


<b>Name</b> : Mrs. Sujatha  <b>Address</b> : Bangalore  <b>Plan</b> : ARCOFEMI MEDIWHEEL FEMALE AHC CREDIT PAN INDIA OP AGREEMENT	<b>Age</b> : 53 Y  <b>Sex</b> : F	<b>UHID</b> :CINR.0000163122  <small>* CINR . 0 0 0 0 1 6 3 1 2 2 *</small> <b>OP Number</b> :CINROPV219732 <b>Bill No</b> :CINR-OCR-94149 <b>Date</b> : 23.02.2024 07:58
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Sno	Service Type/ServiceName	Department
1	ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY2324	
<del>1</del>	<del>URINE GLUCOSE(FASTING)</del>	
<del>2</del>	<del>GAMMA GLUTAMYL TRANSFERASE (GGT)</del>	
<del>3</del>	<del>SONO MAMOGRAPHY - SCREENING</del> / <i>Niraman</i> ✓	
<del>4</del>	<del>HbA1c, GLYCATED HEMOGLOBIN</del>	
<del>5</del>	<del>2 D ECHO</del> - <i>9 9 AM</i>	
<del>6</del>	<del>LIVER FUNCTION TEST (LFT)</del>	
<del>7</del>	<del>X-RAY CHEST PA</del>	
<del>8</del>	<del>GLUCOSE, FASTING</del>	
<del>9</del>	<del>HEMOGRAM + PERIPHERAL SMEAR</del>	
10	ENT CONSULTATION	
11	FITNESS BY GENERAL PHYSICIAN	
12	GYNAECOLOGY CONSULTATION ✓	
13	DIET CONSULTATION	
<del>14</del>	<del>COMPLETE URINE EXAMINATION</del>	
<del>15</del>	<del>URINE GLUCOSE(POST PRANDIAL)</del>	
<del>16</del>	<del>PERIPHERAL SMEAR</del>	
<del>17</del>	<del>ECG</del>	
<del>18</del>	<del>BLOOD GROUP ABO AND RH FACTOR</del>	
<del>19</del>	<del>LIPID PROFILE</del>	
<del>20</del>	<del>BODY MASS INDEX (BMI)</del>	
21	LBC PAP TEST- PAPSURE ✓	
<del>22</del>	<del>OPHTHAL BY GENERAL PHYSICIAN</del>	
<del>23</del>	<del>RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)</del>	
<del>24</del>	<del>ULTRASOUND - WHOLE ABDOMEN</del>	
<del>25</del>	<del>THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)</del>	
<del>26</del>	<del>DENTAL CONSULTATION</del>	
<del>27</del>	<del>GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL)</del>	



Date HOSPITALS : 23-02-2024  
MR NO : CINR.0000163122

Department : GENERAL  
Doctor :

Name : Mrs. Sujatha

Registration No :

Age/ Gender : 53 Y / Female

Qualification :

Consultation Timing: 07:58

Height : 154cm	Weight : 101.4kg	BMI : 42.6 kg/m <sup>2</sup>	Waist Circum : 122cm
Temp : 98.6	Pulse : 67 bpm	Resp : 18cp	B.P : 150/100 mmHg

General Examination / Allergies  
History

Clinical Diagnosis & Management Plan

Feb 23/2024 53 yrs : Myxoid Comp - Jan 28<sup>th</sup> 2024  
 P22. MVD P E  
 LBC pap smear PA - soft MTD  
 Ps - ex healthy  
 Adv obese  
 CA 125 CEA  
 Perimenopause  
 Pbs Calcimax Total — (1)  
 food in water

Follow up date:

Doctor Signature

**OPHTHAL PRESCRIPTION**

PATIENT NAME: Mrs Sujatha.

DATE: 23/2/24

UHID NO: 163122

AGE: 53

OPTOMETRIST NAME: Ms. Swathi

GENDER: ♀

This is to certify that I have examined

years and findings of his/her eye examination are as follows,

	RIGHT EYE				LEFT EYE			
	SPH	CYL	AXIS	BCVA	SPH	CYL	AXIS	BCVA
Distance								
Add								

PD - RE: 31.2 - LE: 31.5 -

Colour Vision: normal (BB)

Remarks: cataract on you - no chile up / -

  
Apollo clinic Indiranagar

NAME: MRS SUJATHA	AGE/SEX: 53/F	OP NUMBER: 163122
Ref By : SELF	DATE: 23-02-2024	

**M mode and doppler measurements:**

CM	CM	M/sec	
AO: 2.2	IVS(D): 1.1	MV: E Vel: 0.7	A Vel : 0.6
LA: 2.9	LVIDD(D): 4.1	AV Peak: 1.1	
	LVPW(D): 1.1	PV peak: 1.1	
	IVS(S): 1.2		
	LVID(S): 2.4		
	LVEF: 60%		
	LVPW(S): 1.3		

**Descriptive findings:**

Left Ventricle	Normal
Right Ventricle:	Normal
Left Atrium:	Normal
Right Atrium:	Normal
Mitral Valve:	Normal
Aortic Valve:	Normal
Tricuspid Valve:	Normal
IAS:	Normal
IVS:	Normal
Pericardium:	Normal

