## ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK 2600.00 ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY2324

e No	Service Sub Group	Service Name	
S. No.	Blood Bank	Blood Grouping And Typing (Abo And Rh)	
	Bio Chemistry	Glycosylated Hemoglobin (HbA1C) - Whole Blood	
	Bio Chemistry	THYROID PROFILE - I(T3,T4 AND TSH)	
	Bio Chemistry	Lipid Profile (all Parameters)	
	Bio Chemistry	Renal Function Test	
	Bio Chemistry	LIVER FUNCTION TEST (PACKAGE)	
	Bio Chemistry	GGTP: Gamma Glutamyl Transpeptidase - Serum	
	Cardiology	ECG	
	Ultrasound	1 Wil 1 Abdomon	
0	Cytology	LBC PAP SMEAR Pending Peb smear	
0	Consultations	Fitness by General Physician	
1	Consultations	Consultation - Dental	
2	Consultations	Opthal by General Physician	
3	Consultations	Package Consultation - ENT	
4	Consultations	Dietician consultation	
5	Consultations	Package Gynaeocological Consultation	
6	Bio Chemistry	GLUCOSE - SERUM / PLASMA FASTING AND POST PRANDIAL	
7	Bio Chemistry	URINE GLUCOSE(FASTING)	
8	Bio Chemistry	URINE GLUCOSE(POST PRANDIAL)	
9	The state of the s	2 D ECHO	
0	Cardiology	X-Ray Chest PA	
1	X-Ray	SONO MAMOGRAPHY – SCREENING	
2	Mammography	BMI	
3	Others	Urine Routine (CUE)	
4	Haematology	HEMOGRAM (CBC+ESB)	
5	Haematology	Individual Control Control	





## भारत सरकार

THE RESIDENCE MARKET SHOWEN

Unique Identification Authority of India

## Government of India

नामांकन क्रम / Enrollment No 1001/18024/25984

To.

ममता शुक्ता

Mamta Shukla

W/O Santosh Bhooshan Shukla

SHUKULAN KA PURWA

SHUKUL Pure Noti Babuganj Babuganj Pratapgarh

Uttar Pradesh 230126

8960813318

Ref: 2205 / 11F / 149495 / 149550 / P



UE570869534IN



आपका आधार क्रमांक / Your Aadhaar No. :

2253 8670 8041

आधार - आम आदमी का अधिकार



भारत सरकार GOVERNMENT OF INDIA



ममता शुक्ता Mamta Shukla जन्म वर्ष / Year of Birth : 1977 पहिला / Female



2253 8670 8041

आधार - आम आदमी का अधिकार



## **CERTIFICATE OF MEDICAL FITNESS**

This is to certify that I have conducted the clinical examination

of Mrs. Mamta

		Tic
•	Medically Fit	
,	Fit with restrictions/recommendations	
	Though following restrictions have been revealed, in my opinion, these are not impediments to the job.	
	1 Grade I Jatty liner	
	2 Predralodic	
	3. Dullpidamia Wherine sibraid	
	However, the employee should follow the advice/medication that has been communicated to him/her.	110
	Review after3 months	
	Currently Unfit.	1
	Review afterrecommended	d
	Unfit	

This certificate is not meant for medico-legal purposes

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GST: 09ADNPA2038G1ZS

Address: TECHNO HERITAGE, Jehangirabad Palace, Next to DM Residence, Hazratganj, Lucknow 226001

Online appointments : www.apolloclinic.com Email : hazratganj.lko@apolloclinic.com TO BOOK AN APPOINTMENT

MBBS, MD, FIDM (1)
Reg. No. 68

Apollo Clinic H



Medical Officer Apollo Clinic,







Patient Name- mrs. Man ta shulcla.	Date-	8/04/23
Age- 46	Sex-	F.
BP-Systolic 136 Diastolic 85mm/y.	R.B.S	
Pulse- & Iblmin.	SPO2-	981.
Temp- 96.7 F	Height-	159
Weight- 73.4 Kg >	BMI-	29
Consultant-Dr. Saurabh Agarwal.	Fat-	29-81.

