

## CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

of Mrs. Sunita Vicky Tak on 17/8/2023

After reviewing the medical history and on clinical examination it has been found that he/she is

	Tick
<ul style="list-style-type: none"> <li>• Medically Fit</li> </ul>	✓
<ul style="list-style-type: none"> <li>• Fit with restrictions/recommendations</li> </ul> <p>Though following restrictions have been revealed, in my opinion, these are not impediments to the job.</p> <p>1. <u>Hb. ↓</u> ..... <u>TLC. ↓</u> .....</p> <p>2. <u>Sr. Calcium ↓</u> .....</p> <p>3. <u>Sr. TSH ↑</u> .....</p> <p>However the employee should follow the advice/medication that has been communicated to him/her.</p> <p>Review after _____</p>	
<ul style="list-style-type: none"> <li>• Currently Unfit.</li> </ul> <p>Review after _____ recommended</p>	
<ul style="list-style-type: none"> <li>• Unfit</li> </ul>	

**Dr Samruddhi D. Jagdale**  
Dr. ~~MBBS~~  
Medical Officer  
Reg. No. 2021097453  
Apollo Clinic, Kharadi

*This certificate is not meant for medico-legal purposes*

**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@apollohi.com | www.apollohi.com

APOLLO CLINICS NETWORK MAHARASHTRA  
Pune (Aundh | Kharadi | Nigdi Pradhikaran | Viman Nagar | Wanowrie)

Online appointments: [www.apolloclinic.com](http://www.apolloclinic.com)

TO BOOK AN APPOINTMENT  
**1860 500 7788**

Date : 16-08-2023 Department : GENERAL  
 MR NO : CKHA.0000068131 Doctor : Sunita Tak  
 Name : Mrs. Sunita Vicky Tak Registration No :  
 Age/ Gender : 30 Y / Female Qualification :

Consultation Timing: 08:22 HIP 96

Height : 154cm	Weight : 52.6kg	BMI : 23	Waist Circum : 90
Temp :	Pulse : 67/min	Resp : 20/min	B.P : 123/80 mmHg

General Examination / Allergies History

Adv. :-  
 - Vit. B12  
 - Vit. D3  
 - Sr. Calcium

→ C-RP

Clinical Diagnosis & Management Plan

Present complains - B/L knee pain since 2y

Comorbidity - Hemorrhoids

Allergies - Nil

Surgical H/O - Appendectomy in y. 2021

Family H/O - Nil

Addiction - Nil  
 Mixed diet

OE  
 CVS-  
 CNS-  
 P/A-  
 Chest-  
 } NAD

H/O covid infection - No

Vaccinated with - 2 doses

Follow up date:

  
 Doctor Signature

# POWER PRESCRIPTION

NAME: MS Sunida Vicky Tak

GENDER: M/F

DATE: 16.8.23

AGE: 30

UHID: (813)


## RIGHT EYE

	SPH	CYL	AXIS	VISION
DISTANCE	-0.25	-0.50	170°	6/c
NEAR				

## LEFT EYE

	SPH	CYL	AXIS	VISION
DISTANCE	-0.25	-0.50	180°	6/c
NEAR				

INSTRUCTIONS:

SIGNATURE 

**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](http://www.apolloclinic.com)

TO BOOK AN APPOINTMENT

 **1860 500 7788**

AGE:

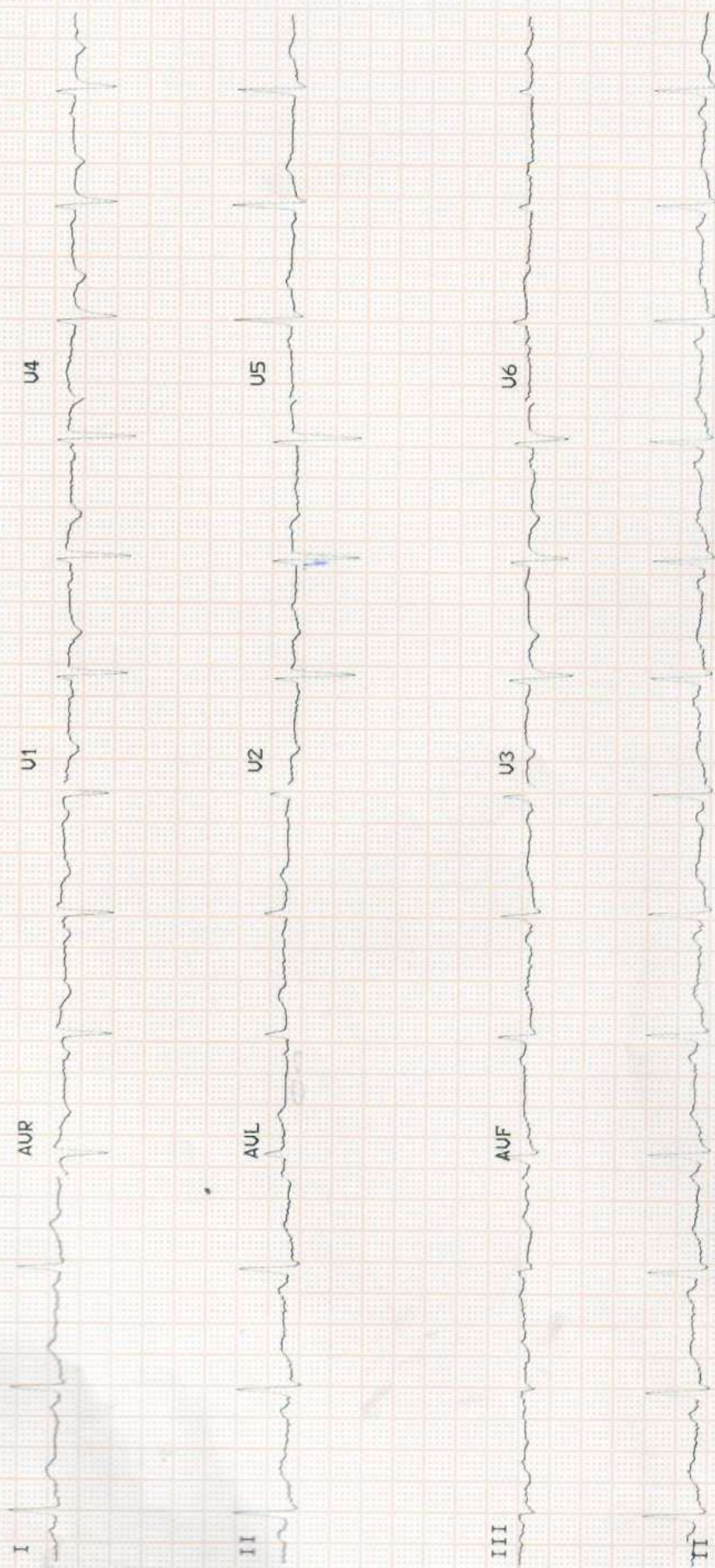
Measurement Results:

ORS : 106 ms  
 QT/QTcB : 396 / 451 ms  
 PR : 158 ms  
 P : 118 ms  
 P/ORS/T : 52/ 25/ -2 degrees

Interpretation:

< P  
 < T  
 < QRS  
 aUR  
 aUL  
 O I  
 III +90 II  
 aUF

0.1mV 1.5mV 1.5mV 1.5mV



<b>Patient Name</b>	: Mrs. Sunita Vicky Tak	<b>Age/Gender</b>	: 30 Y/F
<b>UHID/MR No.</b>	: CKHA.0000068131	<b>OP Visit No</b>	: CKHAOPV101045
<b>Sample Collected on</b>	:	<b>Reported on</b>	: 16-08-2023 15:45
<b>LRN#</b>	: RAD2074128	<b>Specimen</b>	:
<b>Ref Doctor</b>	: SELF		
<b>Emp/Auth/TPA ID</b>	: 784558		

**DEPARTMENT OF RADIOLOGY**

**X-RAY CHEST PA**

Both lung fields and hila are normal .

No obvious active pleuro-parenchymal lesion seen .

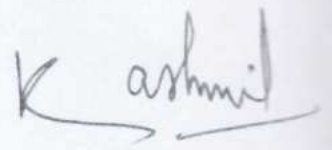
Both costophrenic and cardiophrenic angles are clear .

Both diaphragms are normal in position and contour .

Thoracic wall and soft tissues appear normal.