	Normal
Others	---

**IMPRESSION :**

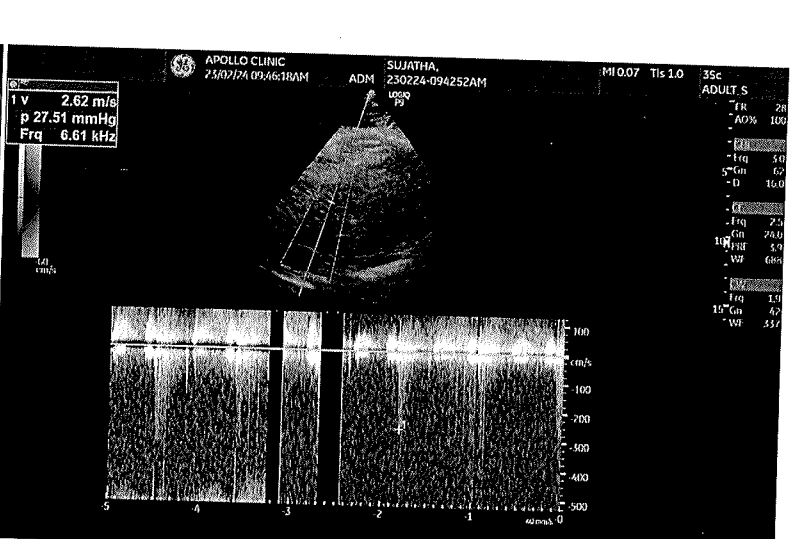
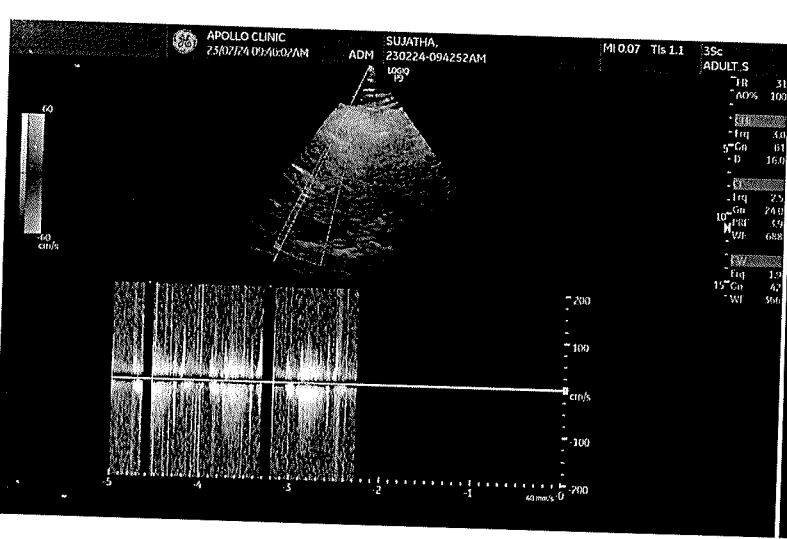
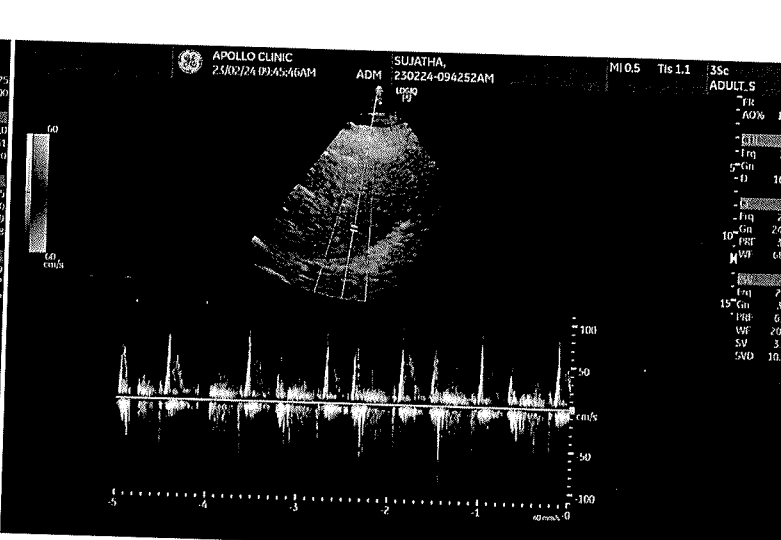
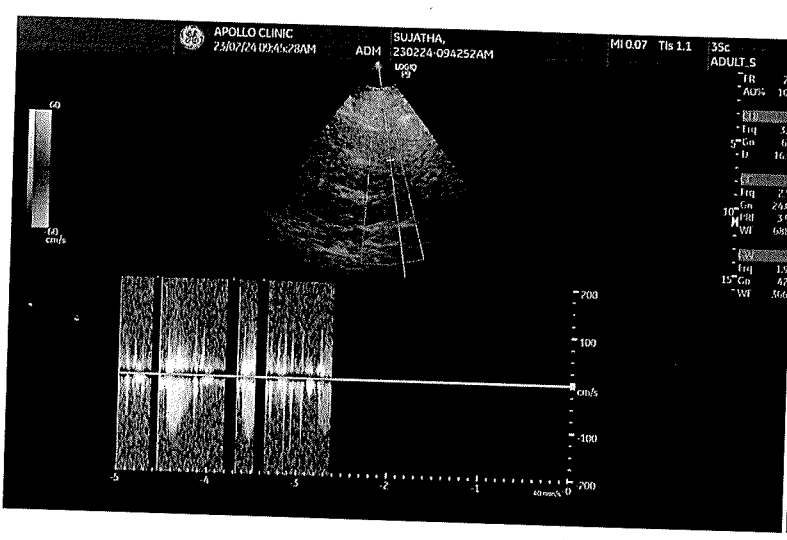
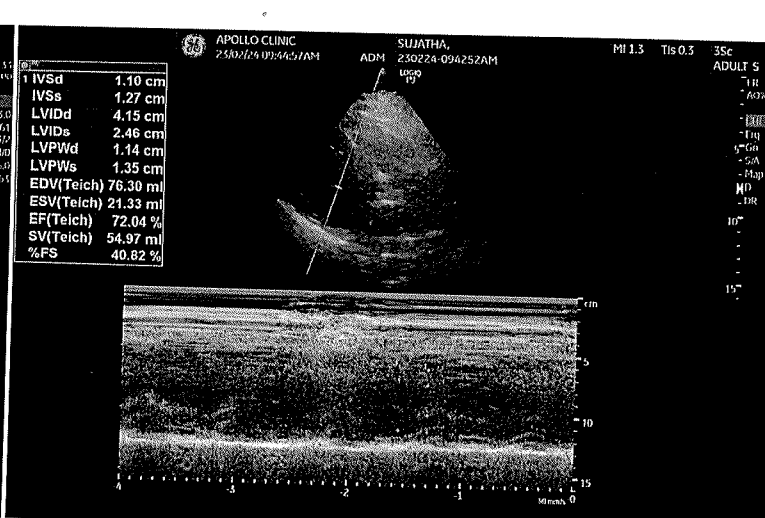
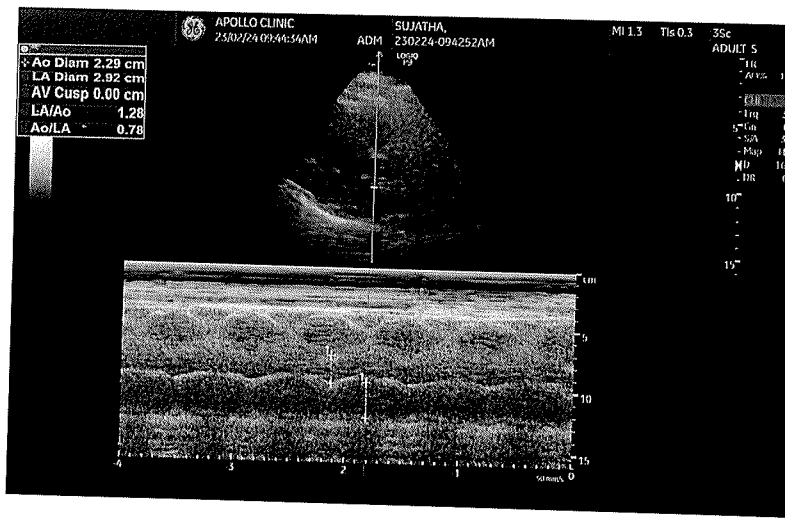
- Normal cardiac chamber and valves
- No Regional wall motion abnormality
- Normal PA Pressure
- No clot/vegetation/pericardial effusion
- Normal LV systolic function - LVEF= 60%

