





Age/Gender

: 32 Y 4 M 7 D/F

UHID/MR No

: CVEL.0000138166

Visit ID Ref Doctor : CVELOPV190057

Emp/Auth/TPA ID : 106369

Collected : 09/Sep/2023 09:47AM

Received : 09/Sep/2023 12:52PM

Reported : 09/Sep/2023 02:43PM

Status : Final Report

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

### **DEPARTMENT OF HAEMATOLOGY**

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

PERIPHERAL SMEAR, WHOLE BLOOD EDTA

: Dr.SELF

METHODOLOGY

: Microscopic.

RBC MORPHOLOGY

: Predominantly normocytic normochromic RBC's noted.

WBC MORPHOLOGY

: Normal in number, morphology and distribution. No abnormal cells seen.

**PLATELETS** 

: Adequate in number.

PARASITES

: No haemoparasites seen.

**IMPRESSION** 

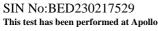
: Normocytic normochromic blood picture.

NOTE/ COMMENT

: Please correlate clinically.

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: 32 Y 4 M 7 D/F Age/Gender UHID/MR No : CVEL.0000138166 Visit ID : CVELOPV190057

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### **DEPARTMENT OF HAEMATOLOGY**

Status

ARCOFEMI - MEDIWHEEL - FULL BODY	Y HEALTH ANNUAL	PLUS CHECK -	FEMALE - 2D ECHO - F	PAN INDIA - FY2324
Test Name	Result	Unit	Bio. Ref. Range	Method

LIA EMOCI ODINI	40.0	/ 11	40.45	0 1 1 1
HAEMOGLOBIN	12.8	g/dL	12-15	Spectrophotometer
PCV	37.70	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.38	Million/cu.mm	3.8-4.8	Electrical Impedence
MCV	86.1	fL	83-101	Calculated
MCH	29.3	pg	27-32	Calculated
MCHC	34	g/dL	31.5-34.5	Calculated
R.D.W	13.3	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	6,500	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (D	DLC)			
NEUTROPHILS	66.0	%	40-80	Electrical Impedance
LYMPHOCYTES	25.4	%	20-40	Electrical Impedance
EOSINOPHILS	0.4	%	1-6	Electrical Impedance
MONOCYTES	7.0	%	2-10	Electrical Impedance
BASOPHILS	1.2	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT	•			
NEUTROPHILS	4290	Cells/cu.mm	2000-7000	Electrical Impedance
LYMPHOCYTES	1651	Cells/cu.mm	1000-3000	Electrical Impedance
EOSINOPHILS	26	Cells/cu.mm	20-500	Electrical Impedance
MONOCYTES	455	Cells/cu.mm	200-1000	Electrical Impedance
BASOPHILS	78	Cells/cu.mm	0-100	Electrical Impedance
PLATELET COUNT	186000	cells/cu.mm	150000-410000	Electrical impedence
ERYTHROCYTE SEDIMENTATION RATE (ESR)	32	mm at the end of 1 hour	0-20	Modified Westergre
PERIPHERAL SMEAR				

METHODOLOGY : Microscopic.

RBC MORPHOLOGY : Predominantly normocytic normochromic RBC's noted.

WBC MORPHOLOGY : Normal in number, morphology and distribution. No abnormal cells seen.

**PLATELETS** : Adequate in number.

**PARASITES** : No haemoparasites seen.

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Patient Name

: Mrs.MOUSUMI PODDER

Age/Gender UHID/MR No

: CVEL.0000138166

: 32 Y 4 M 7 D/F

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### **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

**IMPRESSION** 

: Normocytic normochromic blood picture.

NOTE/ COMMENT

: Please correlate clinically.

