISTRY**

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY2324				
Test Name	Result	Unit	Bio. Ref. Range	Method
RENAL PROFILE/RENAL FUNCTION T	EST (RFT/KFT), SERUN	1	¥	
CREATININE	0.45	mg/dL	0.55-1.02	Modified Jaffe, Kinetic
UREA	16.30	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	7.6	mg/dL	8.0 - 23.0	Calculated
URIC ACID	6.23	mg/dL	2.6-6.0	Uricase PAP
CALCIUM	10.12	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	3.51	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	142.22	mmol/L	136–146	ISE (Indirect)
POTASSIUM	4.2	mmol/L	3.5–5.1	ISE (Indirect)
CHLORIDE	105.38	mmol/L	101–109	ISE (Indirect)

Page 8 of 12

SIN No:SE04336099







: Mrs.KAMBLE SUREKHA

Age/Gender

: 49 Y 6 M 0 D/F

UHID/MR No

: CAUN.0000132992

Visit ID Ref Doctor : CAUNOPV152106

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Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

### **DEPARTMENT OF BIOCHEMISTRY**

CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY2324
--

ARCOFEMI - MEDIWHEEL - FULL BODY A	RCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY2324				
Test Name	Result	Unit	Bio. Ref. Range	Method	
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	17.76	U/L	<38	IFCC	

Page 9 of 12

SIN No:SE04336099







Patient Name : Mrs.KAMBLE SUREKHA

Age/Gender : 49 Y 6 M 0 D/F

UHID/MR No : CAUN.0000132992

Visit ID : CAUNOPV152106

Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 60433 Collected : 30/Mar/2023 08:55AM

Received : 30/Mar/2023 02:26PM

Status : Final Report

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

: 30/Mar/2023 04:07PM

### **DEPARTMENT OF IMMUNOLOGY**

Reported

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY2324				
Test Name	Result	Unit	Bio. Ref. Range	Method
THYROID PROFILE (TOTAL T3, TOTAL T4	, TSH) , SERUM		¥	
TRI-IODOTHYRONINE (T3, TOTAL)	0.99	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	11.14	μg/dL	6.09-12.23	CLIA
THYROID STIMULATING HORMONE (TSH)	1.717	μIU/mL	0.34-5.60	CLIA

### **Comment:**

Serum TSH concentrations exhibit a diurnal variation with the peak occurring during the night and the nadir occurring between 10 a.m. and 4 p.m.In primary hypothyroidism, thyroid-stimulating hormone (TSH) levels will be elevated. In primary hyperthyroidism, TSH levels will be low. Elevated or low TSH in the context of normal free thyroxine is often referred to as subclinical hypo- or hyperthyroid-ism, respectively. Physiological rise in Total T3 / T4 levels is seen in pregnancy and in patients on steroid therapy.

Recommended test for T3 and T4 is unbound fraction or free levels as it is metabolically active.

### 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

Page 10 of 12



SIN No:SPL23053532







: Mrs.KAMBLE SUREKHA

Age/Gender

: 49 Y 6 M 0 D/F

UHID/MR No

: CAUN.0000132992

Visit ID Ref Doctor : CAUNOPV152106

Emp/Auth/TPA ID

: Dr.SELF : 60433 Collected

: 30/Mar/2023 08:55AM

Received

: 30/Mar/2023 03:34PM

Reported

: 30/Mar/2023 04:29PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

<b>DEPARTMENT</b>	OF CI	INICAL	PATHOL	OGY

ARCOFEMI - MEDIWHEEL	- FULL BODY	ANNUAL PLUS CHE	CK ADVANCED	- FEMALE - 2D ECHO -	PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
COMPLETE URINE EXAMINATION , $\it U$	RINE		¥	
PHYSICAL EXAMINATION				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
рН	5.5		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	>1.025		1.002-1.030	Bromothymol Blue
BIOCHEMICAL EXAMINATION				
URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE		NEGATIVE	GLUCOSE OXIDASE
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING REACTION
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	SODIUM NITRO PRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	MODIFED EHRLICH REACTION
BLOOD	NEGATIVE		NEGATIVE	Peroxidase
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	LEUCOCYTE ESTERASE
CENTRIFUGED SEDIMENT WET MO	UNT AND MICROSCOPY			
PUS CELLS	3 - 4	/hpf	0-5	Microscopy
EPITHELIAL CELLS	1 - 2	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY

Page 11 of 12

SIN No:UR2088656







: Mrs.KAMBLE SUREKHA

Age/Gender

: 49 Y 6 M 0 D/F

UHID/MR No

: CAUN.0000132992

Visit ID Ref Doctor : CAUNOPV152106

Emp/Auth/TPA ID

: Dr.SELF : 60433 Collected

: 30/Mar/2023 08:55AM

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: 30/Mar/2023 03:34PM

Reported

: 30/Mar/2023 04:29PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

•				
DEPARTMENT OF CLINICAL PATHOLOGY				
ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY2324				
Test Name	Result	Unit	Bio. Ref. Range	Method
URINE GLUCOSE(POST PRANDIAL)	NEGATIVE		NEGATIVE	Dipstick
URINE GLUCOSE(FASTING)	NEGATIVE		NEGATIVE	Dipstick

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

Dr Sanjay Ingle M.B.B.S,MD(Pathology) Consultant Pathologist

Page 12 of 12

SIN No:UPP014494,UF008223

GENERAL

Department

Date

Doctor

30-03-2023 CAUN.0000132992

MR NO

Registration No

Mrs. KAMBLE SUREKHA

Name

MRM

918G

M SIZ

NBM 3150

13100

MBM Date

COTEL

Age/ Gender

Qualification

49 Y Female

Consultation Timing: 24:80

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Patient Name Jusebloo, bomble Date

NGE/Sex : 49/P UHID/ MR NO : 130990

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Mr. Ricesh Sutnase

Bank of Baroda



## APOLLO CLINIC AUNDH CONCENT FORM

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COMPANY NAME: Bank of Baroch		ĵ.
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PHONO NO: 9890599696	-	
PHONO NO.	-	
SIGNA	TURE	

Date

25-03-2023

Department : GENERAL

MR NO

: CAUN.0000132879

Doctor

Name

: M/s KAMBLE MANGALA PRASHA

Registration No

Qualification

Age/ Gender : 51 Y / Female

Consultation Timing: 09:23

Height	153
Waight	49
BP	110170
Pulse	70
Waist	81
Hip	88.



: lambale Mangela

Date ester 3

AGE/Sex 514

UHID/ MR NO

132879

	RIGHT EYE	LEFT EYE
FAR VISION	arm	grown
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ANTERIOR SEGMENT PUPIL		
COLOUR VISION		
FAMILY / MEDICAL HISTORY		4:

Impression: A Tigoratism	o & fressigopia
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R - 0.25/+1.25 X 5 - 025/+1.25 X 170 Optometrist:-

Mrs. Trushna P

Ness Add + 2:00 (N6

Apollo Menkh and Livestyle Livings

(CIN - 085T101G2000PLC115819)

Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016. Ph No: 040-4904 7777, Fax No: 4904 7744 | Email ID: enquiry@apollohl.com | www.apollohl.com

APOLLO CLINICS NETWORK MAHARASHTRA

Puno (Aundh | Kharadi | Nigdi Pradhikaran | Viman Nagar | Wanowrie)

TO BOOK AN A



### LETTER OF APPROVAL / RECOMMENDATION

To,

The Coordinator,

Mediwheel (Arcofemi Healthcare Limited)

Helpline number: 011-41195959

Dear Sir / Madam.

Sub: Annual Health Checkup for the employees of Bank of Baroda

This is to inform you that the following employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS	EMPLOYEE DETAILS
NAME	MS. KAMBLE MANGALA PRASHANT
EC NO.	157085
DESIGNATION	JOINT MANAGER
PLACE OF WORK	PIMPRI CHINCHWA,MIDC PIMPRI
BIRTHDATE	29-02-1972
PROPOSED DATE OF HEALTH	25-03-2023
CHECKUP	
BOOKING REFERENCE NO.	22M157085100050564E

This letter of approval / recommendation is valid if submitted along with copy of the Bank of Baroda employee id card. This approval is valid from 20-03-2023 till 31-03-2023 The list of medical tests to be conducted is provided in the annexure to this letter. Please note that the said health checkup is a cashless facility as per our tie up arrangement. We request you to attend to the health checkup requirement of our employee and accord your top priority and best resources in this regard. The EC Number and the booking reference number as given in the above table shall be mentioned in the invoice, invariably.