**CONCLUSION :**

No obvious abnormality seen



Dr. SANKET KASLIWAL  
MBBS DMRE  
Radiology

<b>Patient Name</b> : Mrs. Sunita Vicky Tak	<b>Age/Gender</b> : 30 Y/F
<b>UHID/MR No.</b> : CKHA.0000068131	<b>OP Visit No</b> : CKHAOPV101045
<b>Sample Collected on</b> :	<b>Reported on</b> : 16-08-2023 11:52
<b>LRN#</b> : RAD2074128	<b>Specimen</b> :
<b>Ref Doctor</b> : SELF	
<b>Emp/Auth/TPA ID</b> : 784558	

**DEPARTMENT OF RADIOLOGY**

**ULTRASOUND - WHOLE ABDOMEN**

**Liver:** It appears normal in size, shape and shows normal echotexture. No focal lesion is noted. No e/o IHBR dilatation is seen. Portal vein and CBD appear normal in dimensions at porta hepatis.

**Gall bladder:** It is well distended. No calculus or sludge noted.

**Spleen :** It appears normal in size, shape and echotexture. No focal lesion is noted.

**Pancreas :** It appears normal in size, shape and echotexture. No focal lesion / pancreatic ductal dilatation / calcification noted.

**Right kidney :** Normal in size ms 9.4 x 3.9 cms, shape, location with smooth outlines and normal echotexture. CM differentiation is well maintained. No calculus or hydronephrosis seen.

**Left kidney :** Normal in size ms 9.8 x 4.3 cms, shape, location with smooth outlines and normal echotexture. CM differentiation is well maintained. No calculus or hydronephrosis seen.

No retroperitoneal lymphadenopathy is seen. Aorta and I.V.C. appear normal.

**Urinary bladder:** It is well distended and appears normal. No echorefective calculus or soft tissue mass noted. Both U-V junction appear normal.

**Uterus:** is anteverted, and measures 8.2 x 3.6 x 5.4 cms. No focal lesion seen. Endometrial thickness is 7.6 mm. **Minimal free fluid noted in pelvis R/o PID .**

**Right ovary :** measures 3.5 x 2.0 cms. DF noted of size 13 mm .

**Left ovary :** measures 2.4 x 2.0 cms.

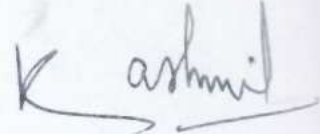
Visualised bowel loops appear normal.

**IMPRESSION :**

- **NO SIGNIFICANT ABNORMALITY.**

Clinical correlation suggested.....

(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. SANKET KASLIWAL**  
**MBBS DMRE**  
Radiology

NAME : Mrs. Sunita Vicky Tak  
AGE : 30 Y / F  
REF :

DATE : 16 / 08 / 2023

ECHOCARDIOGRAPHY

NO RWMA  
NORMAL LV SYSTOLIC FUNCTION.  
NO LV DIASTOLIC DYSFUNCTION.

TRIVIAL MITRAL REGURGITATION.  
MILD TRICUSPID REGURGITATION. RVSP- 28 MM HG.  
NORMAL OTHER VALVES.  
NORMAL CHAMBER SIZE.  
NORMAL PA PRESSURE.

IAS AND IVS INTACT.  
NO CLOT / VEGETATION / PERICARDIAL EFFUSION.

AO	LA	IVS	LVIDd	PWD	LVIDS	LVEF
22	26	8	39	8	27	60.00%

**IMPRESSION :**

NORMAL LV SYSTOLIC FUNCTION.  
NORMAL PA PRESSURE.

**DR Khadtare Abhijit**  
MBBS, MD (MEDICINE), DNB (CARDIOLOGY)  
CONSULTANT CARDIOLOGIST

**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](http://www.apolloclinic.com)

TO BOOK AN APPOINTMENT

**1860 500 7788**

## Apollo Clinic

### CONSENT FORM

Patient Name: Sunita Jax Age: 30

UHID Number: ..... Company Name: .....

I Mr./Mrs./Ms .....

Employee of .....

(Company) Want to inform you that I am **not interested / Postpone** in getting

- 1) Lbc PAP Test (skip)
- 2) .....
- 3) .....
- 4) .....
- 5) .....

