

| | |
|--|--|
| Patient Name : Mrs.KOMAL JAGMOHAN PANWAR | Collected : 10/Jun/2023 02:04PM |
| Age/Gender : 30 Y 0 M 22 D/F | Received : 10/Jun/2023 06:20PM |
| UHID/MR No : CPIM.0000059616 | Reported : 10/Jun/2023 06:30PM |
| Visit ID : CPIMOPV145234 | Status : Final Report |
| Ref Doctor : Dr.SELF | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : bobS40402. | |

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



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DEPARTMENT OF HAEMATOLOGY

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|-----------|--------|------|-----------------|--------|
|-----------|--------|------|-----------------|--------|

HEMOGRAM , WHOLE BLOOD-EDTA

| | | | | |
|-----------------------------|-------|---------------|------------|--------------------------------|
| HAEMOGLOBIN | 12.8 | g/dL | 12-15 | Spectrophotometer |
| PCV | 38.50 | % | 36-46 | Electronic pulse & Calculation |
| RBC COUNT | 4.02 | Million/cu.mm | 3.8-4.8 | Electrical Impedence |
| MCV | 95.7 | fL | 83-101 | Calculated |
| MCH | 31.8 | pg | 27-32 | Calculated |
| MCHC | 33.3 | g/dL | 31.5-34.5 | Calculated |
| R.D.W | 14.5 | % | 11.6-14 | Calculated |
| TOTAL LEUCOCYTE COUNT (TLC) | 7,140 | cells/cu.mm | 4000-10000 | Electrical Impedence |

DIFFERENTIAL LEUCOCYTIC COUNT (DLC)

| | | | | |
|-------------|------|---|-------|----------------------|
| NEUTROPHILS | 57.8 | % | 40-80 | Electrical Impedence |
| LYMPHOCYTES | 31.8 | % | 20-40 | Electrical Impedence |
| EOSINOPHILS | 0.6 | % | 1-6 | Electrical Impedence |
| MONOCYTES | 9.5 | % | 2-10 | Electrical Impedence |
| BASOPHILS | 0.3 | % | <1-2 | Electrical Impedence |

ABSOLUTE LEUCOCYTE COUNT

| | | | | |
|-------------|---------|-------------|-----------|----------------------|
| NEUTROPHILS | 4126.92 | Cells/cu.mm | 2000-7000 | Electrical Impedence |
| LYMPHOCYTES | 2270.52 | Cells/cu.mm | 1000-3000 | Electrical Impedence |
| EOSINOPHILS | 42.84 | Cells/cu.mm | 20-500 | Electrical Impedence |
| MONOCYTES | 678.3 | Cells/cu.mm | 200-1000 | Electrical Impedence |
| BASOPHILS | 21.42 | Cells/cu.mm | 0-100 | Electrical Impedence |

| | | | | |
|--------------------------------------|--------|-------------------------|---------------|----------------------|
| PLATELET COUNT | 240000 | cells/cu.mm | 150000-410000 | Electrical impedence |
| ERYTHROCYTE SEDIMENTATION RATE (ESR) | 5 | 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.

SIN No BFD230134010

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



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| Age/Gender : 30 Y 0 M 22 D/F | Received : 10/Jun/2023 06:20PM |
| UHID/MR No : CPIM.0000059616 | Reported : 10/Jun/2023 07:11PM |
| Visit ID : CPIMOPV145234 | Status : Final Report |
| Ref Doctor : Dr.SELF | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : bobS40402. | |

DEPARTMENT OF HAEMATOLOGY

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

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

| BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD-EDTA | | | | |
|--|----------|--|--|-----------------------------|
| BLOOD GROUP TYPE | A | | | Microplate Hemagglutination |
| Rh TYPE | Positive | | | Microplate Hemagglutination |



| | |
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| Age/Gender : 30 Y 0 M 22 D/F | Received : 10/Jun/2023 06:19PM |
| UHID/MR No : CPIM.0000059616 | Reported : 10/Jun/2023 10:09PM |
| Visit ID : CPIMOPV145234 | Status : Final Report |
| Ref Doctor : Dr.SELF | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : bobS40402. | |

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 | 101 | 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 HOURS , NAF PLASMA | 95 | 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.

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 |
|---|--------|-------|-----------------|------------|
| HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD-EDTA | 4.9 | % | | HPLC |
| ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD-EDTA | 94 | 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.

- A1C test should be performed at least two times a year in patients who are meeting treatment goals (and who have stable glycemic control).
- 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.
- 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



SIN No: PL10198378 PL1137335 ED1230054112

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

| | |
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| Age/Gender : 30 Y 0 M 22 D/F | Received : 10/Jun/2023 06:22PM |
| UHID/MR No : CPIM.0000059616 | Reported : 10/Jun/2023 06:45PM |
| Visit ID : CPIMOPV145234 | Status : Final Report |
| Ref Doctor : Dr.SELF | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : bobS40402. | |

DEPARTMENT OF BIOCHEMISTRY

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

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

LIPID PROFILE , SERUM

| | | | | |
|---------------------|-------|-------|--------|----------------------------|
| TOTAL CHOLESTEROL | 126 | mg/dL | <200 | CHO-POD |
| TRIGLYCERIDES | 69 | mg/dL | <150 | GPO-POD |
| HDL CHOLESTEROL | 57 | mg/dL | 40-60 | Enzymatic Immunoinhibition |
| NON-HDL CHOLESTEROL | 69 | mg/dL | <130 | Calculated |
| LDL CHOLESTEROL | 55.43 | mg/dL | <100 | Calculated |
| VLDL CHOLESTEROL | 13.88 | mg/dL | <30 | Calculated |
| CHOL / HDL RATIO | 2.21 | | 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.