We solicit your co-operation in this regard.

Yours faithfully,

Sd/-

Chief General Manager HRM Department Bank of Baroda

(Note: This is a computer generated letter. No Signature required. For any clarification, please contact Mediwheel (Arcofemi Healthcare Limited))



### SUGGESTIVE LIST OF MEDICAL TESTS

FOR MALE	FOR FEMALE
CBC	CBC
ESR	ESR
Blood Group & RH Factor	Blood Group & RH Factor
Blood and Urine Sugar Fasting	Blood and Urine Sugar Fasting
Blood and Urine Sugar PP	Blood and Urine Sugar PP
Stool Routine	Stool Routine
Lipid Profile	Lipid Profile
Total Cholesterol	Total Cholesterol
HDL	HDL
LDL	LDL
VLDL	VLDL
Triglycerides	Triglycerides
HDL / LDL ratio	HDL / LDL ratio
Liver Profile	Liver Profile
AST	AST
ALT	ALT
GGT	GGT
Bilirubin (total, direct, indirect)	Bilirubin (total, direct, indirect)
ALP	ALP
Proteins (T, Albumin, Globulin)	Proteins (T, Albumin, Globulin)
Kidney Profile	Kidney Profile
Serum creatinine	Serum creatinine
Blood Urea Nitrogen	Blood Urea Nitrogen
Uric Acid	Uric Acid
HBA1C	HBA1C
Routine urine analysis	Routine urine analysis
USG Whole Abdomen	USG Whole Abdomen
General Tests	General Tests
X Ray Chest	X Ray Chest
ECG	ECG
2D/3D ECHO / TMT	2D/3D ECHO / TMT
Stress Test	Thyroid Profile (T3, T4, TSH)
PSA Male (above 40 years)	Mammography (above 40 years)
(**************************************	and Pap Smear (above 30 years).
Thyroid Profile (T3, T4, TSH)	Dental Check-up consultation
Dental Check-up consultation	Physician Consultation
Physician Consultation	Eye Check-up consultation
Eye Check-up consultation	Skin/ENT consultation
Skin/ENT consultation	Gynaec Consultation

### Pimpri, Pune, Pune City Region

From:

MANGALA JADHAV < mangalaj 1972@gmail.com >

Sent: To: Friday, March 24, 2023 12:42 PM Pimpri, Pune , Pune City Region

Subject:

Fwd: Your Apollo order has been confirmed

\*\***सावधान:** यह मेल बैंक डोमेन के बाहर से आया है. अगर आप प्रेषक को नहीं जानते तो मेल में दी गयी लिंक पर क्लिक ना करें या अटैचमेंट ना खोलें.

\*\*CAUTION: THIS MAIL IS ORIGINATED FROM OUTSIDE OF THE BANK'S DOMAIN. DO NOT CLICK ON LINKS OR OPEN ATTACHMENTS UNLESS YOU KNOW THE SENDER.

----- Forwarded message -----

From: <<u>noreply@apolloclinics.info</u>> Date: Mon, 20 Mar 2023, 13:28

Subject: Your Apollo order has been confirmed

To: <mangalaj1972@gmail.com>

Cc: <aundh@apolloclinic.com>, <priya.tiwari@apolloclinic.com>, <syamsunder.m@apollohl.com>



### Dear MS. KAMBLE MANGALA PRASHANT,

Namaste Team,

Greetings from Apollo Clinics,

With regards to the below request the below appointment is scheduled at AUNDH clinic on 2023-03-25 at 08:20-08:25.

Corporate Name	ARCOFEMI HEALTHCARE LIMITED	
Agreement Name	ARCOFEMI MEDIWHEEL FEMALE AHC CREDIT PAN INDIA OP AGREEMENT	
Package Name	[ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY2324]	

"In view of corona virus precautionary measures, you are requested to take a mandatory check for symptoms & self-declaration at centre. Please cooperate. Thank you."