- Prediabelic
- Prediabelic
- Grade I fatty liver
- Bulky where a ciderine placed
- Lt breast subcentimetric simple cysts

PxO tab Atowa 10 mg 0-0-1 X Imonth

Advise: Avoid only spicy food.
Avoid sugary things
Priet modification
Excercise 30 min/day

Dr. Saurabh Arague MBBS, MD, FIDM (1 AGA

HbA1c- 6.4%

Inv: USG Abdomen? after 3 months

Valid for 7 Days

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Hazratganj, Lucknow 226001

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Patient Name : MRS. MAMTA SHUKLA

Age/ Gender : 46 Y/F

UHID/ MR No : FHAZ.00000041.66

Ref Doctor : ARCOFEMI HEALTHCARE LTD

Reported : 08.april.2023

Status :

Client Name :

Patient Location : LUCKNOW

#### X-RAY CHEST PA

- Trachea is central in position.
- Bilateral lung fields are normally aerated.
- · Both hilar shadows are normal.
- Both C.P angles are clear.
- Cardiac shadow is within normal limits.
- Bony cage appears normal.

OPINION: NORMAL STUDY.

Please correlate clinically

Dr. PRIYANK CHAUDHARY (RADIOLOGIST)

Priyanh

Discrepancies due to technical or typing error should be reported for correction seven days. No compensation ability stands





PATIENT NAME : MRS MAMTA SHUKLA

AGE / SEX: 48 YRS/F

: 3142 UHID

DATE: 08, APRIL, 2023

## 2-D ECHO & M-MODE EXAMINATION **VALVES**

1. MITRAL VALVES STUDY:

a) Motion: Normal

b) Thickness: Normal c)Calcium-none

2. AORTIC VALVE STUDY

a) Aortic root 2.5cm.

b)Aortic Opening 1.7 cm.

c)Closure: Central

d)Calcium-none

e)Eccentricity Index 1

f) Vegetation- none

g) Valve Structure: Trileaflet

3.PULMONARY VALVE STUDY Normal

a)EF Slope

Normal

b)A Wave +

c)Thickness

Normal

d)Others -

4.TRICUSPID VALVE

Normal.

6. AORTIC MITRAL CONTINUITY: maintained

Left Atrium

2.9x2.8cm.

Clot : none Others:

Right Atrium

Normal

Clot none I.A.S.: intact

(Cont .....2)

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(...2)

### **VENTRICLES**

RIGHT VENTRICLE:

Normal

Ejection fraction: 71%

LEFT VENTRICLE:

Fractional Shortening 40%

IVS (D) 0.9cm.(S)

LV mass:116g

LVID(D) 4.17cm.(S)

2.50cm.

1.2 cm.

PW (D) 0.8cm (S)

1.3 cm

RWMA: None IVS: Intact

## TOMOGRAPHIC VIEWS

PARASTERNAL LONG AXIS VIEW:

Normal

Good LV contractility

SHORT AXIS VIEWS:

Aortic Valve Level

AOV- Normal

MV-Normal PV-Normal TV-Normal

Mitral Valve Level

Papillary Muscle Level:

APICAL 4 CHAMBER VIEW OTHER SPECIAL VIEWS:

No clot / vegetation

(Cont.....3)

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(....3)

# PERICARDIUM Normal DOPPLER STUDIES

	Velocity (m/ sec)	Flow Pattern	Regurgitation	Gradient mmHg
MITRAL	E=0.71;A=0.77 E/A=0.9	Normal	Nil	-
AORTIC	1.3	Normal	Nil	7.3
TRICUSPID	1.3	Normal	Trace	7.2
PULMONARY	0.8	Normal	Nil	2.9

## **CONCLUSIONS:**

- No RWMA
- LVEF = 65%
- Trace TR
- IAS/IVS intact
- No MR/AR
- No clot / vegetation.
- No pericardial effusion.
- No Daistolic Dysfunction

DR. S. VAJPAYEE MD,DIP. (CARD)