**DR ROCKEY KATHERIA MD, DM**

**CONSULTANT CARDIOLOGIST**



**Dr. ROCKEY KATHERIA**  
MBBS, MD, DM(Cardio)  
Consultant Cardiologist  
KMC Reg No. 94738  
Apollo Clinic



Mrs sujatha  
ID: 163122

23.02.2024 10:31:38  
APOLLO CLINIC  
INDIRANAGAR  
BANGALORE

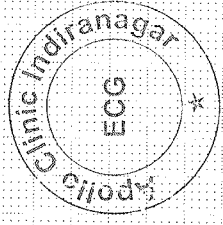
Female

QRS : 62 ms  
QT / QTcBaz : 352 / 371 ms  
PR : 138 ms  
P : 82 ms  
RR / PP : 900 / 895 ms  
P / QRS / T : 47 / 27 / 52 degrees

Arrow CC

Location:  
Room:  
Order Number:  
Indication:  
Medication 1:  
Medication 2:  
Medication 3:

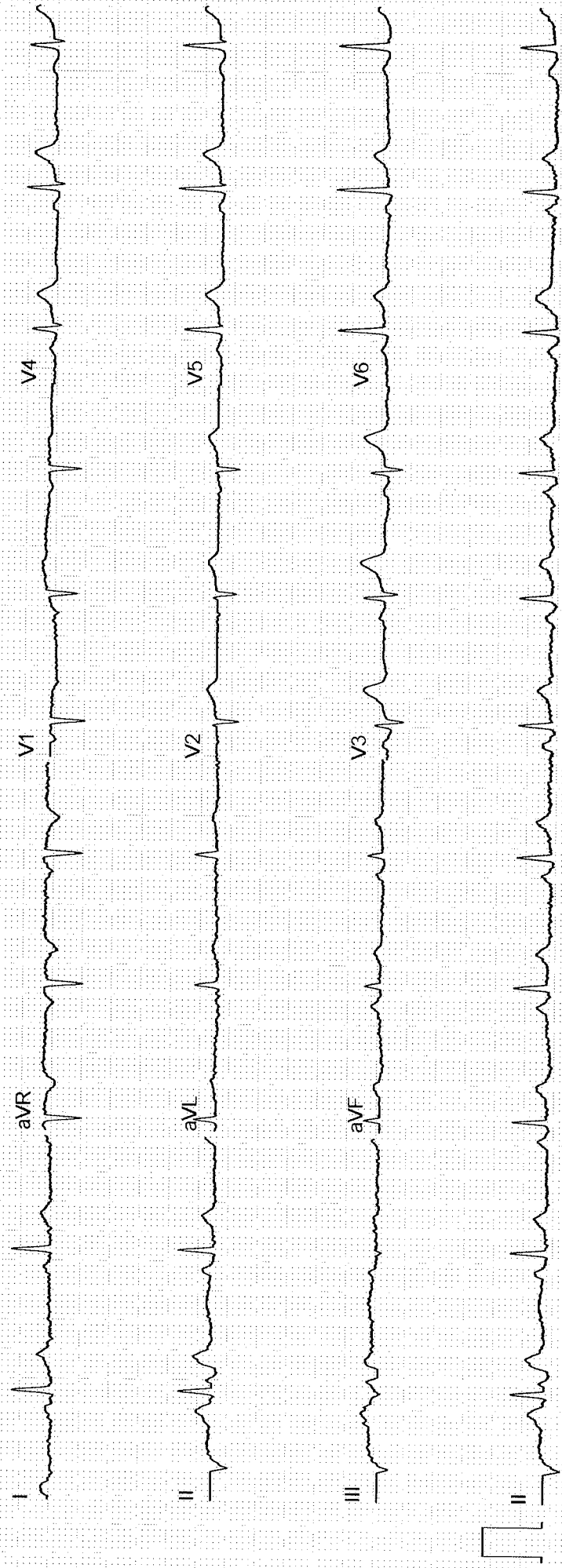
Technician:  
Ordering Ph:  
Referring Ph:  
Attending Ph:



*[Handwritten signature]*

*[Handwritten signature]*  
DR.M. SUDHAKAR RAO  
M.B.B.S., D.M. (Cardiology), FACC, FESC, FSCAI  
KMC, Reg. No. CF 6004021434  
Apollo Clinic

67 bpm  
-- / -- mmHg



# Breast Health Report

## Thermalytix<sup>®</sup> 180

Patient ID: CINR\_163122

### General Details

Name:	Sujatha	Centre:	Apollo Clinic Indiranagar
Age:	53	Report Generation Date:	Feb 23, 2024, 11:57 AM
Gender:	Female	Scan Date:	Feb 23, 2024, 10:41 AM

### Clinical Details

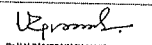
LMP:	20/01/2024	Hormone Therapy:	None.
Pregnant/Lactating:	No.	Number of children breast-fed:	2
Patient Complaints:	None		
Cancer History:	No patient cancer history. No family cancer history.		
Surgeries:	None.		

### Thermalytix Scores

Body Temperature:	28.66 °C to 34.73 °C		
Hotspot Score:	0.1	Hotspot Symmetry:	100 %
Areolar Score:	0.02	Areolar Symmetry:	100 %
Vascular Score:	0.42	Ensemble Score:	0.11
<b>B Score:</b>	<b>1</b>		

### Thermal Analysis

Thermal Parameters	Right Breast	Left Breast
Number of Hotspots	0	0
Extent	N/A	N/A
Hotspot Shape	N/A	N/A
Temperature	N/A	N/A
Areolar Hotspot Detected	No	No
Lump Detected	N/A	N/A



Dr. N. Sampathkumar, M.D., M.Ch.  
 CA, Thermography (ACCT, USA)  
 IMAGING SPECIALIST

Disclaimer : Thermalytix<sup>®</sup> does not replace mammography or any other anatomical imaging test. It is not intended for use by individuals for self-diagnosis or for self-evaluation. This report requires clinical correlation and should be presented to a Qualified Healthcare Professional to determine the nature of the appropriate follow-up and course of action/evaluation.



## Breast Health Report

### Thermalytix® 180

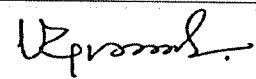
Patient ID: CINR\_163122

#### Impression

Right Breast	No focal thermal increase is seen. Warm thermal pattern is noted.
Left Breast	No focal thermal increase is seen. No significant thermal pattern is seen.

#### Recommendation

Normal Thermal Scan.



Dr.H.V.RAMPRAKASH MBBS.DMRD.,MD.  
Cli.Thermography (ACCT,USA)  
IMAGING SPECIALIST

Write to [support@niramai.com](mailto:support@niramai.com) for detailed report. Additional charges may apply.

## Breast Health Report

### Thermalytix<sup>®</sup> 180

Patient ID: CINR\_163122

#### About Niramai

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##### Indication of Use :

Thermalytix<sup>®</sup> is a medical device intended to be used for screening and early diagnosis of breast cancer in women above 18 years in a hospital, healthcare practitioner facilities, or in an environment where patient care is provided by healthcare personnel. It can also be used as an adjunct to screening mammography or breast ultrasound. Women who are found to be suspicious for malignancy by Thermalytix<sup>®</sup> should be referred for a confirmatory diagnostic test. Primary diagnostic and patient management decisions are made by a qualified healthcare professional.

##### Intended Use :

Thermalytix<sup>®</sup> is a medical device for the detection of breast lesions with suspected malignancy. The device is intended to assist a trained healthcare professional in risk assessment, screening, and early diagnosis of breast cancer in both asymptomatic and symptomatic women.



**No Touch**



**No Pain**



**No See**



**No Radiation**

This report has been generated using novel algorithm developed by Niramai which uses artificial intelligence for quantitative analysis of thermal images.

NIRAMAI is a health tech company with a mission to save lives by enabling early detection of breast cancer. Thermalytix<sup>®</sup> is an AI-based computer-aided diagnostic engine developed by Niramai that detects breast abnormalities in privacy aware manner.