NOTE: We are not providing the breakfast in view of corona virus. And that customers on their own should carry their breakfast.

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

### Instructions to undergo Health Check:

- 1. Please ensure you are on complete fasting for 10-To-12-Hours prior to check.
- During fasting time do not take any kind of medication, alcohol, cigarettes, tobacco or any other liquids (except Water) in the morning.
- 3. Bring urine sample in a container if possible (containers are available at the Health Check Centre).
- 4. Please bring all your medical prescriptions and previous health medical records with you.
- 5. Kindly inform the health check reception in case if you have a history of diabetes and cardiac problems.

### For Women:

- 1. Pregnant Women or those suspecting are advised not to undergo any X-Ray test.
- 2. It is advisable not to undergo any Health Check during menstrual cycle.

As per agreement terms please carry all relevant documents such as Confirmation mail, valid id proof, company ID card etc.

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

Clinic Address: CENTRIOLE, PLOT #90, SURVEY #129, 130/1+2, ITI ROAD, AUNDH.

Contact No: (020) 2588 7961 - 62-64.

P.S: Health Check-Up may take 4 - 5hrs for completion on week days & 5 - 6hrs on Saturdays, kindly plan accordingly, Doctor Consultation will be completed after all the Reports are ready.

Note: Speak Freely. Speak Free! Speak to our Doctor from 8:00 PM to 8:00 AM by calling 1860 500 7788 and press #2 on the IVR. Now get all your Health related queries answered by an expert! Service by Apollo Clinic.

Warm Regards, Apollo Team



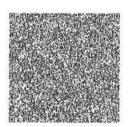


### भारत सरकार Government of India

### भारतीय विशिष्ट ओळख प्राधिकरण Unique Identification Authority of India

नोंदणी ऋमांकः/ Enrolment No.: 0648/57196/06667

मंगला प्रशांत कांबळे Mangala Prashant Kamble D-106,Plot No.12,Yamuna ChS,Sector-17 new panyel Kamothe Raigarh Maharashtra - 410206 9967440422



आपला आधार क्रमांक / Your Aadhaar No. :

4242 7835 2616 VID: 9164 3126 6188 3396

माझे आधार, माझी ओळख



भारत सरकार Government of India



15,12/20

मंगला प्रशांत कांबळे Mangala Prashant Kamble जन्म तारीख/DOB: 29/02/1972 महिला/ FEMALE

4242 7835 2616

VID: 9164 3126 6188 3396

आधार, माझी







### माहिती

- आधार ओळखीचा पुरावा आहे नागरिकत्वाचा नाही
- सुरक्षित QR कोड / ऑफलाइन XML / ऑनलाइन प्रमाणीकरण वापरून ओळख सत्यापित करा.
- हे इलेक्ट्रॉनिक प्रक्रिये द्वारा तयार झालेले एक पत्र आहे.

### **INFORMATION**

- Aadhaar is a proof of identity, not of citizenship.
- Verify identity using Secure QR Code/ Offline XML/ Online Authentication.
- This is electronically generated letter.
  - आधार देशभरात वैध आहे
  - आधार आपल्याला विविध सरकारी आणि खाजगी सेवा सुलभतेने घेण्यास मदत करते
  - आपला मोबाइल नंबर आणि ईमेल आयडी आधारमध्ये अदयावत ठेवा
  - आपल्या स्मार्ट फोनमध्ये आधार घ्या mAadhaar App
  - Aadhaar is valid throughout the country.
  - Aadhaar helps you avail various Government and non-Government services easily.
  - Keep your mobile number & email ID updated in Aadhaar.
  - Carry Aadhaar in your smart phone use mAadhaar App.