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| UHID/MR No : CPIM.0000059616 | Reported : 10/Jun/2023 06:46PM |
| Visit ID : CPIMOPV145234 | Status : Final Report |
| Ref Doctor : Dr.SELF | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : bobS40402. | |

DEPARTMENT OF BIOCHEMISTRY

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

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

LIVER FUNCTION TEST (LFT) , SERUM

| | | | | |
|---------------------------------------|-------------|-------|---------|--------------------|
| BILIRUBIN, TOTAL | 1.43 | mg/dL | 0.3-1.2 | DPD |
| BILIRUBIN CONJUGATED (DIRECT) | 0.28 | mg/dL | <0.2 | DPD |
| BILIRUBIN (INDIRECT) | 1.15 | mg/dL | 0.0-1.1 | Dual Wavelength |
| ALANINE AMINOTRANSFERASE (ALT/SGPT) | 14.92 | U/L | <35 | IFCC |
| ASPARTATE AMINOTRANSFERASE (AST/SGOT) | 16.0 | U/L | <35 | IFCC |
| ALKALINE PHOSPHATASE | 51.84 | U/L | 30-120 | IFCC |
| PROTEIN, TOTAL | 7.89 | g/dL | 6.6-8.3 | Biuret |
| ALBUMIN | 4.96 | g/dL | 3.5-5.2 | BROMO CRESOL GREEN |
| GLOBULIN | 2.93 | g/dL | 2.0-3.5 | Calculated |
| A/G RATIO | 1.69 | | 0.9-2.0 | Calculated |



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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 |
|-----------|--------|------|-----------------|--------|
|-----------|--------|------|-----------------|--------|

RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM

| | | | | |
|-----------------------|--------------|--------|------------|--------------------------|
| CREATININE | 0.58 | mg/dL | 0.55-1.02 | Modified Jaffe, Kinetic |
| UREA | 15.66 | mg/dL | 17-43 | GLDH, Kinetic Assay |
| BLOOD UREA NITROGEN | 7.3 | mg/dL | 8.0 - 23.0 | Calculated |
| URIC ACID | 3.15 | mg/dL | 2.6-6.0 | Uricase PAP |
| CALCIUM | 9.90 | mg/dL | 8.8-10.6 | Arsenazo III |
| PHOSPHORUS, INORGANIC | 3.71 | mg/dL | 2.5-4.5 | Phosphomolybdate Complex |
| SODIUM | 138.49 | mmol/L | 136-146 | ISE (Indirect) |
| POTASSIUM | 4.4 | mmol/L | 3.5-5.1 | ISE (Indirect) |
| CHLORIDE | 102.86 | mmol/L | 101-109 | ISE (Indirect) |



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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 | 14.14 | U/L | <38 | IFCC |



| | |
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| UHID/MR No : CPIM.0000059616 | Reported : 10/Jun/2023 07:00PM |
| Visit ID : CPIMOPV145234 | Status : Final Report |
| Ref Doctor : Dr.SELF | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : bobS40402. | |

DEPARTMENT OF IMMUNOLOGY

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

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

THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM

| | | | | |
|-----------------------------------|-------|--------|------------|------|
| TRI-iodothyronine (T3, TOTAL) | 0.97 | ng/mL | 0.64-1.52 | CMIA |
| Thyroxine (T4, TOTAL) | 7.26 | µg/dL | 4.87-11.72 | CMIA |
| Thyroid Stimulating Hormone (TSH) | 1.880 | µIU/mL | 0.35-4.94 | CMIA |

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 |



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| UHID/MR No : CPIM.0000059616 | Reported : 10/Jun/2023 07:19PM |
| Visit ID : CPIMOPV145234 | Status : Final Report |
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| Emp/Auth/TPA ID : bobS40402. | |

DEPARTMENT OF CLINICAL PATHOLOGY

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

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

COMPLETE URINE EXAMINATION (CUE) , URINE

PHYSICAL EXAMINATION

| | | | | |
|--------------|-------------|--|-------------|------------------|
| COLOUR | PALE YELLOW | | PALE YELLOW | Visual |
| TRANSPARENCY | CLEAR | | CLEAR | Visual |
| pH | 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 | MODIFIED EHRlich REACTION |
| BLOOD | NEGATIVE | | NEGATIVE | Peroxidase |
| NITRITE | NEGATIVE | | NEGATIVE | Diazotization |
| LEUCOCYTE ESTERASE | NEGATIVE | | NEGATIVE | LEUCOCYTE ESTERASE |

CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY

| | | | | |
|------------------|--------|------|------------------|------------|
| PUS CELLS | 2 - 3 | /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 |




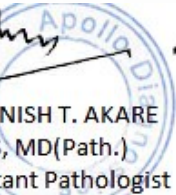
| | |
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| Patient Name : Mrs.KOMAL JAGMOHAN PANWAR | Collected : 10/Jun/2023 02:04PM |
| Age/Gender : 30 Y 0 M 22 D/F | Received : 10/Jun/2023 06:37PM |
| UHID/MR No : CPIM.0000059616 | Reported : 10/Jun/2023 07:56PM |
| Visit ID : CPIMOPV145234 | Status : Final Report |
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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) | NEGATIVE | | NEGATIVE | Dipstick |
| URINE GLUCOSE(FASTING) | NEGATIVE | | NEGATIVE | Dipstick |