Tests done which is a part of my routine health check package.

And I claim the above statement in my full consciousness.

Patient Signature: Sunita .....

Date: 16/08/23 .....





भारत सरकार  
Government of India

भारतीय विशिष्ट ओळख प्राधिकरण  
Unique Identification Authority of India

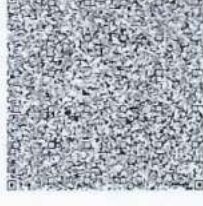
नोंदिल्ल्या क्रमांक / Enrollment No. : 0000/00573 75061

To  
SUNITA VICKY TAK  
सुनीता विक्की टक  
Vicky Tak,  
Baldoo,  
VTC: Baldoo, PO: Nimbijodhan,  
District: Nagaur,  
State: Rajasthan, PIN Code: 341316,  
Mobile: 8329277533

30223314



KC302233142FL



आपला आधार क्रमांक / Your Aadhaar No. :

**6478 1162 2150**

माझे आधार, माझी ओळख



भारत सरकार  
Government of India



Issue Date: 11/10/2011



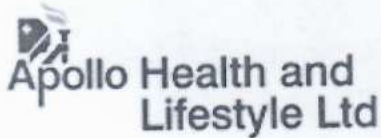
सुनीता विक्की टक  
SUNITA VICKY TAK  
जन्म तारीख / DOB: 01/08/1993  
रती / Female

9767859027

2

## Kharadi Apollo Clinic

**From:** noreply@apolloclinics.info  
**Sent:** 12 August 2023 03:22 PM  
**To:** wellness@mediwheel.in  
**Cc:** Kharadi Apollo Clinic; Vinayak Dimble; Syamsunder M  
**Subject:** Your Apollo order has been confirmed



Dear Sunita Vickyta,

Namaste Team,

Greetings from Apollo Clinics,

With regards to the below request the below appointment is scheduled at **KHARADI clinic** on **2023-08-16** at **08:50-08:55**.

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

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

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

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

### Instructions to undergo Health Check:

1. Please ensure you are on complete fasting for 10-To-12-Hours prior to check.

Patient Name : Mrs.SUNITA VICKY TAK	Collected : 16/Aug/2023 08:27AM
Age/Gender : 30 Y 0 M 15 D/F	Received : 16/Aug/2023 01:04PM
UHID/MR No : CKHA.0000068131	Reported : 16/Aug/2023 03:04PM
Visit ID : CKHAOPV101045	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 784558	

**DEPARTMENT OF HAEMATOLOGY**

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

**PERIPHERAL SMEAR , WHOLE BLOOD EDTA**

RBC ANISOCYTOSIS+.  
WBC WITH MILD LEUCOPENIA.  
PLATELETS ARE ADEQUATE ON SMEAR  
NO HEMOPARASITES SEEN



Patient Name : Mrs.SUNITA VICKY TAK	Collected : 16/Aug/2023 08:27AM
Age/Gender : 30 Y 0 M 15 D/F	Received : 16/Aug/2023 01:04PM
UHID/MR No : CKHA.000068131	Reported : 16/Aug/2023 03:04PM
Visit ID : CKHAOPV101045	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 784558	

**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**

<b>HAEMOGLOBIN</b>	<b>9.6</b>	g/dL	12-15	Spectrophotometer
PCV	<b>28.70</b>	%	36-46	Electronic pulse & Calculation
RBC COUNT	3.98	Million/cu.mm	3.8-4.8	Electrical Impedence
MCV	<b>72</b>	fL	83-101	Calculated
MCH	<b>24.1</b>	pg	27-32	Calculated
MCHC	33.4	g/dL	31.5-34.5	Calculated
R.D.W	<b>16.4</b>	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	<b>3,610</b>	cells/cu.mm	4000-10000	Electrical Impedence

**DIFFERENTIAL LEUCOCYTIC COUNT (DLC)**

NEUTROPHILS	46.2	%	40-80	Electrical Impedence
LYMPHOCYTES	39.7	%	20-40	Electrical Impedence
EOSINOPHILS	3.3	%	1-6	Electrical Impedence
MONOCYTES	<b>10.3</b>	%	2-10	Electrical Impedence
BASOPHILS	0.5	%	<1-2	Electrical Impedence