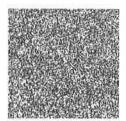


भारतीय विशिष्ट ओळख प्राधिकरण Unique Identification Authority of India



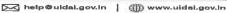
पत्ताः , डी-१०६,प्लॉट नं.१२, यसुना को, हौ.सो, सेक्टर-१७, न्यू पन्तेल, कामोठे, रायगड, महाराष्ट्र - 410206

Address: i D-106,Plot No. 12,Yamuna ChS,Sector-17, B new panvel, Kamothe, Raigarh, Maharashtra - 410206



4242 7835 2616

VID: 9164 3126 6188 3396







Patient Name	: Mrs. KAMBLE SUREKHA	Age/Gender	: 49 Y/F
UHID/MR No.	: CAUN.0000132992	OP Visit No	: CAUNOPV152106
Sample Collected on	:	Reported on	: 30-03-2023 16:22
LRN#	: RAD1963606	Specimen	:
Ref Doctor	: SELF		
Emp/Auth/TPA ID	: 60433		

### DEPARTMENT OF RADIOLOGY

### **ULTRASOUND - WHOLE ABDOMEN**

Liver appears normal in size, shape and shows enhanced in echotexture.

No focal lesion is seen. PV and CBD are normal. No dilatation of the intrahepatic biliary radicals.

<u>Gall bladder</u> is partially distended. No evidence of calculus. Wall thickness appears normal. No evidence of periGB collection. No evidence of focal lesion is seen.

**Spleen** appears normal. No focal lesion seen. Spleenic vein appears normal.

**Pancreas** appears normal in echopattern. No focal/mass lesion/calcification. No evidence of peripancreatic free fluid or collection. Pancreatic duct appears normal.

Both <u>the kidneys</u> appear normal in size, shape and echopattern. Cortical thickness and C M differentiation are maintained. No calculus / hydronephrosis seen on either side.

Right kidney - 9.6 x 4.0 cm.

Left kidney  $-11.1 \times 5.2 \text{ cm}$ .

<u>Urinary Bladder</u>: - is well distended and appears normal. No evidence of any wall thickening or abnormality. No evidence of any intrinsic or extrinsic bladder abnormality detected.

<u>Uterus</u> – Hysterectomy status.

No obvious free fluid or lymphadenopathy is noted in the abdomen.

### **IMPRESSION:-**

- Grade I fatty liver.
- No other significant abnormality detected.

Suggest – clinical correlation.

(The sonography findings should always be considered in correlation with the clinical and other



Patient Name : Mrs. KAMBLE SUREKHA Age/Gender : 49

: 49 <u>Y/F</u>

investigation finding where applicable.) It is only a professional opinion, not valid for medico legal purpose.

SCAPLURA SULLAS SANIESV MATHUDIA

Dr. SUHAS SANJEEV KATHURIA MBBS,DMRE, RADIOLOGY

Radiology



Patient Name : Mrs. KAMBLE SUREKHA Age/Gender : 49 Y/F

Sample Collected on : Reported on : 30-03-2023 13:17

**Ref Doctor** : SELF **Emp/Auth/TPA ID** : 60433

### DEPARTMENT OF RADIOLOGY

### X-RAY CHEST PA

No evidence of any focal lesion.

Trachea is central in position.

Costophrenic angles are clear.

Cardio thoracic ratio is normal.

Cardiac silhouette is well maintained.

Mediastinal and hilar regions are normal.

Both diaphragmatic domes are well visualized and normal.

Visualized skeleton and soft tissues around thoracic cage appear normal.

**COMMENT**: No significant abnormality seen.

Please correlate clinically.

Scathura

Dr. SUHAS SANJEEV KATHURIA MBBS,DMRE, RADIOLOGY

Radiology



Patient Name: Mrs. KAMBLE SUREKHAAge/Gender: 49 Y/F

**UHID/MR No.** : CAUN.0000132992 **OP Visit No** : CAUNOPV152106

Sample Collected on : Reported on : 30-03-2023 12:11

Emp/Auth/TPA ID : 60433

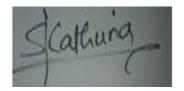
: SELF

### DEPARTMENT OF RADIOLOGY

### SONO MAMOGRAPHY - SCREENING

NA

**Ref Doctor** 



Dr. SUHAS SANJEEV KATHURIA MBBS,DMRE, RADIOLOGY

Radiology

Name: Mrs. KAMBLE SUREKHA

Age/Gender: 49 Y/F Address: pune

Location: PUNE, MAHARASHTRA

Doctor:

Department: GENERAL

Rate Plan: AUNDH\_03122022

Sponsor: ARCOFEMI HEALTHCARE LIMITED

Consulting Doctor: Dr. BALKRISHNA SURYAKANTRAO RANGDAL

### **Doctor's Signature**

MR No: CAUN.0000132992
Visit ID: CAUNOPV152106
Visit Date: 30-03-2023 08:42

Discharge Date:

Referred By: SELF

Name: Mrs. KAMBLE SUREKHA

Age/Gender: 49 Y/F Address: pune

Location: PUNE, MAHARASHTRA

Doctor:

Department: GENERAL

Rate Plan: AUNDH\_03122022

Sponsor: ARCOFEMI HEALTHCARE LIMITED

Consulting Doctor: Dr. PRADNYA NIKAM

### **Doctor's Signature**

MR No: CAUN.0000132992
Visit ID: CAUNOPV152106
Visit Date: 30-03-2023 08:42

Discharge Date:

Referred By: SELF

Mrs. KAMBLE SUREKHA 49 Y/F pune

Age/Gender: Address:

PUNE, MAHARASHTRA Location:

Doctor:

Department: GENERAL Rate Plan: AUNDH\_03122022

ARCOFEMI HEALTHCARE LIMITED Sponsor:

Consulting Doctor: Dr. RISHIKA GHAWAT

### HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

SYSTEMIC REVIEW

**HT-HISTORY** 

PHYSICAL EXAMINATION

SYSTEMIC EXAMINATION

**IMPRESSION** 

RECOMMENDATION

**Doctor's Signature** 

MR No: CAUN.0000132992 CAUNOPV152106 Visit ID: Visit Date: 30-03-2023 08:42

SELF

Discharge Date:

Referred By:

Mrs. KAMBLE SUREKHA 49 Y/F pune

Age/Gender: Address:

PUNE, MAHARASHTRA Location:

Doctor:

Department: GENERAL Rate Plan: AUNDH\_03122022

ARCOFEMI HEALTHCARE LIMITED Sponsor:

Consulting Doctor: Dr. PRACHEE HENDRE

### HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

SYSTEMIC REVIEW

**HT-HISTORY** 

PHYSICAL EXAMINATION

SYSTEMIC EXAMINATION

**IMPRESSION** 

RECOMMENDATION

**Doctor's Signature** 

MR No: CAUN.0000132992 CAUNOPV152106 Visit ID: Visit Date: 30-03-2023 08:42

Discharge Date:

Referred By: SELF Name: Mrs. KAMBLE SUREKHA

Age/Gender: 49 Y/F Address: pune

Location: PUNE, MAHARASHTRA

Doctor:

Department: GENERAL

Rate Plan: AUNDH\_03122022

Sponsor: ARCOFEMI HEALTHCARE LIMITED

Consulting Doctor: Dr. RASHMI PABALKAR

### **Doctor's Signature**

MR No: CAUN.0000132992 Visit ID: CAUNOPV152106 Visit Date: 30-03-2023 08:42

Discharge Date:

Referred By: SELF

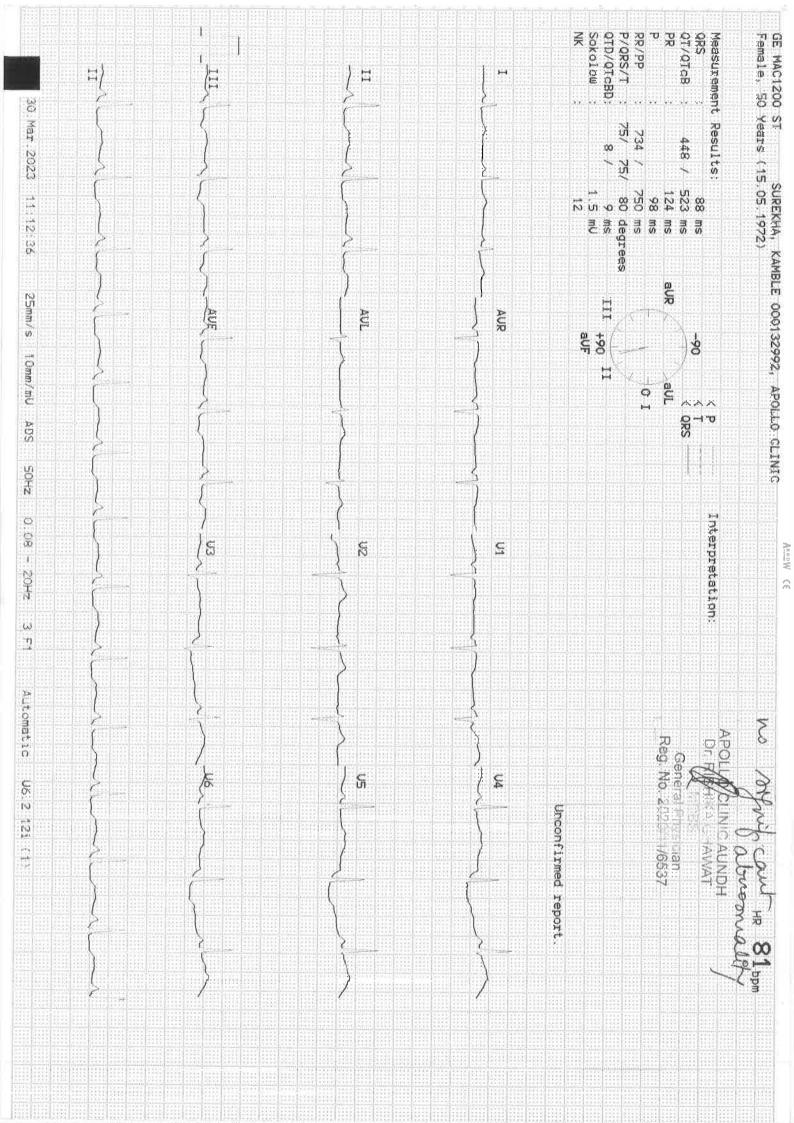
D	late	Pulse (Beats/min)	-	Resp (Rate/min)	Temp (F)	Height (cms)	Weight	Percentage	Fat Level	Body Age (Years)	BMI	( irciim	Hip (cms)	Waist	Waist & Hip Ratio	Hear
_	0-03-2023 4:08			18 Rate/min	98 F	161 cms	77 Kgs	%	%	Years	29.71	97 cms	112 cms	cms		AHLL09208

D	late	Pulse (Beats/min)	-	Resp (Rate/min)	Temp (F)	Height (cms)	Weight	Percentage	Fat Level	Body Age (Years)	BMI	( irciim	Hip (cms)	Waist	Waist & Hip Ratio	Hear
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PATIENT NAME:-MRS. SUREKHA KAMBLE

REFERRED BY :- ARCOFEMI

**UHID** 

:- 132992

AGE :- 49 YRS/F

DATE: 30.03.2023

### 2D ECHO CARDIOGRAPHY & COLOR DOPPLER REPORT

Mitral Valve

: Normal.

**Aortic Valve** 

: Normal.

Tricuspid Valve

: Normal.

**Pulmonary Valve** 

: Normal.

### RWMA: Absent.

RA

: Normal

RV

: Normal

**IVS** 

: Intact

: Intact

Pericardial effusion: No

IVC

: Normal.

### **CONCLUSION:**

- Normal size cardiac chambers.
- No RWMA.
- Good LV systolic function LVEF-60%.
- Grade I diastolic dysfunction.
- No AR/MR/TR No PAH,
- No e/o clot, thrombus, vegetation or pericardial effusion.

Dr. Satya junt Survawanshi DR.SATYAJEET SURYAWANSHI (CONSULTANT CARDIOLOGIST)

Apollo Clinic - Aunch

P/S: Normal echo does not rule out coronary artery disease.

**Apollo Health and Lifestyle Limited** 

(CIN - U85110TG2000PLC115819)

Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016. Ph No: 040-4904 7777, Fax No: 4904 7744 | Email ID: enquiry@apollohl.com | www.apollohl.com

APOLLO CLINICS NETWORK MAHARASHTRA

Pune (Aundh | Kharadi | Nigdi Pradhikaran | Viman Nagar | Wanowrie)

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

1860 500 7788