*** End Of Report ***

DR. MANISH T. AKARE
M.B.B.S, MD(Path.)
Consultant Pathologist

Dr Sneha Shah
MBBS, MD (Pathology)
Consultant Pathologist




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



Patient Name : Mrs. KOMAL JAGMOHAN PANWAR

Age/Gender : 30 Y/F

UHID/MR No. : CPIM.0000059616

OP Visit No : CPIMOPV145234

Sample Collected on :

Reported on : 10-06-2023 18:27

LRN# : RAD2018802

Specimen :

Ref Doctor : SELF

Emp/Auth/TPA ID : bobS40402.

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Observation:-

Both lung fields are clear.

Both C-P angles are clear.

Cardiac size appear normal.

Hila and pulmonary vessels are within normal limits.

Both the domes of diaphragm are normal.

Thoracic cage and soft tissues are within normal limits.

Impression

Study is within normal limits.



Dr. KIRAN PRALHAD SUDHARE
MBBS, DMRD
Radiology

Patient Name : Mrs. KOMAL JAGMOHAN PANWAR

Age/Gender : 30 Y/F

UHID/MR No. : CPIM.0000059616

OP Visit No : CPIMOPV145234

Sample Collected on :

Reported on : 10-06-2023 09:36

LRN# : RAD2018802

Specimen :

Ref Doctor : SELF

Emp/Auth/TPA ID : bobS40402.

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

Liver appears normal in size and echotexture. No focal lesion is seen. PV and CBD normal. No dilatation of the intrahepatic biliary radicals.

Gall bladder is well 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. Splenic 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 the kidneys appear normal in size, shape and echopattern. Cortical thickness and CM differentiation are maintained. No calculus / hydronephrosis seen on either side.

Urinary Bladder is well distended and appears normal. No evidence of any wall thickening or abnormality. No evidence of any intrinsic or extrinsic bladder abnormality detected.

Uterus appears normal in size. It shows normal shape & echo pattern. Endometrial echo-complex appears normal and measures 14.1 mm. No intra/extra uterine gestational sac seen.

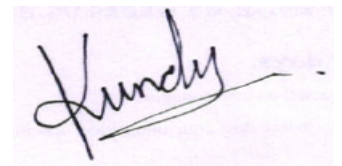
Both ovaries appear normal in size, shape and echotexture.

No evidence of any adnexal pathology noted.

IMPRESSION:-

THICKENED ENDOMETRIUM

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



Dr. KUNDAN MEHTA
MBBS, DMRE (RADIOLOGY)

Radiology

Name: Mrs. KOMAL JAGMOHAN PANWAR
Age/Gender: 30 Y/F
Address: THANE
Location: PUNE, MAHARASHTRA
Doctor:
Department: GENERAL
Rate Plan: PIMPRI_06042023
Sponsor: ARCOFEMI HEALTHCARE LIMITED
Consulting Doctor: Dr. SAMEER KUMAR SABAT

MR No: CPIM.0000059616
Visit ID: CPIMOPV145234
Visit Date: 10-06-2023 09:21
Discharge Date:
Referred By: SELF

HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

SYSTEMIC REVIEW

HT-HISTORY

PHYSICAL EXAMINATION

SYSTEMIC EXAMINATION

IMPRESSION

RECOMMENDATION

Doctor's Signature

Name: Mrs. KOMAL JAGMOHAN PANWAR
Age/Gender: 30 Y/F
Address: THANE
Location: PUNE, MAHARASHTRA
Doctor:
Department: GENERAL
Rate Plan: PIMPRI_06042023
Sponsor: ARCOFEMI HEALTHCARE LIMITED
Consulting Doctor: Dr. SUPRIYA GAWARE

MR No: CPIM.0000059616
Visit ID: CPIMOPV145234
Visit Date: 10-06-2023 09:21
Discharge Date:
Referred By: SELF

Doctor's Signature

Name: Mrs. KOMAL JAGMOHAN PANWAR
Age/Gender: 30 Y/F
Address: THANE
Location: PUNE, MAHARASHTRA
Doctor:
Department: GENERAL
Rate Plan: PIMPRI_06042023
Sponsor: ARCOFEMI HEALTHCARE LIMITED
Consulting Doctor: Dr. PRADNYA AJAYKUMAR VASUDEV

MR No: CPIM.0000059616
Visit ID: CPIMOPV145234
Visit Date: 10-06-2023 09:21
Discharge Date:
Referred By: SELF

HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

SYSTEMIC REVIEW

HT-HISTORY

PHYSICAL EXAMINATION

SYSTEMIC EXAMINATION

IMPRESSION

RECOMMENDATION

Doctor's Signature

Name: Mrs. KOMAL JAGMOHAN PANWAR
Age/Gender: 30 Y/F
Address: THANE
Location: PUNE, MAHARASHTRA
Doctor:
Department: GENERAL
Rate Plan: PIMPRI_06042023
Sponsor: ARCOFEMI HEALTHCARE LIMITED
Consulting Doctor: Dr. PRIYA JAGANNATH MAKODE

MR No: CPIM.0000059616
Visit ID: CPIMOPV145234
Visit Date: 10-06-2023 09:21
Discharge Date:
Referred By: SELF

HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

SYSTEMIC REVIEW

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PHYSICAL EXAMINATION

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RECOMMENDATION

Doctor's Signature

Name: Mrs. KOMAL JAGMOHAN PANWAR
Age/Gender: 30 Y/F
Address: THANE
Location: PUNE, MAHARASHTRA
Doctor:
Department: GENERAL
Rate Plan: PIMPRI_06042023
Sponsor: ARCOFEMI HEALTHCARE LIMITED
Consulting Doctor: Miss. SNEHA NAIR

MR No: CPIM.0000059616
Visit ID: CPIMOPV145234
Visit Date: 10-06-2023 09:21
Discharge Date:
Referred By: SELF

Doctor's Signature

Established Patient: Yes

Vitals

| Date | Pulse (Beats/min) | B.P (mmHg) | Resp (Rate/min) | Temp (F) | Height (cms) | Weight (Kgs) | Body Fat Percentage (%) | Visceral Fat Level (%) | Body Age (Years) | BMI | Waist Circum (cms) | Hip (cms) | Waist (cms) | Waist & Hip Ratio | User |
|---------------------|----------------------|----------------|--------------------|-------------|-----------------|-----------------|-------------------------------|------------------------------|------------------------|-------|--------------------------|--------------|----------------|-------------------------|-----------|
| 10-06-2023 14:34 | 84 Beats/min | 110/70 mmHg | 20 Rate/min | 97 F | 164 cms | 53 Kgs | % | % | Years | 19.71 | cms | cms | cms | | AHLL03446 |

Established Patient: Yes

Vitals

| Date | Pulse (Beats/min) | B.P (mmHg) | Resp (Rate/min) | Temp (F) | Height (cms) | Weight (Kgs) | Body Fat Percentage (%) | Visceral Fat Level (%) | Body Age (Years) | BMI | Waist Circum (cms) | Hip (cms) | Waist (cms) | Waist & Hip Ratio | User |
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Established Patient: Yes

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Established Patient: Yes

Vitals

| Date | Pulse (Beats/min) | B.P (mmHg) | Resp (Rate/min) | Temp (F) | Height (cms) | Weight (Kgs) | Body Fat Percentage (%) | Visceral Fat Level (%) | Body Age (Years) | BMI | Waist Circum (cms) | Hip (cms) | Waist (cms) | Waist & Hip Ratio | User |
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| 10-06-2023 14:34 | 84 Beats/min | 110/70 mmHg | 20 Rate/min | 97 F | 164 cms | 53 Kgs | % | % | Years | 19.71 | cms | cms | cms | | AHLL03446 |

| | |
|--|--|
| Patient Name : Mrs.KOMAL JAGMOHAN PANWAR | Collected : 10/Jun/2023 02:04PM |
| Age/Gender : 30 Y 0 M 22 D/F | Received : 10/Jun/2023 06:20PM |
| UHID/MR No : CPIM.0000059616 | Reported : 10/Jun/2023 06:30PM |
| Visit ID : CPIMOPV145234 | Status : Final Report |
| Ref Doctor : Dr.SELF | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : bobS40402. | |

DEPARTMENT OF HAEMATOLOGY

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

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

HEMOGRAM , WHOLE BLOOD-EDTA

| | | | | |
|-----------------------------|-------|---------------|------------|--------------------------------|
| HAEMOGLOBIN | 12.8 | g/dL | 12-15 | Spectrophotometer |
| PCV | 38.50 | % | 36-46 | Electronic pulse & Calculation |
| RBC COUNT | 4.02 | Million/cu.mm | 3.8-4.8 | Electrical Impedence |
| MCV | 95.7 | fL | 83-101 | Calculated |
| MCH | 31.8 | pg | 27-32 | Calculated |
| MCHC | 33.3 | g/dL | 31.5-34.5 | Calculated |
| R.D.W | 14.5 | % | 11.6-14 | Calculated |
| TOTAL LEUCOCYTE COUNT (TLC) | 7,140 | cells/cu.mm | 4000-10000 | Electrical Impedence |

DIFFERENTIAL LEUCOCYtic COUNT (DLC)

| | | | | |
|-------------|------|---|-------|----------------------|
| NEUTROPHILS | 57.8 | % | 40-80 | Electrical Impedence |
| LYMPHOCYTES | 31.8 | % | 20-40 | Electrical Impedence |
| EOSINOPHILS | 0.6 | % | 1-6 | Electrical Impedence |
| MONOCYTES | 9.5 | % | 2-10 | Electrical Impedence |
| BASOPHILS | 0.3 | % | <1-2 | Electrical Impedence |

ABSOLUTE LEUCOCYTE COUNT

| | | | | |
|-------------|---------|-------------|-----------|----------------------|
| NEUTROPHILS | 4126.92 | Cells/cu.mm | 2000-7000 | Electrical Impedence |
| LYMPHOCYTES | 2270.52 | Cells/cu.mm | 1000-3000 | Electrical Impedence |
| EOSINOPHILS | 42.84 | Cells/cu.mm | 20-500 | Electrical Impedence |
| MONOCYTES | 678.3 | Cells/cu.mm | 200-1000 | Electrical Impedence |
| BASOPHILS | 21.42 | Cells/cu.mm | 0-100 | Electrical Impedence |

PLATELET COUNT

| | | | | |
|----------------|--------|-------------|---------------|----------------------|
| PLATELET COUNT | 240000 | cells/cu.mm | 150000-410000 | Electrical impedence |
|----------------|--------|-------------|---------------|----------------------|

ERYTHROCYTE SEDIMENTATION RATE (ESR)

| | | | | |
|--------------------------------------|---|-------------------------|------|---------------------|
| ERYTHROCYTE SEDIMENTATION RATE (ESR) | 5 | mm at the end of 1 hour | 0-20 | Modified Westergren |
|--------------------------------------|---|-------------------------|------|---------------------|

RBCs ARE NORMOCYTIC NORMOCHROMIC.