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Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)









Age/Gender : 32 Y 4 M 7 D/F

UHID/MR No : CVEL.0000138166

Visit ID : CVELOPV190057

Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 106369

Collected : 09/Sep/2023 09:47AM

Received : 09/Sep/2023 12:52PM Reported : 09/Sep/2023 05:47PM

Status : Final Report

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

<b>DEPARTMENT</b>	OF HAP	MATO	LOGY

ARCOFEMI - MEDIWHEEL - FULL BODY	Y HEALTH ANNUAL	PLUS CHECK -	FEMALE - 2D ECHO - F	PAN INDIA - FY2324
Test Name	Result	Unit	Bio. Ref. Range	Method

BLOOD GROUP ABO AND RH FACTOR ,	WHOLE BLOOD EDTA	
BLOOD GROUP TYPE	В	Microplate Hemagglutination
Rh TYPE	Positive	Microplate Hemagglutination

PLEASE NOTE THIS SAMPLE HAS BEEN TESTED ONLY FOR ABO MAJOR GROUPING AND ANTI D ONLY.

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Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)









Patient Name

: Mrs.MOUSUMI PODDER

Age/Gender

: 32 Y 4 M 7 D/F

UHID/MR No

: CVEL.0000138166 : CVELOPV190057

Visit ID Ref Doctor

: CVELOPV19005

Emp/Auth/TPA ID : 106369

: Dr.SELF

Collected

: 09/Sep/2023 09:47AM

Received

: 09/Sep/2023 12:51PM

Reported

: 09/Sep/2023 01:39PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

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			Method	
GLUCOSE FASTING NAF PLASMA	88	mg/dl	70-100	HEXOKINIASE

### **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:

- 1. 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.
- 2. Very high glucose levels (>450 mg/dL in adults) may result in Diabetic Ketoacidosis & is considered critical.

GLUCOSE, POST PRANDIAL (PP), 2	105	mg/dL	70-140	HEXOKINASE
HOURS , SODIUM FLUORIDE PLASMA (2				
HR)				

### **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

HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD EDTA	4.7	%	HPLC
ESTIMATED AVERAGE GLUCOSE (eAG),	88	mg/dL	Calculated

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DEL ARTIMENT OF BIOCHEMISTRY				
ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324				
Test Name	Result	Unit	Bio. Ref. Range	Method
WHOLE BLOOD EDTA				

### **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.

- 1. HbA1C is recommended by American Diabetes Association for Diagnosing Diabetes and monitoring Glycemic Control by American Diabetes Association guidelines 2023.
- 2. Trends in HbA1C values is a better indicator of Glycemic control than a single test.
- 3. 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.
- 4. 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.
- 5. 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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SIN No:PLF02025255,PLP1366712,EDT230083102









Age/Gender : 32 Y 4 M 7 D/F
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Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 106369 Collected : 09/Sep/2023 09:47AM

Received : 09/Sep/2023 12:49PM Reported : 09/Sep/2023 02:02PM

Status : Final Report

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

0 - 4.97

Calculated

#### **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	160	mg/dL	<200	CHO-POD		
TRIGLYCERIDES	57	mg/dL	<150	GPO-POD		
HDL CHOLESTEROL	33	mg/dL	40-60	Enzymatic Immunoinhibition		
NON-HDL CHOLESTEROL	127	mg/dL	<130	Calculated		
LDL CHOLESTEROL	115.6	mg/dL	<100	Calculated		
VLDL CHOLESTEROL	11.4	mg/dL	<30	Calculated		

#### **Comment:**

CHOL/HDL RATIO

Reference Interval as per National Cholesterol Education Program (NCEP) Adult Treatment Panel III Report.

4.85

	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

- 1. Measurements in the same patient on different days can show physiological and analytical variations.
- 2. NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.
- 3. Primary prevention algorithm now includes absolute risk estimation and lower LDL Cholesterol target levels to determine eligibility of drug therapy.
- 4. 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.
- 5. 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.
- 6. VLDL, LDL Cholesterol Non HDL Cholesterol, CHOL/HDL RATIO, LDL/HDL RATIO are calculated parameters when Triglycerides are below 350 mg/dl. When Triglycerides are more than 350 mg/dl LDL cholesterol is a direct measurement.