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NAME

: MRS. MAMTA SHUKLA

DATE

: 08.APRIL.2023

REFERRED BY : ARCOFEMI HEALTHCARE LTD

46 Y AGE

SEX F

#### ULTRASOUND OF WHOLE ABDOMEN

- <u>LIVER</u>: is normal in size (14.8 cms) with normal shape & increased echogenicity. Biliary radicals are not dilated. No obvious focal lesion. Portal & hepatic veins are normal in caliber.
- GALL BLADDER: is partially distended. Wall thickness is normal. No pericholecystic fluid collection noted. CBD is not dilated.
- PANCREAS: is normal in size and contour. Parenchyma shows normal echotexture. No pancreatic duct dilatation is seen. No peri-pancreatic fluid collection seen.
- SPLEEN: is normal in size (9.6 cms), shape & position. Parenchyma shows normal echotexture. Splenic veins are not dilated.
- B/L KIDNEYS:
- Both kidneys are normal in size, site, shape, position. Cortical echoes are normal. Corticomedullary differentiation is maintained. Pelvicalyceal system are not dilated. No obvious calculus / mass / cyst seen.
- URINARY BLADDER: is well distended with normal contour. Wall appears regular. No evidence of any calculus /mass lesion is seen.
- Uterus: It is anteverted with bulky in size measuring 104x62x50 mm. Myometrial & endometrial echoes are normal. Endometrial stripe measures 7.2 mm is normal. No obvious fluid collection seen with in endometrial canal. Well defined hypoechoic lesion of size approx. 18x16x10 mm is seen in posterior uterine wall s/o Fibroid. Cervix appears normal.
- RIGHT OVARY: is normal in size, shape and echotexture.
- LEFT OVARY: is normal in size, shape and echotexture & shows dominant follicle measuring approx. 23x19 mm in size.
- No fluid in POD.

#### **IMPRESSION:**

- > GRADE I FATTY LIVER.
- > BULKY UTERUS WITH UTERINE FIBROID.

ADV: Please correlate clinically

Typed by Poonam Tiwari Dr. Priyank K.S. Chaudhary

MBBS, DMRD, DNB( Radiodiagnosis)

errors should be reported for correction for seven days. No compensation liability stands

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NAME

: MRS. MAMTA SHUKLA

RTNO

4166

DATE

: 08.APRIL.2023

AGE

46 Y

REFERRED BY : ARCOFEMI HEALTHCARE LTD

SEX

F

#### SONOMAMMOGRAPHY OF BOTH BREASTS

Few subcentimetric simple cysts are noted in left breast.

- Bilateral breast parenchyma shows normal echotexture in all quadrants. No evidence of architectural distortion seen.
- Retroareolar region appears normal.
- No evidence of any dilated ducts noted.
- No soft tissue edema.
- No axillary lymphadenopathy

#### IMPRESSION:

> LEFT BREAST SUBCENTIMETRIC SIMPLE CYSTS (BIRADS 2).

ADV: Please correlate clinically and with other investigations

Dr. Priyank K.S. Chaudhary

Poonam Tiwari

Typed by MBBS, DMRD, DNB( Radiodiagnosis)

Note:- discrepancies due to technical or typing errors should be reported for correction for seven days. No compensation liability stands.