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



| | |
|--|--|
| Patient Name : Mrs.KOMAL JAGMOHAN PANWAR | Collected : 10/Jun/2023 02:04PM |
| Age/Gender : 30 Y 0 M 22 D/F | Received : 10/Jun/2023 06:20PM |
| UHID/MR No : CPIM.0000059616 | Reported : 10/Jun/2023 06:30PM |
| Visit ID : CPIMOPV145234 | Status : Final Report |
| Ref Doctor : Dr.SELF | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : bobS40402. | |

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



| | |
|--|--|
| Patient Name : Mrs.KOMAL JAGMOHAN PANWAR | Collected : 10/Jun/2023 02:04PM |
| Age/Gender : 30 Y 0 M 22 D/F | Received : 10/Jun/2023 06:20PM |
| UHID/MR No : CPIM.0000059616 | Reported : 10/Jun/2023 07:11PM |
| Visit ID : CPIMOPV145234 | Status : Final Report |
| Ref Doctor : Dr.SELF | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : bobS40402. | |

DEPARTMENT OF HAEMATOLOGY

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

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

BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD-EDTA

| | | | | |
|------------------|----------|--|--|-----------------------------|
| BLOOD GROUP TYPE | A | | | Microplate Hemagglutination |
| Rh TYPE | Positive | | | Microplate Hemagglutination |



| | |
|--|--|
| Patient Name : Mrs.KOMAL JAGMOHAN PANWAR | Collected : 10/Jun/2023 02:04PM |
| Age/Gender : 30 Y 0 M 22 D/F | Received : 10/Jun/2023 06:19PM |
| UHID/MR No : CPIM.0000059616 | Reported : 10/Jun/2023 10:09PM |
| Visit ID : CPIMOPV145234 | Status : Final Report |
| Ref Doctor : Dr.SELF | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : bobS40402. | |

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 | 101 | 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 HOURS , NAF PLASMA | 95 | 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.

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 |
|---|--------|-------|-----------------|------------|
| HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD-EDTA | 4.9 | % | | HPLC |
| ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD-EDTA | 94 | 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.

- A1C test should be performed at least two times a year in patients who are meeting treatment goals (and who have stable glycemic control).
- 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.
- 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



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| Age/Gender : 30 Y 0 M 22 D/F | Received : 10/Jun/2023 06:22PM |
| UHID/MR No : CPIM.0000059616 | Reported : 10/Jun/2023 06:45PM |
| Visit ID : CPIMOPV145234 | Status : Final Report |
| Ref Doctor : Dr.SELF | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : bobS40402. | |

DEPARTMENT OF BIOCHEMISTRY

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

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

LIPID PROFILE , SERUM

| | | | | |
|---------------------|-------|-------|--------|-------------------------|
| TOTAL CHOLESTEROL | 126 | mg/dL | <200 | CHO-POD |
| TRIGLYCERIDES | 69 | mg/dL | <150 | GPO-POD |
| HDL CHOLESTEROL | 57 | mg/dL | 40-60 | Enzymatic Inhibition |
| NON-HDL CHOLESTEROL | 69 | mg/dL | <130 | Calculated |
| LDL CHOLESTEROL | 55.43 | mg/dL | <100 | Calculated |
| VLDL CHOLESTEROL | 13.88 | mg/dL | <30 | Calculated |
| CHOL / HDL RATIO | 2.21 | | 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.



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| UHID/MR No : CPIM.0000059616 | Reported : 10/Jun/2023 06:46PM |
| Visit ID : CPIMOPV145234 | Status : Final Report |
| Ref Doctor : Dr.SELF | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : bobS40402. | |

DEPARTMENT OF BIOCHEMISTRY

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

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

LIVER FUNCTION TEST (LFT) , SERUM

| | | | | |
|---------------------------------------|-------|-------|---------|--------------------|
| BILIRUBIN, TOTAL | 1.43 | mg/dL | 0.3-1.2 | DPD |
| BILIRUBIN CONJUGATED (DIRECT) | 0.28 | mg/dL | <0.2 | DPD |
| BILIRUBIN (INDIRECT) | 1.15 | mg/dL | 0.0-1.1 | Dual Wavelength |
| ALANINE AMINOTRANSFERASE (ALT/SGPT) | 14.92 | U/L | <35 | IFCC |
| ASPARTATE AMINOTRANSFERASE (AST/SGOT) | 16.0 | U/L | <35 | IFCC |
| ALKALINE PHOSPHATASE | 51.84 | U/L | 30-120 | IFCC |
| PROTEIN, TOTAL | 7.89 | g/dL | 6.6-8.3 | Biuret |
| ALBUMIN | 4.96 | g/dL | 3.5-5.2 | BROMO CRESOL GREEN |
| GLOBULIN | 2.93 | g/dL | 2.0-3.5 | Calculated |
| A/G RATIO | 1.69 | | 0.9-2.0 | Calculated |



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| Ref Doctor : Dr.SELF | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : bobS40402. | |