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Patient Name

: Mrs.MOUSUMI PODDER

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Reported Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

### DEPARTMENT OF BIOCHEMISTRY

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

**Test Name** 

: Dr.SELF

Result

Unit

Bio. Ref. Range

Method

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SIN No:SE04476619







Age/Gender : 32 Y 4 M 7 D/F

UHID/MR No : CVEL.0000138166

Visit ID : CVELOPV190057

Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 106369

Collected : 09/Sep/2023 09:47AM

Received : 09/Sep/2023 12:49PM Reported : 09/Sep/2023 02:02PM

Status : Final Report

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

### **DEPARTMENT OF BIOCHEMISTRY**

ARCOFEMI - MEDIWHEEL - FULL BODY	Y HEALTH ANNUAL	PLUS CHECK -	FEMALE - 2D ECHO - F	PAN INDIA - FY2324
Test Name	Result	Unit	Bio. Ref. Range	Method

LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	1.03	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.16	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.87	mg/dL	0.0-1.1	CALCULATED
ALANINE AMINOTRANSFERASE (ALT/SGPT)	37	U/L	<35	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	25.0	U/L	<35	IFCC
ALKALINE PHOSPHATASE	89.00	U/L	30-120	IFCC
PROTEIN, TOTAL	7.00	g/dL	6.6-8.3	Biuret
ALBUMIN	4.20	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.80	g/dL	2.0-3.5	Calculated
A/G RATIO	1.5		0.9-2.0	Calculated

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Age/Gender : 32 Y 4 M 7 D/F

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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	0.64	mg/dL	0.72 – 1.18	JAFFE METHOD		
UREA	27.00	mg/dL	17-43	GLDH, Kinetic Assay		
BLOOD UREA NITROGEN	12.6	mg/dL	8.0 - 23.0	Calculated		
URIC ACID	2.60	mg/dL	2.6-6.0	Uricase PAP		
CALCIUM	9.30	mg/dL	8.8-10.6	Arsenazo III		
PHOSPHORUS, INORGANIC	4.00	mg/dL	2.5-4.5	Phosphomolybdate Complex		
SODIUM	137	mmol/L	136–146	ISE (Indirect)		
POTASSIUM	3.9	mmol/L	3.5–5.1	ISE (Indirect)		
CHLORIDE	106	mmol/L	101–109	ISE (Indirect)		

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Status : Final Report

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

•						
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	64.00	U/L	<38	IFCC		

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SIN No:SE04476619

This test has been performed at Apollo Health and Lifestyle Ltd - Chennai, Diagnostics Laboratory.

Address: Plot no: 46, 7th Street, Tansinagar, Velacherry, Chennai,Tamil Nadu







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Visit ID : CVELOPV190057

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Received : 09/Sep/2023 12:49PM
Reported : 09/Sep/2023 01:51PM

Status : Final Report

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

### **DEPARTMENT OF IMMUNOLOGY**

ARCOFEMI - MEDIWHEEL - FULL BOD	Y HEALTH ANNUAL	PLUS CHECK -	FEMALE - 2D ECHO - F	PAN INDIA - FY2324
Test Name	Result	Unit	Bio. Ref. Range	Method

THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM						
TRI-IODOTHYRONINE (T3, TOTAL)	0.96	ng/mL	0.7-2.04	CLIA		
THYROXINE (T4, TOTAL) 13.63 μg/dL 6.09-12.23 CLIA						
THYROID STIMULATING HORMONE (TSH)	2.822	μIU/mL	0.34-5.60	CLIA		

#### **Comment:**

#### 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

- **1.** 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.
- **2.** 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.
- **3.** 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.
- **4.** 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

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Age/Gender : 32 Y 4 M 7 D/F UHID/MR No

: CVEL.0000138166 Visit ID : CVELOPV190057

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Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

### **DEPARTMENT OF IMMUNOLOGY**

ARCOFEMI - MEDIWHEEL - FULL BODY	HEALTH ANNUAL	PLUS CHECK -	FEMALE - 2D ECHO - F	PAN INDIA - FY2324
Test Name	Result	Unit	Bio. Ref. Range	Method