Thermalytix<sup>®</sup> uses a high resolution thermal sensing device and an intelligent software solution for analysing thermal images for reliable, early and accurate breast cancer screening.

To know more about Thermalytix<sup>®</sup> <https://www.niramai.com/about/thermalytix/>

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 spouse of our employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS OF HEALTH CHECK UP BENEFICIARY	
NAME	SUJATHA
DATE OF BIRTH	06-05-1970
PROPOSED DATE OF HEALTH CHECKUP FOR EMPLOYEE SPOUSE	23-02-2024
BOOKING REFERENCE NO.	23M159793100090428S
SPOUSE DETAILS	
EMPLOYEE NAME	MR. M MUNIRAJU
EMPLOYEE EC NO.	159793
EMPLOYEE DESIGNATION	DAFTARY
EMPLOYEE PLACE OF WORK	BANGALORE,BRIGADE ROAD
EMPLOYEE BIRTHDATE	11-10-1965

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 **13-02-2024** till **31-03-2024**.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's spouse 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
<b>Lipid Profile</b>	<b>Lipid Profile</b>
Total Cholesterol	Total Cholesterol
HDL	HDL
LDL	LDL
VLDL	VLDL
Triglycerides	Triglycerides
HDL / LDL ratio	HDL / LDL ratio
<b>Liver Profile</b>	<b>Liver Profile</b>
AST	AST
ALT	ALT
GGT	GGT
Bilirubin (total, direct, indirect)	Bilirubin (total, direct, indirect)
ALP	ALP
Proteins (T, Albumin, Globulin)	Proteins (T, Albumin, Globulin)
<b>Kidney Profile</b>	<b>Kidney Profile</b>
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
<b>General Tests</b>	<b>General Tests</b>
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

**Fwd: Health Check up Booking  
Request(bobS10791), Beneficiary  
Code-139083**

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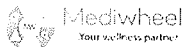
**From:** kavya sai m [kavyasai145@gmail.com](mailto:kavyasai145@gmail.com)  
**To:** Brigade Road Branch, Bangalore,  
Karnataka [BRIGAD@bankofbaroda.com](mailto:BRIGAD@bankofbaroda.com)  
**Sent:** Wednesday, 21 February, 16:14

You don't often get email from  
[kavyasai145@gmail.com](mailto:kavyasai145@gmail.com). [Learn why this is important](#)

HE SENDER.

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

**From:** **Mediwheel** <[wellness@mediwheel.in](mailto:wellness@mediwheel.in)>  
**Date:** Wed, 21 Feb, 2024, 3:54 pm  
**Subject:** Health Check up Booking  
Request(bobS10791), Beneficiary Code-  
139083  
**To:** <[kavyasai145@gmail.com](mailto:kavyasai145@gmail.com)>  
**Cc:** <[customercare@mediwheel.in](mailto:customercare@mediwheel.in)>



[011-41195959](tel:011-41195959)

Dear MR. M MUNIRAJU,

We have received your booking request for the following health checkup, please upload HRM Letter as soon as possible.

Upload HRM Letter

**Booking Date** : 21-02-2024

**User Package Name** : Mediwheel Full Body Health Checkup Female Above 40



भारत सरकार  
भारत सरकार



ಭಾರತ ಸರ್ಕಾರ  
Government of India

ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ  
Unique Identification Authority of India

ನೋಂದಣಿ ಸಂಖ್ಯೆ / Enrolment No.: 4050/00106/03735

To  
ಸುಜಾತಾ  
Sujatha  
C/O Muniraju,  
374,  
Near Lakshminarayana Temple Road,  
Kullappa Layout,  
VTC: Bangalore North,  
PO: Sahakaranagar P.o,  
Sub District: Bangalore North,  
District: Bengaluru,  
State: Karnataka,  
PIN Code: 560092,  
Mobile: 8971511721

Signature valid

Digitally signed by  
UNIQUE IDENTIFICATION  
AUTHORITY OF INDIA OC  
Date: 2012.08.14 24:38  
GMT+05:30



ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :  
9437 4840 9394

VID : 9102 6223 1681 0737

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



ಭಾರತ ಸರ್ಕಾರ  
Government of India

ಸುಜಾತಾ  
Sujatha  
ಜನ್ಮ ದಿನಾಂಕ/DOB: 06/05/1970  
ಸ್ತ್ರೀ/FEMALE

Aadhaar no. issued: 25/01/2012



ಆಧಾರ್ ಗುರುತಿನ ಪುರಾವೆಯಾಗಿದೆ, ವೌರತ್ಯ ಅಥವಾ ಜನ್ಮ ದಿನಾಂಕದ ಪುರಾವೆ  
ಅಲ್ಲ. ಇದನ್ನು ಆನ್‌ಲೈನ್ ದೃಢೀಕರಣ ಅಥವಾ QR ಕೋಡ್ / ಆಕ್ಸೆಸ್ XML  
ಸ್ವಲ್ಪ ನಿರ್ವಹಣೆಗೆ ಮಾತ್ರ ಬಳಸಬೇಕು.  
Aadhaar is proof of identity, not of citizenship or date of  
birth. It should be used only with verification (online  
authentication or scanning of QR code / offline XML)