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Patient No.: 3936-3926

Report Doc No.: 5132 Name: Mrs. Mamta Shukla / 46 Year / Female

Refered By : ARCOFEMI MEDIWHEEL

Collected On: 08-04-2023 Report On: 08-04-2023 04:07 PM

#### ARCOFEMI MEDIWHEEL FEMALE HEALTH PACKAGE

CBC (Complete Blood Count)		
Hemoglobin	13.2 gm%	Normal 12-15 gm%
Method: (Cyanmethemoglobin)		
Hematocrit (PCV)	36.9 %	Normal 36-45 %
Method:(Calculated parameter)		
RBC Count	4.14 million/cmm	Normal 3.7-5 million/cmm
Method :(Electrical Impedence)		
MCV	89.1 fl	Normal 83-101 fl
Method: (Calculated parameter)		
MCH	31.9 pg	Normal 27-32 pg
Method :(Calculated parameter)		
MCHC	35.8 g/dl	Normal 31-37 g/dl
Method :(Calculated parameter)		
RDW-CV	14.4 %	Normal 11.6-14 %
Method :(Electrical Impedence)	222	21 1 4000 10000 11-/
TLC (Total Leucocyte Count)	8300 cells/cu.mm	Normal 4000-10000 cells/cu.mn
Method :(Electrical Impedence)		
DLC (Differential Leucocyte Count)		
Method :(Electrical Impedence)	(2.9/	40-80
Neutrophil	62 %	20-40
Lymphocyte	34 % 01 %	1-6
Eosinophil	03 %	2-10
Monocyte	00 %	0-1
Basophil	00 %	0-1
ABSOLUTE LEUCOCYTE COUNT		
Method :(Electrical Impedence)	5146 cells/cu.mm	2000-7000
NEUTROPHILS	2822 cells/cu.mm	1000-3000
LYMPHOCYTES	83 cells/cu.mm	20-500
EOSINOPHILS	249 cells/cu.mm	200-1000
MONOCYTES		Normal 150-450 thousand/mm3
Platelet Count	284 thousand/mm3	Normai 150-450 tilousand/iiiii5
Method :(Electrical Impedence)		
CDD (D		

GBP (Peripheral Blood smear)

RBC: Normocytic normochromic

WBC: Total leucocyte count is within normal limit with normal distribution of cells

Platelets: Platelets are adequate in number.

No hemoparasite or immature cells seen .

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Page 1 End



Name: Mrs. Mamta Shukla / 46 Year / Female

Refered By : ARCOFEMI MEDIWHEEL

Patient No.: 3936-3926

Collected On: 08-04-2023

Report On: 08-04-2023 04:07 PM

ESR (Wintrobs)

12 mm/h

Normal 0-20 mm/h

Blood Grouping/ABO RH Typing

Blood Group

"B"

Rh Factor

POSITIVE

Blood Sugar (Fasting)

Method:(GOD-POD)

81 mg/dl

Normal 70-110 mg/dl

Blood Sugar (PP) Method :(GOD-POD)

112 mg/dl

Normal 80-160 mg/dl

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Page 2 End

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Patient No.: 3936-3926

Report Doc No.: 5132

Name: Mrs. Mamta Shukla / 46 Year / Female Refered By : ARCOFEMI MEDIWHEEL

Collected On: 08-04-2023

Report On: 08-04-2023 04:07 PM

Kidney Function Test (KFT)

Serum Urea

22 mg/dl

Normal 10-50 mg/dl

Method :(UREASE) Serum Creatinine

0.6 mg/dl

Normal 0.6-1.4 mg/dl

Method:(Creatinine amidohydrolase)

140 mmol/L

Normal 135-146 mmol/L

Serum Sodium Method :(Direct ISE)

Serum Potassium Method: (Direct ISE) 4.2 mmol/L

Normal 3.5-5.1 mmol/L

Page 3 End







Patient No.: 3936-3926

Report Doc No.: 5132 Name: Mrs. Mamta Shukla / 46 Year / Female Refered By : ARCOFEMI MEDIWHEEL

Collected On: 08-04-2023

Report On: 08-04-2023 04:07 PM

Normal 0-38 U/L

Liver Function Test (LFT)		
Serum Bilirubin - Total Method :(Diazo sulfanilic)	0.5 mg/dl	Normal 0.2-1.2 mg/dl
Serum Bilirubin - Direct Method :(Diazo sulfanilic)	0.2 mg/dl	Normal 0-0.3 mg/dl
Serum Bilirubin-Indirect Method :(Calculated parameter)	0.3 mg/dl	Normal 0.3-1 mg/dl
Serum SGOT/AST Method :(UV with P-5-P)	20 U/L	Normal 10-46 U/L
Serum SGPT/ALT Method :(UV with P-5-P)	24 U/L	Normal 10-49 U/L
Serum Alkaline Phosphatase (SALP) Method :(p-nitrophenyl phosphate)	91 U/L	Normal 35-104 U/L

28 U/L

Checked By

Method: (IFCC)

Serum Gamma-Glutamyltransferase (GGT)

Liver Function Test (LFT)

Page 4 End

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Name: Mrs. Mamta Shukla / 46 Year / Female