High High Pituitary Adenoma; TSHoma/Thyrotropinoma High High

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SIN No:SPL23128699







Patient Name

: Mrs.MOUSUMI PODDER

Age/Gender

: 32 Y 4 M 7 D/F

UHID/MR No Visit ID

: CVEL.0000138166 : CVELOPV190057

Ref Doctor

: Dr.SELF

Emp/Auth/TPA ID : 106369 Collected

: 09/Sep/2023 09:47AM

Received

: 09/Sep/2023 05:13PM

Reported Status

: 09/Sep/2023 06:06PM

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

### **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 (C	<b>JE)</b> , URINE			
PHYSICAL EXAMINATION			1	
COLOUR	PALE STRAW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
рН	5.5		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	1.025		1.002-1.030	Bromothymol Blue
BIOCHEMICAL EXAMINATION				
URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE		NEGATIVE	GLUCOSE OXIDASE
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING REACTION
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	SODIUM NITRO PRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	MODIFED EHRLICH REACTION
BLOOD	NEGATIVE		NEGATIVE	Peroxidase
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	LEUCOCYTE ESTERASE
CENTRIFUGED SEDIMENT WET MO	UNT AND MICROSCOPY			
PUS CELLS	1-3	/hpf	0-5	Microscopy
EPITHELIAL CELLS	2-4	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	ABSENT		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY

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SIN No:UR2181186







Age/Gender : 32 Y 4 M 7 D/F

UHID/MR No : CVEL.0000138166 Visit ID

Ref Doctor : Dr.SELF Emp/Auth/TPA ID

: CVELOPV190057

Collected : 09/Sep/2023 09:47AM

Received : 09/Sep/2023 05:12PM Reported : 09/Sep/2023 06:34PM

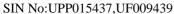
: Final Report Status

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

Emp/Auth/TPA ID : 106369			145700000								
DEPARTMENT OF CLINICAL PATHOLOGY											
ARCOFEMI - MEDIWHEEL - FULL BOD	Y 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							

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Patient Name

: Mrs.MOUSUMI PODDER

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: 32 Y 4 M 7 D/F

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Emp/Auth/TPA ID

: 106369

Collected

: 09/Sep/2023 09:47AM

Received

: 10/Sep/2023 09:14PM

Reported Status

: 12/Sep/2023 02:28PM

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

### **DEPARTMENT OF CYTOLOGY**

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

	CYTOLOGY NO.	15264/23
I	SPECIMEN	
a	SPECIMEN ADEQUACY	ADEQUATE
b	SPECIMEN TYPE	LIQUID-BASED PREPARATION (LBC)
	SPECIMEN NATURE/SOURCE	CERVICAL SMEAR
c	ENDOCERVICAL-TRANSFORMATION ZONE	ABSENT
d	COMMENTS	SATISFACTORY FOR EVALUATION
П	MICROSCOPY	Superficial and intermediate squamous epithelial cells with benign morphology.  Inflammatory cells, predominantly neutrophils.  Negative for intraepithelial lesion/ malignancy.
III	RESULT	
a	EPITHEIAL CELL	
	SQUAMOUS CELL ABNORMALITIES	NOT SEEN
	GLANDULAR CELL ABNORMALITIES	NOT SEEN
b	ORGANISM	NIL
IV	INTERPRETATION	NEGATIVE FOR INTRAEPITHELIAL LESION OR MALIGNANCY, INFLAMMATORY SMEAR

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 \*\*\*

DR.R.SRIVATSAN M.D.(Biochemistry)

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

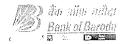
Dr. Reshma Stanly M.B.B.S, DNB (Pathology) Consultant Pathologist

Page 16 of 16

SIN No:CS067609

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





(WEL: 138166

LETTER OF APPROVAL / RECOMMENDATION

To,

The Coordinator,

Mediwheel (Arcofemi Healthcare Limited)

Helpline number: 011-41195959

Dear Sir / Madam,

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

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

PARTICULARS	EMPLOYEE DETAILS
NAME	MRS. PODDER MOUSUMI
EC NO.	106369
DESIGNATION	SINGLE WINDOW OPERATOR A
PLACE OF WORK	CHENNAI,STERLING ROAD
BIRTHDATE	02-05-1991
PROPOSED DATE OF HEALTH	09-09-2023
CHECKUP	
BOOKING REFERENCE NO.	23S106369100067884E