9437 4840 9394

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು

**Patient Name** : Mrs. Sujatha

**Age/Gender** : 53 Y/F

**UHID/MR No.** : CINR.0000163122

**OP Visit No** : CINROPV219732

**Sample Collected on** :

**Reported on** : 23-02-2024 20:01

**LRN#** : RAD2244885

**Specimen** :

**Ref Doctor** : SELF

**Emp/Auth/TPA ID** : 9008723634

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**DEPARTMENT OF RADIOLOGY**

---

**SONO MAMMOGRAPHY - SCREENING**

**THERMAL SONO MAMMOGRAPHY DONE.**



**Dr. DHANALAKSHMI B**  
MBBS, DMRD  
Radiology

**Patient Name** : Mrs. Sujatha

**Age/Gender** : 53 Y/F

**UHID/MR No.** : CINR.0000163122

**OP Visit No** : CINROPV219732

**Sample Collected on** :

**Reported on** : 23-02-2024 16:59

**LRN#** : RAD2244885

**Specimen** :

**Ref Doctor** : SELF

**Emp/Auth/TPA ID** : 9008723634

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**DEPARTMENT OF RADIOLOGY**

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**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. RAMESH G**  
**MBBS DMRD**  
**RADIOLOGY**



<b>Patient Name</b>	: Mrs. Sujatha	<b>Age/Gender</b>	: 53 Y/F
<b>UHID/MR No.</b>	: CINR.0000163122	<b>OP Visit No</b>	: CINROPV219732
<b>Sample Collected on</b>	:	<b>Reported on</b>	: 23-02-2024 11:49
<b>LRN#</b>	: RAD2244885	<b>Specimen</b>	:
<b>Ref Doctor</b>	: SELF		
<b>Emp/Auth/TPA ID</b>	: 9008723634		

## DEPARTMENT OF RADIOLOGY

### ULTRASOUND - WHOLE ABDOMEN

**LIVER:** Appears normal in size, shape and echopattern **mildly increased**. No focal parenchymal lesions identified. No evidence of intra/extrahepatic biliary tree dilatation noted. Portal vein appears to be of normal size.

**GALLBLADDER:** Moderately distended.

**SPLEEN:** Appears normal in size, shape and echopattern. No focal parenchymal lesions identified.

**PANCREAS:** Obscured by bowel gas. However, the visualized portion appear normal.

**KIDNEYS:** Both kidneys appear normal in size, shape and echopattern. Corticomedullary differentiation appears maintained. No evidence of calculi or hydronephrosis on either side.

Right kidney measuring 9.8x3.9 cm.

Left kidney measuring 9.9x4.7 cm.

**URINARY BLADDER:** Distended and appears normal. No evidence of abnormal wall thickening noted.

**UTERUS:** Atrophic.

**OVARIES:** Mildly atrophic.

No free fluid is seen.

#### **IMPRESSION:**

**GRADE I FATTY LIVER.**

**Dr. RAMESH G**  
**MBBS DMRD**  
RADIOLOGY

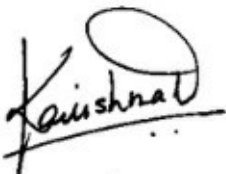
Patient Name : Mrs.SUJATHA	Collected : 23/Feb/2024 08:06AM
Age/Gender : 53 Y 8 M 18 D/F	Received : 23/Feb/2024 11:17AM
UHID/MR No : CINR.0000163122	Reported : 23/Feb/2024 12:13PM
Visit ID : CINROPV219732	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9008723634	

DEPARTMENT OF HAEMATOLOGY

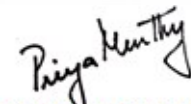
ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>HEMOGRAM , WHOLE BLOOD EDTA</b>				
HAEMOGLOBIN	11.9	g/dL	12-15	Spectrophotometer
PCV	35.40	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.33	Million/cu.mm	3.8-4.8	Electrical Impedance
MCV	81.8	fL	83-101	Calculated
MCH	27.5	pg	27-32	Calculated
MCHC	33.6	g/dL	31.5-34.5	Calculated
R.D.W	13.9	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	7,660	cells/cu.mm	4000-10000	Electrical Impedance
<b>DIFFERENTIAL LEUCOCYtic COUNT (DLC)</b>				
NEUTROPHILS	51.2	%	40-80	Electrical Impedance
LYMPHOCYTES	30.4	%	20-40	Electrical Impedance
EOSINOPHILS	8.6	%	1-6	Electrical Impedance
MONOCYTES	9.5	%	2-10	Electrical Impedance
BASOPHILS	0.3	%	<1-2	Electrical Impedance
<b>ABSOLUTE LEUCOCYTE COUNT</b>				
NEUTROPHILS	3921.92	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2328.64	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	658.76	Cells/cu.mm	20-500	Calculated
MONOCYTES	727.7	Cells/cu.mm	200-1000	Calculated
BASOPHILS	22.98	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	1.68		0.78- 3.53	Calculated
PLATELET COUNT	307000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	31	mm at the end of 1 hour	0-20	Modified Westgren method
<b>PERIPHERAL SMEAR</b>				

RBCs: are normocytic normochromic



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SIN No:BED240046312

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Patient Name : Mrs.SUJATHA	Collected : 23/Feb/2024 08:06AM
Age/Gender : 53 Y 8 M 18 D/F	Received : 23/Feb/2024 11:17AM
UHID/MR No : CINR.0000163122	Reported : 23/Feb/2024 12:13PM
Visit ID : CINROPV219732	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9008723634	

### DEPARTMENT OF HAEMATOLOGY

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

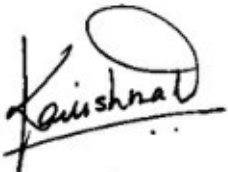
WBCs: are normal in total number with relative increase in eosinophils.

PLATELETS: appear adequate in number.