Refered By: ARCOFEMI MEDIWHEEL

Collected On: 08-04-2023 Report On: 08-04-2023 04:07 PM

Lipid Profile	181 mg/dl	Normal < 200	
Serum Cholesterol - Total Method : (CHE/CHO/POD) Serum Triglyceride Method : (Enzymatic)	206 mg/dl	Normal < 150	
Serum Cholesterol VLDL Method :(Calculated parameter)	41 mg/dl	Normal < 30	
Serum Choleterol HDL Method:(Polymer-Detergent) Serum Cholesterol LDL Method:(Calculated parameter)	39 mg/dl 101 mg/dl	Normal > 40 Normal < 100	
Total Cholesterol/HDL Ratio Method:(Calculated parameter)	4.64	Normal 0-4.5	
LDL/HDL Ratio Method:(Calculated parameter) Checked By	3.51		Page 5 En

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**7897** 123 777



Name: Mrs. Mamta Shukla / 46 Year / Female

Refered By: ARCOFEMI MEDIWHEEL

Collected On: 08-04-2023

Report On: 08-04-2023 04:07 PM

HbA1c		LINITE	BIO. REF. RANGE	METHOD
TEST NAME	RESULT	UNIT	BIO. KEF. KANGE	TURBIDIMETRIC
HBA1C, GLYCATE HEAMOGLOBIN,	6.4	%		TORRIDIMETRIC
WHOLE BLOOD EDTA				

#### Comment:

Reference range as per American Diabetes Association (ADA):

REFERENCE GROUP	HBA1C IN %
NON DIABETIC ADULTS> 18	< 5.7
YEARS	5761
AT RISK (PREDIABETES)	5.7-6.4
DIAGNOSING DIABETES	≥6.5
DIABETICS	
EXCELENT 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.

Checked By

Page 6 End



Name: Mrs. Mamta Shukla / 46 Year / Female

Refered By: ARCOFEMI MEDIWHEEL

Patient No.: 3936-3926 Collected On: 08-04-2023 Report On: 08-04-2023 04:07 PM

**T3 T4 TSH** 

Serum T3

Method:(Chemiluminescence Immunoassay)

0.92 ng/ml

Normal 0.7-2 ng/ml

Serum T4

Method: (Chemiluminescence Immunoassay)

10.16 µg/dl

Normal 6.1-12.2 μg/dl

Serum Thyroid Stimulating Hormone (TSH)

Method:(Chemiluminescence Immunoassay)

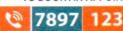
1.31 uIU/ml

Normal 0.3-5.6 uIU/ml

End of Report

Checked By

Dr. Divya Mehdiratta MBBS, MD (Pathologist)







#### **CONSENT FORM**

Patient Name:
I Mr/Mrs/Ms: Manufa Shukky Employee of Ascofenic Medi wheel  (Company) want to inform you that I am not interested in getting.  Tests done which is a part of my routine health check package.
And I Claim the above statement in my full consciousness.
Patient signature:
Pep smearer is not possible because of meneyorational cycle one my mensyorational cycle will completed i will come for pep smear test

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Patient Name-mys.	Date-	08/04/23	
Age- 46	•	Sex-	F.
B P – Systolic	Diastolic	R.B.S	
Pulse-		SPO2-	
Temp-		Height-	
Weight-		BMI-	
Consultant- ) . So	nhita Sinha,	Fat-	

Roulini ENT Check EAC. TM Mon lengler. Non len gler. Masterd. TFT. ACY BC ACX BC. Rice leulial. weber. SAE SAE. ABC ... N. M NO. NO · Hystagnus.

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Mrx Mamta Shukla Hgc- 464/F



(10 - freshyopi'c

Vm (616

Nrm < 2/24

Cum (30/30 } ININIC

Preshyopic Correction? \* +1.75DSBE 8 /N6 N6

- Only for near.

manta Shukla 46/F

regular dental checkrep



8.4.23.

calculus +.

4.) (extraction 1.5 yr back).

O cral prophylaxis

replacement of milling

Dr. ROHIT MADAN MDS (Periodontist & Oral Implantologist)
Consultant Dentist DCI Reg. No. 002259 Apollo Clinic, Hazratgani

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