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 28-08-2023 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 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))

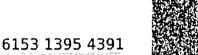


ভারত সরকার

Government of India



সৌমিক ধর Soumik Dhar জন্মতারিখ/DOB: 21/04/1990 পুরুষ/ MALE



VID: 9197 5293 2556 8821

আমার আধার, আমার পরিচয়



CVFL: 138) 66



ভারতীয় বিশিষ্ট পরিচয় প্রাধিকরণ

ভারত সরকার Unique Identification-Authority-of-India-Government of India

ভালিকাভুক্তির আই ডি/Enrollment No.: 2010/19557/06675

শৌসুमी भाषात Mousumi Podder
D/O Mantu Rajan Poddar R DESHBANDHU SARANI Haora Corporation Baksara Haora West Bengal 711110

MN076532503DF



আপনার আধার সংখ্যা/ Your Aadhaar No. :

2644 1122 1092

আধার - সাধারণ মানুষের অধিকার



### भारत सरकार GOVERNMENT OF INDIA



(मोभूमी (भाषात Mausumi Podder পিতা: মন্টুরজন পোদার Father: MANTU RANJAN PODDAR জন্ম সাশ / Year of Birth : 1991

महिना / Female



2644 1122 1092

আধার - সাধারণ মানুষের অধিকার



**Patient Name** : Mrs. MOUSUMI PODDER Age/Gender : 32 Y/F

UHID/MR No. : CVEL.0000138166 **OP Visit No** 

: CVELOPV190057 Sample Collected on : 09-09-2023 18:15 Reported on

> : RAD2094494 **Specimen**

**Ref Doctor** : SELF Emp/Auth/TPA ID : 106369

LRN#

### DEPARTMENT OF RADIOLOGY

### **ULTRASOUND - WHOLE ABDOMEN**

Liver appears normal in size (13.9 cms) with increased echognecity. No focal lesion is seen.

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. PV and CBD normal.

**Spleen** appears normal (8.8 cm). 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.

**Right kidney** - 9.9 x 3.5 cms. **Left kidney** - 9.6 x 4.5 cms.

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 7.6 x 3.9 x 4.7 cms. It shows normal shape & echo pattern.

Endometrial echo-complex appears normal and measures 9 mm.

### Both ovaries are polycystic

**Right ovary** - 3.7 x 2.7 x 3.6 cms (vol 19.1 cc) **Left ovary** - 3.7 x 2.1 x 3.8 cms (vol 16.2 cc)

### **Impression:**

- \* Grade 1 fatty liver.
- \* Bilateral polycystic ovaries.

(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.



Patient Name : Mrs. MOUSUMI PODDER Age/Gender : 32 Y/F

# M.B.B.S., DNB (RADIODIAGNOSIS)

Radiology



Patient Name : Mrs. MOUSUMI PODDER Age/Gender : 32 Y/F

UHID/MR No. :

: CVEL.0000138166

Sample Collected on

LRN#

: RAD2094494

**Ref Doctor** : SELF **Emp/Auth/TPA ID** : 106369

OP Visit No

: CVELOPV190057

Reported on

: 09-09-2023 15:44

Specimen

.

### 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. PASUPULETI SANTOSH KUMAR M.B.B.S., DNB (RADIODIAGNOSIS)

Radiology

Age/Gender: 32 Y/F
Address: chennai
Location:

CHENNAI, TAMIL NADU

Doctor:

Department: GENERAL
Rate Plan: VELACHERY\_03122022
Sponsor: ARCOFEMI HEALTHCARE LIMITED

Consulting Doctor: Dr. SHILFA NIGAR N

### HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

SYSTEMIC REVIEW

**HT-HISTORY** 

PHYSICAL EXAMINATION

SYSTEMIC EXAMINATION

**IMPRESSION** 

RECOMMENDATION

**Doctor's Signature** 

MR No: CVEL.0000138166 CVELOPV190057 Visit ID: Visit Date: 09-09-2023 09:34

Discharge Date:

Name: Mrs. MOUSUMI PODDER

Age/Gender: 32 Y/F Address: chennai

Location: CHENNAI, TAMIL NADU

Doctor:

Department: GENERAL

Rate Plan: VELACHERY\_03122022

Sponsor: ARCOFEMI HEALTHCARE LIMITED Consulting Doctor: Dr. V J NIRANJANA BHARATHI

**Doctor's Signature** 

MR No: CVEL.0000138166
Visit ID: CVELOPV190057
Visit Date: 09-09-2023 09:34

Discharge Date:

32 Y/F Age/Gender: Address: chennai

CHENNAI, TAMIL NADU Location:

Doctor:

Department: GENERAL

Rate Plan:

VELACHERY\_03122022 ARCOFEMI HEALTHCARE LIMITED Sponsor:

Consulting Doctor: Dr. BENITA JAYACHANDRAN

### **Doctor's Signature**

MR No: CVEL.0000138166 Visit ID: CVELOPV190057 Visit Date: 09-09-2023 09:34

Discharge Date:

Age/Gender: 32 Y/F
Address: chennai
Location

CHENNAI, TAMIL NADU

Doctor:

Department: GENERAL
Rate Plan: VELACHERY\_03122022
Sponsor: ARCOEFMI HEALTHCA

ARCOFEMI HEALTHCARE LIMITED Sponsor: Consulting Doctor: Dr. YASODHA KUMARA REDDY MOKKALA

### HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

SYSTEMIC REVIEW

**HT-HISTORY** 

PHYSICAL EXAMINATION

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MR No: CVEL.0000138166 Visit ID: CVELOPV190057 Visit Date: 09-09-2023 09:34

Discharge Date:

Age/Gender: 32 Y/F
Address: chennai
Location:

CHENNAI, TAMIL NADU

Doctor:

Department: GENERAL
Rate Plan: VELACHERY\_03122022
Sponsor: ARCOFEMI HEALTHCARE LIMITED Consulting Doctor: Dr. PAVITHRA RAMAKRISHNAN

### HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

SYSTEMIC REVIEW

**HT-HISTORY** 

PHYSICAL EXAMINATION

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**IMPRESSION** 

RECOMMENDATION

**Doctor's Signature** 

MR No: CVEL.0000138166 CVELOPV190057 Visit ID: Visit Date: 09-09-2023 09:34

Discharge Date:

II)ate	Pulse (Beats/min)		Resp (Rate/min)	Temp (F)	Height (cms)	Weight	Percentage	Fat Level	Body Age (Years)	BMI	Circum	Hip (cms)	(cms)	Waist & Hip Ratio	User
09-09-2023 16:44	Beats/min	mmHg	Rate/min	F	159 cms	64 Kgs	%	%	Years	25.32	cms	cms	cms		AHLL05400

II)ate	Pulse (Beats/min)		Resp (Rate/min)	Temp (F)	Height (cms)	Weight	Percentage	Fat Level	Body Age (Years)	BMI	Circum	Hip (cms)	(cms)	Waist & Hip Ratio	User
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09-09-2023 16:44	Beats/min	mmHg	Rate/min	F	159 cms	64 Kgs	%	%	Years	25.32	cms	cms	cms		AHLL05400



# **CERTIFICATE OF MEDICAL FITNESS**

Height	: 159. Cm	Weight:	64.8 kg	BMI: 25.6.	BP: 120/ 80. mmHg
ОРТНА	L CHECK : Righ	t Eye : 6	16.	Left Eye: 6/6.	Colour vision :
	Ms. Mo	usumi	Podde	e clinical examination  8 on9 9  examination it has been	
	FIT FOR Fit with re	HORK.	TR I e	ions	so only
	Though following the job.  1				nese are not impediments to
*	However the emple communicated to h	oyee should		ice/medication that has been	1
	• Currently Review after Mi			recommen	ded
	• Unfit ∼	n		Dr. Medical	M.B.B.S.
	LLOC	411		Apolfoci	officer 51903 inic(Location)

116 \*

This certificate is not meant for medico-legal purposes

# **DEPT. OF APOLLO HEALTH CHECK**



# **GYNAECOLOGY CONSULT**

Name: My. W	lo Vsumi	Podde
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UHID: 138/66