DEPARTMENT OF BIOCHEMISTRY

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

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

| RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM | | | | |
|--|--------------|--------|------------|--------------------------|
| CREATININE | 0.58 | mg/dL | 0.55-1.02 | Modified Jaffe, Kinetic |
| UREA | 15.66 | mg/dL | 17-43 | GLDH, Kinetic Assay |
| BLOOD UREA NITROGEN | 7.3 | mg/dL | 8.0 - 23.0 | Calculated |
| URIC ACID | 3.15 | mg/dL | 2.6-6.0 | Uricase PAP |
| CALCIUM | 9.90 | mg/dL | 8.8-10.6 | Arsenazo III |
| PHOSPHORUS, INORGANIC | 3.71 | mg/dL | 2.5-4.5 | Phosphomolybdate Complex |
| SODIUM | 138.49 | mmol/L | 136-146 | ISE (Indirect) |
| POTASSIUM | 4.4 | mmol/L | 3.5-5.1 | ISE (Indirect) |
| CHLORIDE | 102.86 | mmol/L | 101-109 | ISE (Indirect) |



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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 | 14.14 | U/L | <38 | IFCC |



| | |
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| Patient Name : Mrs.KOMAL JAGMOHAN PANWAR | Collected : 10/Jun/2023 02:04PM |
| Age/Gender : 30 Y 0 M 22 D/F | Received : 10/Jun/2023 06:22PM |
| UHID/MR No : CPIM.0000059616 | Reported : 10/Jun/2023 07:00PM |
| Visit ID : CPIMOPV145234 | Status : Final Report |
| Ref Doctor : Dr.SELF | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : bobS40402. | |

DEPARTMENT OF IMMUNOLOGY

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

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

THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM

| | | | | |
|-----------------------------------|-------|--------|------------|------|
| TRI-IODOTHYRONINE (T3, TOTAL) | 0.97 | ng/mL | 0.64-1.52 | CMIA |
| THYROXINE (T4, TOTAL) | 7.26 | µg/dL | 4.87-11.72 | CMIA |
| THYROID STIMULATING HORMONE (TSH) | 1.880 | µIU/mL | 0.35-4.94 | CMIA |

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 |



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|--|--|
| Patient Name : Mrs.KOMAL JAGMOHAN PANWAR | Collected : 10/Jun/2023 02:04PM |
| Age/Gender : 30 Y 0 M 22 D/F | Received : 10/Jun/2023 06:38PM |
| UHID/MR No : CPIM.0000059616 | Reported : 10/Jun/2023 07:19PM |
| Visit ID : CPIMOPV145234 | Status : Final Report |
| Ref Doctor : Dr.SELF | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : bobS40402. | |

DEPARTMENT OF CLINICAL PATHOLOGY

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

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

COMPLETE URINE EXAMINATION (CUE) , URINE

PHYSICAL EXAMINATION

| | | | | |
|--------------|-------------|--|-------------|------------------|
| COLOUR | PALE YELLOW | | PALE YELLOW | Visual |
| TRANSPARENCY | CLEAR | | CLEAR | Visual |
| pH | 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 | MODIFIED EHRlich REACTION |
| BLOOD | NEGATIVE | | NEGATIVE | Peroxidase |
| NITRITE | NEGATIVE | | NEGATIVE | Diazotization |
| LEUCOCYTE ESTERASE | NEGATIVE | | NEGATIVE | LEUCOCYTE ESTERASE |

CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY

| | | | | |
|------------------|--------|------|------------------|------------|
| PUS CELLS | 2 - 3 | /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 |




| | |
|--|--|
| Patient Name : Mrs.KOMAL JAGMOHAN PANWAR | Collected : 10/Jun/2023 02:04PM |
| Age/Gender : 30 Y 0 M 22 D/F | Received : 10/Jun/2023 06:37PM |
| UHID/MR No : CPIM.0000059616 | Reported : 10/Jun/2023 07:56PM |
| Visit ID : CPIMOPV145234 | Status : Final Report |
| Ref Doctor : Dr.SELF | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : bobS40402. | |


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) | NEGATIVE | | NEGATIVE | Dipstick |
| URINE GLUCOSE(FASTING) | NEGATIVE | | NEGATIVE | Dipstick |

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


DR. MANISH T. AKARE
 M.B.B.S, MD(Path.)
 Consultant Pathologist


Dr Sneha Shah
 MBBS, MD (Pathology)
 Consultant Pathologist


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



CONCENT FORM

Name of the patient : KOMAL PANWAR

Company Name: Bank of Baroda

Test name : LBC PAP & Gynecological consultation.

Reason: Have got the test done few days ago


Signature & date

Patient Name : Mrs. KOMAL JAGMOHAN PANWAR Age : 30 Y F
UHID : CPIM.0000059616 OP Visit No : CPIMOPV145234
Reported on : 10-06-2023 16:42 Printed on : 10-06-2023 18:27
Adm/Consult Doctor : Ref Doctor : SELF

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Observation:-

Both lung fields are clear.

Both C-P angles are clear.

Cardiac size appear normal.

Hila and pulmonary vessels are within normal limits.

Both the domes of diaphragm are normal.

Thoracic cage and soft tissues are within normal limits.

Impression

Study is within normal limits.