**ABSOLUTE LEUCOCYTE COUNT**

NEUTROPHILS	<b>1667.82</b>	Cells/cu.mm	2000-7000	Electrical Impedence
LYMPHOCYTES	1433.17	Cells/cu.mm	1000-3000	Electrical Impedence
EOSINOPHILS	119.13	Cells/cu.mm	20-500	Electrical Impedence
MONOCYTES	371.83	Cells/cu.mm	200-1000	Electrical Impedence
BASOPHILS	18.05	Cells/cu.mm	0-100	Electrical Impedence

<b>PLATELET COUNT</b>	295000	cells/cu.mm	150000-410000	Electrical impedence
<b>ERYTHROCYTE SEDIMENTATION RATE (ESR)</b>	8	mm at the end of 1 hour	0-20	Modified Westergren

**PERIPHERAL SMEAR**

RBC ANISOCYTOSIS+.  
WBC WITH MILD LEUCOPENIA.  
PLATELETS ARE ADEQUATE ON SMEAR  
NO HEMOPARASITES SEEN



Patient Name : Mrs.SUNITA VICKY TAK	Collected : 16/Aug/2023 08:27AM
Age/Gender : 30 Y 0 M 15 D/F	Received : 16/Aug/2023 01:04PM
UHID/MR No : CKHA.0000068131	Reported : 16/Aug/2023 02:52PM
Visit ID : CKHAOPV101045	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 784558	

**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.SUNITA VICKY TAK	Collected : 16/Aug/2023 08:27AM
Age/Gender : 30 Y 0 M 15 D/F	Received : 16/Aug/2023 12:59PM
UHID/MR No : CKHA.0000068131	Reported : 16/Aug/2023 01:31PM
Visit ID : CKHAOPV101045	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 784558	

**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	97	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



Patient Name : Mrs.SUNITA VICKY TAK	Collected : 16/Aug/2023 11:35AM
Age/Gender : 30 Y 0 M 15 D/F	Received : 16/Aug/2023 03:21PM
UHID/MR No : CKHA.0000068131	Reported : 16/Aug/2023 03:45PM
Visit ID : CKHAOPV101045	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 784558	

**DEPARTMENT OF BIOCHEMISTRY**

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

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)</b>	87	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



Patient Name : Mrs.SUNITA VICKY TAK	Collected : 16/Aug/2023 08:27AM
Age/Gender : 30 Y 0 M 15 D/F	Received : 16/Aug/2023 01:04PM
UHID/MR No : CKHA.0000068131	Reported : 16/Aug/2023 03:40PM
Visit ID : CKHAOPV101045	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 784558	

**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	5.5	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD EDTA	111	mg/dL		Calculated

**Comment:**

Reference Range as per American Diabetes Association (ADA):

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

Note: Dietary preparation or fasting is not required.

1. A1C test should be performed at least two times a year in patients who are meeting treatment goals (and who have stable glycemic control).
2. Lowering A1C to below or around 7% has been shown to reduce microvascular and neuropathic complications of type 1 and type 2 diabetes. When mean annual HbA1c is <1.1 times ULN (upper limit of normal), renal and retinal complications are rare, but complications occur in >70% of cases when HbA1c is >1.7 times ULN.
3. Falsely low HbA1c (below 4%) may be observed in patients with clinical conditions that shorten erythrocyte life span or decrease mean erythrocyte age. HbA1c may not accurately reflect glycemic control when clinical conditions that affect erythrocyte survival are present. Fructosamine may be used as an alternate measurement of glycemic control





Patient Name : Mrs.SUNITA VICKY TAK	Collected : 16/Aug/2023 08:27AM
Age/Gender : 30 Y 0 M 15 D/F	Received : 16/Aug/2023 01:01PM
UHID/MR No : CKHA.000068131	Reported : 16/Aug/2023 01:40PM
Visit ID : CKHAOPV101045	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 784558	

**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	122	mg/dL	<200	CHO-POD
TRIGLYCERIDES	30	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	52	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	70	mg/dL	<130	Calculated
LDL CHOLESTEROL	63.95	mg/dL	<100	Calculated
VLDL CHOLESTEROL	6.1	mg/dL	<30	Calculated
CHOL / HDL RATIO	2.36		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.