Date: 69/09/93

Age: 32575

Consultant Gynaecologist: Dr. New Horrer

**DRUG ALLERGIES** 

Complaints (related to Gynaec) - NIL SPECIFIC / YES

	Iclo Hypotheymiden
Known to have Diabetes / Hypertension / IHD / Asthma / Thyroid / Others	JR to 100meg
Past Medical / Surgical History : / (/ 🧸 /	- ·

Family History:

**OTHER SYSTEMS:** 

**GYNAEC HISTORY:** 

Marital Status - S/M/Others

Children - May 6 grs

Deliveries -

L.C.B. - TIM/deps / LSCS.

Abortion

Contraception -  $4m^2 - 20(8/23)$ 

Periods - O

L.M.P. -

Menopause

**GYNAEC EXAMINATION:** 

P/A Soft S/E m gragina health

P/R

PAP SMEAR: Taken / Not Taken (Reason)

**OPINION & ADVICE:** 

Present Medication:

**GENERAL EXAMINATION:** 

Height: Weight:

General Condition:

**Blood Pressure:** 

Thyroid:
Others:

BREASTS: DICSOFF

**REVIEW DETAILS**: (With date) With Patient / With reports only

Signature with Date & Time:

P.T.O. for more space

# **OPTHALMOLOGY**



Name Mes. Mousum podder	Date 09/09/2023.
	UHID No. 138166
Sex: Male Female	·

# **OPHTHAL FITNESS CERTIFICATE**

RE

LE

**DV-UCVA** 

6/24 18 PST

6/36St PENN No

**DV-BCVA** 

**ANTERIOR SEGMENT** 

IOP

**FIELDS OF VISION EOM** 

**COLOUR VISION** 

**NEAR VISION** 

**IMPRESSION** 

**FUNDUS** 

**ADVICE** 

fit /R/A- 6 to 8 months.

2.00 | ō.75 x2q.

Patient Name : Mrs. MOUSUMI PODDER Age : 32 Y/F

UHID : CVEL.0000138166 OP Visit No : CVELOPV190057 Conducted By: : Dr SHANMUGA SUNDARAM D Conducted Date : 09-09-2023 17:40

Referred By : SELF

# **2D-ECHO WITH COLOUR DOPPLER**

Dimensions:

Ao (ed) 2.3CM LA (es) 3.2 CM LVID (ed) 4.4 CM LVID (es) 2.7 CM IVS (Ed) 1.0 CM LVPW (Ed) 1.1 CM EF 68.00% %FD 38.00%

MITRAL VALVE: NORMAL

AML NORMAL PML NORMAL

AORTIC VALVE NORMAL

TRICUSPID VALVE NORMAL

RIGHT VENTRICLE NORMAL

INTER ATRIAL SEPTUM INTACT

INTER VENTRICULAR SEPTUM INTACT

AORTA NORMAL

RIGHT ATRIUM NORMAL

LEFT ATRIUM NORMAL

Pulmonary Valve NORMAL

PERICARDIUM NORMAL

LEFT VENTRICLE:

Patient Name : Mrs. MOUSUMI PODDER Age : 32 Y/F

UHID : CVEL.0000138166 OP Visit No : CVELOPV190057 Conducted By: : Dr SHANMUGA SUNDARAM D Conducted Date : 09-09-2023 17:40

Referred By : SELF

# **Doppler studies**

AV max 1.3 m/s; PG 6.7 mmHg;

PV max 1.0 m/s; PG 3.3 mmHg;

MV E 0.8 m/s; MV A 0.6 m/s;

TV E 0. 3 m/s; TV A 0.5 m/s.

### **Impression**

\*NO REGIONAL WALL MOTION ABNORMALITY;

\*NORMAL LEFT VENTRICULAR IN SIZE AND SYSTOLIC FUNCTION;

\* NO PERICARDIAL EFFUSION/PULMONARY ARTERY HYPERTENSION;

DR SHANMUGA SUNDARAM

CONSULTANT CARDIOLOGIST