Printed on:10-06-2023 16:42

---End of the Report---



Dr. KIRAN PRALHAD SUDHARE
MBBS, DMRD
Radiology

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)

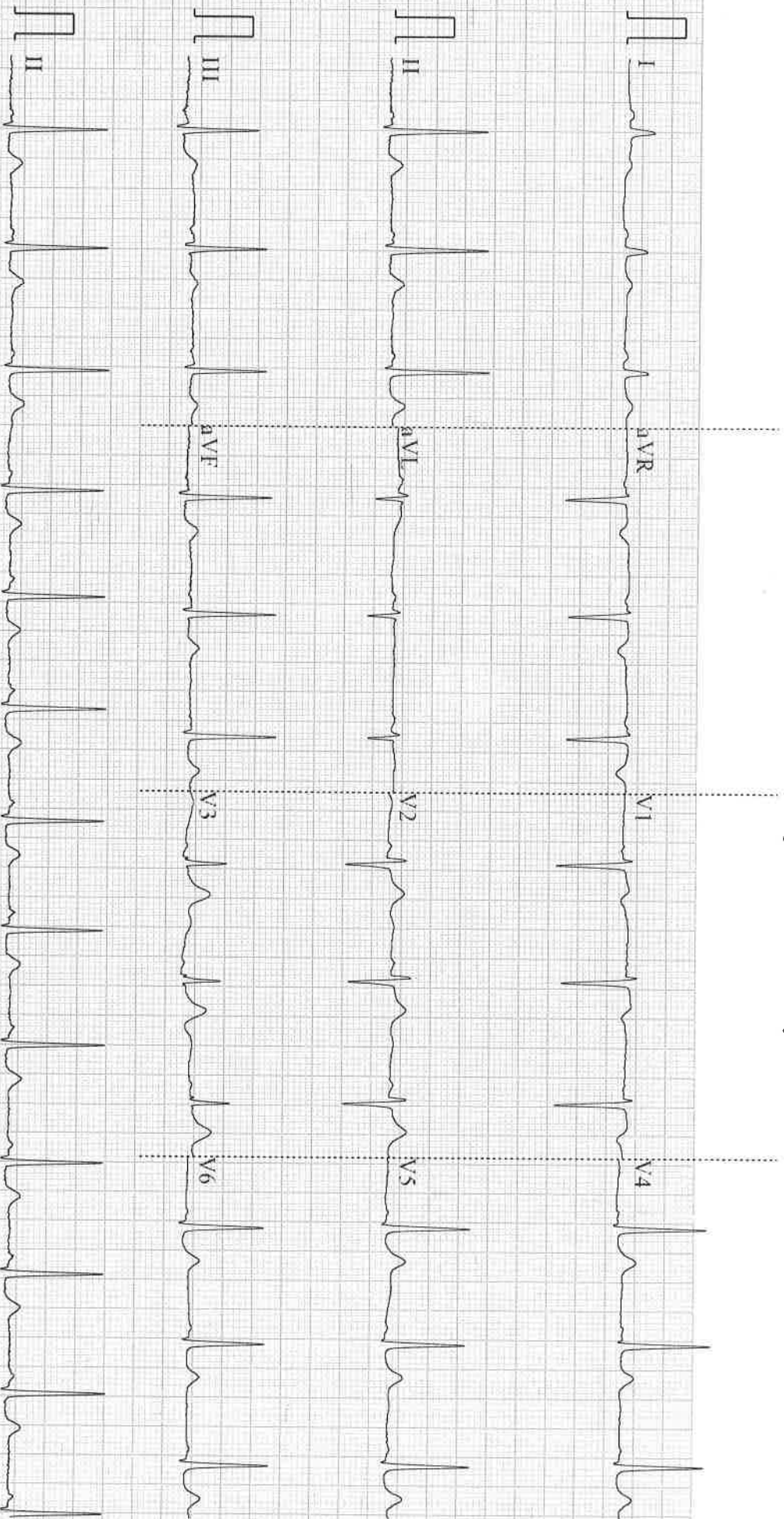
Online appointments: www.apolloclinic.com

ID: 109
KOMAL PANWAR
Female 30Years

10-06-2023 11:35:51 AM
HR : 76 bpm
P : 77 ms
PR : 113 ms
QRS : 95 ms
QT/QTc : 356/401 ms
P/ORS/T : 12/65/49 °
RV5/SV1 : 1.395/1.108 mV

Diagnosis Information:
Sinus Rhythm
Short PR Interval
Slight ST-T Abnormality?(II, V6)

Report Confirmed by:



0.67 ~ PSHN A050

25mm/s 10mm/mV 4*2.5s+1r ♡76

V1.91 SEMIP X1.6_{00A} APOLO CLINIC NIGDI

Patient Name : Mrs. KOMAL JAGMOHAN PANWAR Age : 40 Y F
UHID : CPIM.0000059616 OP Visit No : CPIMOPV145234
Reported on : 10-06-2023 09:32 Printed on : 10-06-2023 09:36
Adm/Consult Doctor : Ref Doctor : SELF

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

Liver appears normal in size and echotexture. No focal lesion is seen. PV and CBD normal. No dilatation of the intrahepatic biliary radicals.

Gall bladder is well 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. Splenic 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 the kidneys appear normal in size, shape and echopattern. Cortical thickness and CM differentiation are maintained. No calculus / hydronephrosis seen on either side.

Urinary Bladder is well distended and appears normal. No evidence of any wall thickening or abnormality. No evidence of any intrinsic or extrinsic bladder abnormality detected.