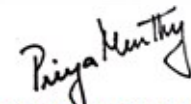
HEMOPARASITES: negative

**IMPRESSION: NORMOCYTIC NORMOCHROMIC ANEMIA WITH RELATIVE EOSINOPHILIA.**

**Kindly correlate clinically.**



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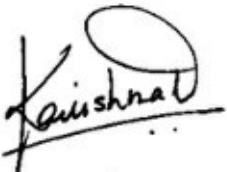
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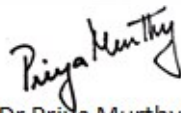
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**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY2324**

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA</b>				
BLOOD GROUP TYPE	A			Microplate Hemagglutination
Rh TYPE	Positive			Microplate Hemagglutination



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Patient Name : Mrs.SUJATHA	Collected : 23/Feb/2024 08:06AM
Age/Gender : 53 Y 8 M 18 D/F	Received : 23/Feb/2024 11:41AM
UHID/MR No : CINR.0000163122	Reported : 23/Feb/2024 01:31PM
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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
GLUCOSE, FASTING , NAF PLASMA	113	mg/dL	70-100	HEXOKINASE

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.

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	97	mg/dL	70-140	HEXOKINASE

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.

Test Name	Result	Unit	Bio. Ref. Range	Method
HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA				
HBA1C, GLYCATED HEMOGLOBIN	6.5	%		HPLC

Page 4 of 15



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ESTIMATED AVERAGE GLUCOSE (eAG)	140	mg/dL	Calculated
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**Comment:**


Reference Range as per American Diabetes Association (ADA) 2023 Guidelines:

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

**Note:** Dietary preparation or fasting is not required.

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



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

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>LIPID PROFILE , SERUM</b>				
TOTAL CHOLESTEROL	190	mg/dL	<200	CHO-POD
TRIGLYCERIDES	105	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	59	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	<b>132</b>	mg/dL	<130	Calculated
LDL CHOLESTEROL	<b>110.5</b>	mg/dL	<100	Calculated
VLDL CHOLESTEROL	21	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.23		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 400 mg/dL. When Triglycerides are more than 400 mg/dL LDL cholesterol is a direct measurement.




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Test Name	Result	Unit	Bio. Ref. Range	Method
<b>LIVER FUNCTION TEST (LFT) , SERUM</b>				
BILIRUBIN, TOTAL	0.77	mg/dL	0.3–1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.13	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.64	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	10	U/L	<35	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	12.0	U/L	<35	IFCC
ALKALINE PHOSPHATASE	64.00	U/L	30-120	IFCC
PROTEIN, TOTAL	7.50	g/dL	6.6-8.3	Biuret
ALBUMIN	3.78	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	<b>3.72</b>	g/dL	2.0-3.5	Calculated
A/G RATIO	1.02		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 > 1In Alcoholic Liver Disease AST: ALT usually >2. This ratio is also seen to be increased in NAFLD, Wilson's diseases, Cirrhosis, but the increase is usually not >2.

**2. Cholestatic Pattern:**

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

**3. Synthetic function impairment:**

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



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Test Name	Result	Unit	Bio. Ref. Range	Method
<b>RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM</b>				
CREATININE	0.72	mg/dL	0.51-0.95	Jaffe's, Method
UREA	29.40	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	13.7	mg/dL	8.0 - 23.0	Calculated
URIC ACID	3.89	mg/dL	2.6-6.0	Uricase PAP
CALCIUM	9.20	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	3.87	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	<b>135</b>	mmol/L	136-146	ISE (Indirect)
POTASSIUM	5.1	mmol/L	3.5-5.1	ISE (Indirect)
CHLORIDE	103	mmol/L	101-109	ISE (Indirect)



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

SIN No:SE04638059

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**Apollo Health and Lifestyle Limited** (CIN - U85110TG2000PLC115819)  
Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016 |  
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APOLLO CLINICS NETWORK

Telangana: Hyderabad (AS Rao Nagar | Chanda Nagar | Kondapur | Nallakunta | Nizampet | Manikonda | Uppal ) Andhra Pradesh: Vizag (Seethamma Peta) Karnataka: Bangalore (Basavanagudi | Bellandur | Electronics City | Fraser Town | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli | Koramangala | Sarjapur Road) Mysore (VV Mohalla) Tamilnadu: Chennai (Annanagar | Kotturpuram | Mogappair | T Nagar | Valasaravakkam | Velachery ) Maharashtra: Pune (Aundh | Nigdi Pradhikaran | Viman Nagar | Wanowrie) Uttar Pradesh: Ghaziabad (Indrapuram) Gujarat: Ahmedabad (Satellite) Punjab: Amritsar (Court Road) Haryana: Faridabad (Railway Station Road)

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Karnataka - 560034



**1860 500 7788**  
www.apolloclinic.com

Patient Name : Mrs.SUJATHA	Collected : 23/Feb/2024 08:06AM
Age/Gender : 53 Y 8 M 18 D/F	Received : 23/Feb/2024 11:49AM
UHID/MR No : CINR.0000163122	Reported : 23/Feb/2024 12:34PM
Visit ID : CINROPV219732	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9008723634	

**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
<b>GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM</b>	16.00	U/L	<38	IFCC



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

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Patient Name : Mrs.SUJATHA	Collected : 23/Feb/2024 08:06AM
Age/Gender : 53 Y 8 M 18 D/F	Received : 23/Feb/2024 11:50AM
UHID/MR No : CINR.0000163122	Reported : 23/Feb/2024 01:39PM
Visit ID : CINROPV219732	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9008723634	

DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - 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)	0.9	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	8.50	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	<b>7.644</b>	µIU/mL	0.34-5.60	CLIA

Comment:

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

- 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.SHIVARAJA SHETTY  
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CONSULTANT BIOCHEMIST

SIN No:SPL24030353

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APOLLO CLINICS NETWORK

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Karnataka- 560034



**1860 500 7788**  
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Patient Name : Mrs.SUJATHA	Collected : 23/Feb/2024 08:06AM
Age/Gender : 53 Y 8 M 18 D/F	Received : 23/Feb/2024 11:50AM
UHID/MR No : CINR.0000163122	Reported : 23/Feb/2024 01:39PM
Visit ID : CINROPV219732	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9008723634	

DEPARTMENT OF IMMUNOLOGY

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



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

SIN No:SPL24030353

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Neeladri Nagar, Electronic city, Bengaluru,  
Karnataka- 560034

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Patient Name : Mrs.SUJATHA	Collected : 23/Feb/2024 08:02AM
Age/Gender : 53 Y 8 M 18 D/F	Received : 23/Feb/2024 01:07PM
UHID/MR No : CINR.0000163122	Reported : 23/Feb/2024 03:39PM
Visit ID : CINROPV219732	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9008723634	

DEPARTMENT OF CLINICAL PATHOLOGY

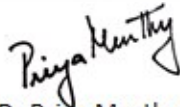
ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>COMPLETE URINE EXAMINATION (CUE) , URINE</b>				
<b>PHYSICAL EXAMINATION</b>				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pH	6.0		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	1.005		1.002-1.030	Bromothymol Blue
<b>BIOCHEMICAL EXAMINATION</b>				
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	MODIFIED EHRlich REACTION
BLOOD	NEGATIVE		NEGATIVE	Peroxidase
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	LEUCOCYTE ESTERASE
<b>CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY</b>				
PUS CELLS	2-3	/hpf	0-5	Microscopy
EPITHELIAL CELLS	3-4	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY

Page 13 of 15



Dr. Chinki Anupam  
M.B.B.S.,M.D(Pathology)  
Consultant Pathologist



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



SIN No:UR2288747

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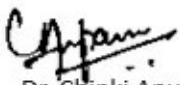
Patient Name : Mrs.SUJATHA	Collected : 23/Feb/2024 08:02AM
Age/Gender : 53 Y 8 M 18 D/F	Received : 23/Feb/2024 11:44AM
UHID/MR No : CINR.0000163122	Reported : 23/Feb/2024 03:32PM
Visit ID : CINROPV219732	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9008723634	

**DEPARTMENT OF CLINICAL PATHOLOGY**

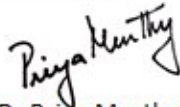
**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY2324**

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

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



Dr. Chinki Anupam  
M.B.B.S.,M.D(Pathology)  
Consultant Pathologist



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



SIN No:UF010665

This test has been performed at Apollo Health & Lifestyle Ltd, RRL BANGALORE Laboratory

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**APOLLO CLINICS NETWORK**

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Neeladri Nagar, Electronic city, Bengaluru,  
Karnataka - 560034

 **1860 500 7788**  
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Patient Name : Mrs.SUJATHA	Collected : 23/Feb/2024 01:10PM
Age/Gender : 53 Y 8 M 18 D/F	Received : 25/Feb/2024 12:23PM
UHID/MR No : CINR.0000163122	Reported : 26/Feb/2024 06:09PM
Visit ID : CINROPV219732	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9008723634	

DEPARTMENT OF CYTOLOGY

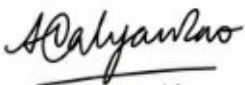
LBC PAP TEST (PAPSURE) , CERVICAL BRUSH SAMPLE

	CYTOLOGY NO.	3836/24
<b>I</b>	<b>SPECIMEN</b>	
<b>a</b>	SPECIMEN ADEQUACY	ADEQUATE
<b>b</b>	SPECIMEN TYPE	LIQUID-BASED PREPARATION (LBC)
	SPECIMEN NATURE/SOURCE	CERVICAL SMEAR
<b>c</b>	ENDOCERVICAL-TRANSFORMATION ZONE	ABSENT
<b>d</b>	COMMENTS	SATISFACTORY FOR EVALUATION
<b>II</b>	<b>MICROSCOPY</b>	Superficial and intermediate squamous epithelial cells with benign morphology.  Inflammatory cells, predominantly neutrophils.  Negative for intraepithelial lesion/malignancy
<b>III</b>	<b>RESULT</b>	
<b>a</b>	<b>EPITHEIAL CELL</b>	
	SQUAMOUS CELL ABNORMALITIES	NOT SEEN
	GLANDULAR CELL ABNORMALITIES	NOT SEEN
<b>b</b>	<b>ORGANISM</b>	NIL
<b>IV</b>	<b>INTERPRETATION</b>	NEGATIVE FOR INTRAEPITHELIAL LESION OR MALIGNANCY

Pap Test is a screening test for cervical cancer with inherent false negative results. Regular screening and follow-up is recommended (Bethesda-TBS-2014) revised

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

Result/s to Follow:  
PERIPHERAL SMEAR



Dr.A.Kalyan Rao  
M.B.B.S.,M.D(Pathology)  
Consultant Pathologist



SIN No:CS074969

This test has been performed at Apollo Health & Lifestyle Ltd, Global Reference Laboratory,Hyderabad

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