Patient Name : Mrs.SUNITA VICKY TAK	Collected : 16/Aug/2023 08:27AM
Age/Gender : 30 Y 0 M 15 D/F	Received : 16/Aug/2023 01:01PM
UHID/MR No : CKHA.0000068131	Reported : 16/Aug/2023 01:44PM
Visit ID : CKHAOPV101045	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 784558	

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	0.39	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.08	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.31	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	15.96	U/L	<35	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	24.9	U/L	<35	IFCC
ALKALINE PHOSPHATASE	38.24	U/L	30-120	IFCC
PROTEIN, TOTAL	<b>6.36</b>	g/dL	6.6-8.3	Biuret
ALBUMIN	4.03	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.33	g/dL	2.0-3.5	Calculated
A/G RATIO	1.73		0.9-2.0	Calculated



Patient Name : Mrs.SUNITA VICKY TAK	Collected : 16/Aug/2023 08:27AM
Age/Gender : 30 Y 0 M 15 D/F	Received : 16/Aug/2023 01:01PM
UHID/MR No : CKHA.0000068131	Reported : 16/Aug/2023 01:44PM
Visit ID : CKHAOPV101045	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 784558	

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				
Test Name	Result	Unit	Bio. Ref. Range	Method
CREATININE	0.62	mg/dL	0.55-1.02	Modified Jaffe, Kinetic
UREA	<b>14.00</b>	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	<b>6.5</b>	mg/dL	8.0 - 23.0	Calculated
URIC ACID	<b>2.42</b>	mg/dL	2.6-6.0	Uricase PAP
CALCIUM	<b>8.65</b>	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	2.64	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	140.52	mmol/L	136-146	ISE (Indirect)
POTASSIUM	4.0	mmol/L	3.5-5.1	ISE (Indirect)
CHLORIDE	106.91	mmol/L	101-109	ISE (Indirect)



Patient Name : Mrs.SUNITA VICKY TAK	Collected : 16/Aug/2023 08:27AM
Age/Gender : 30 Y 0 M 15 D/F	Received : 16/Aug/2023 01:01PM
UHID/MR No : CKHA.0000068131	Reported : 16/Aug/2023 01:40PM
Visit ID : CKHAOPV101045	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 784558	

**DEPARTMENT OF BIOCHEMISTRY**

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

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM</b>	27.12	U/L	<38	IFCC



Patient Name : Mrs.SUNITA VICKY TAK	Collected : 16/Aug/2023 08:27AM
Age/Gender : 30 Y 0 M 15 D/F	Received : 16/Aug/2023 01:01PM
UHID/MR No : CKHA.0000068131	Reported : 16/Aug/2023 01:44PM
Visit ID : CKHAOPV101045	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 784558	

**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)	0.92	ng/mL	0.64-1.52	CMIA
Thyroxine (T4, TOTAL)	7.71	µg/dL	4.87-11.72	CMIA
Thyroid Stimulating Hormone (TSH)	<b>5.550</b>	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



Patient Name : Mrs.SUNITA VICKY TAK	Collected : 16/Aug/2023 08:27AM
Age/Gender : 30 Y 0 M 15 D/F	Received : 16/Aug/2023 01:15PM
UHID/MR No : CKHA.0000068131	Reported : 16/Aug/2023 02:05PM
Visit ID : CKHAOPV101045	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 784558	

**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	HAZY		CLEAR	Visual
pH	7.5		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	1.005		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	POSITIVE ++		NEGATIVE	LEUCOCYTE ESTERASE

**CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY**

PUS CELLS	8 - 10	/hpf	0-5	Microscopy
EPITHELIAL CELLS	2 - 3	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY



Patient Name : Mrs.SUNITA VICKY TAK	Collected : 16/Aug/2023 08:27AM
Age/Gender : 30 Y 0 M 15 D/F	Received : 16/Aug/2023 01:15PM
UHID/MR No : CKHA.000068131	Reported : 16/Aug/2023 02:12PM
Visit ID : CKHAOPV101045	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 784558	

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 Sneha Shah  
MBBS, MD (Pathology)  
Consultant Pathologist



DR.Sanjay Ingle  
M.B.B.S,M.D(Pathology)  
Consultant Pathologist