Uterus appears normal in size. It shows normal shape & echo pattern. Endometrial echo-complex appears normal and measures 14.1 mm. No intra/extra uterine gestational sac seen.

Both ovaries appear normal in size, shape and echotexture.

No evidence of any adnexal pathology noted.

IMPRESSION:- **THICKENED ENDOMETRIUM**

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

Patient Name : Mrs. KOMAL JAGMOHAN PANWAR Age : 40 Y F
UHID : CPIM.0000059616 OP Visit No : CPIMOPV145234
Reported on : 10-06-2023 09:32 Printed on : 10-06-2023 09:36
Adm/Consult Doctor : Ref Doctor : SELF

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

Printed on:10-06-2023 09:32

---End of the Report---



Dr. KUNDAN MEHTA
MBBS, DMRE (RADIOLOGY)
Radiology

2 D ECHOCARDIOGRAPHY & COLOUR DOPPLER STUDY

| | |
|--|-------------------------|
| Patient's Name: MRS. KOMAL PANWAR | Age/Sex: 40 / F |
| Ref: ARCOFEMI HEALTHCARE | Date: 10/06/2023 |

2 DIMENSIONAL ECHOCARDIOGRAPHY:

1. All cardiac chambers are normal in dimensions
2. No LV regional wall motion abnormalities at rest; LVEF = 60 %
3. Good RV function
4. Myxomatous mitral valve with mild AML prolapse; other cardiac valves structurally normal
5. IAS / IVS intact
6. No clots / vegetation/ pericardial effusion seen on TTE
7. Great arteries are normally related & appear normal
8. IVC is normal in size & collapsing well with respiration

DOPPLER STUDIES (CONTINUOUS WAVE, PULSED WAVE, COLOR DOPPLER):

1. Normal transvalvular pressure gradients, No AR, Mild MR (eccentric jet along PML), Trivial TR
2. No LV diastolic dysfunction
3. No pulmonary hypertension
4. No intracardiac or extracardiac shunt noted

DIMENSIONS (M-MODE) :

| | | | |
|--------------------|---------|--------------------|---------|
| Left Atrium | 30.0 mm | Aortic Root | 28.0 mm |
| IVS (d) | 08.0 mm | IVS (s) | 12.0 mm |
| LVID (d) | 41.0 mm | LVID (s) | 26.0 mm |
| LVPW(d) | 08.0 mm | LVPW(s) | 12.0 mm |

IMPRESSION :

MYXOMATOUS MITRAL VALVE, MILD AML PROLAPSE WITH MILD MR
NORMAL CARDIAC CHAMBER DIMENSIONS
GOOD BIVENTRICULAR FUNCTION; LVEF = 60%
NO LV DIASTOLIC DYSFUNCTION
NORMAL OTHER CARDIAC VALVES
NO PULMONARY HYPERTENSION
IAS/IVS INTACT
NO CLOT/VEGETATION/PERICARDIAL EFFUSION



DR. RAJENDRA V. CHAVAN
MD (MEDICINE), DM (CARDIOLOGY)
CONSULTANT CARDIOLOGIST

24

Date : 10-06-2023
MR NO : CPIM.0000059616

Department : GENERAL
Doctor :

Name : Mrs. KOMAL JAGMOHAN PANWA

Registration No :

Age/ Gender : 30 Y / Female

Qualification :

Consultation Timing: 09:21

HT- 164
WT- 53
BP- 110/70

Patient Name : Mrs. KOMAL JAGMOHAN PANWAR Age : 30 Y/F
UHID : CPIM.0000059616 OP Visit No : CPIMOPV145234
Conducted By: : Conducted Date : 10-06-2023 10:30
Referred By : SELF

2 DIMENSIONAL ECHOCARDIOGRAPHY:

1. All cardiac chambers are normal in dimensions
2. No LV regional wall motion abnormalities at rest; LVEF = 60 %
3. Good RV function
4. Myxomatous mitral valve with mild AML prolapse; other cardiac valves structurally normal
5. IAS / IVS intact
6. No clots / vegetation/ pericardial effusion seen on TTE
7. Great arteries are normally related & appear normal
8. IVC is normal in size & collapsing well with respiration

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IMPRESSION :

**MYXOMATOUS MITRAL VALVE, MILD AML PROLAPSE WITH MILD MR
NORMAL CARDIAC CHAMBER DIMENSIONS
GOOD BIVENTRICULAR FUNCTION; LVEF = 60%
NO LV DIASTOLIC DYSFUNCTION
NORMAL OTHER CARDIAC VALVES
NO PULMONARY HYPERTENSION
IAS/IVS INTACT
NO CLOT/VEGETATION/PERICARDIAL EFFUSION**

**DR. RAJENDRA V. CHAVAN
MD (MEDICINE), DM (CARDIOLOGY)**

CONSULTANT CARDIOLOGIST

| | | | |
|---------------|------------------------------|----------------|-----------------|
| Patient Name | : Mrs. KOMAL JAGMOHAN PANWAR | Age | : 30 Y/F |
| UHID | : CPIM.0000059616 | OP Visit No | : CPIMOPV145234 |
| Conducted By: | : | Conducted Date | : |
| Referred By | : SELF | | |
| Patient Name | : Mrs. KOMAL JAGMOHAN PANWAR | Age | : 30 Y/F |
| UHID | : CPIM.0000059616 | OP Visit No | : CPIMOPV145234 |
| Conducted By | : | Conducted Date | : |
| Referred By | : SELF | | |
