

Patient Name : Mrs.VARSHA PANDEY	Collected : 24/Feb/2024 11:04AM
Age/Gender : 28 Y 10 M 15 D/F	Received : 24/Feb/2024 03:45PM
UHID/MR No : CPIM.0000053888	Reported : 24/Feb/2024 04:56PM
Visit ID : CPIMOPV157396	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobS10890	

DEPARTMENT OF HAEMATOLOGY

PERIPHERAL SMEAR , WHOLE BLOOD EDTA

RBC's Anisocytosis+, Microcytes+, Elliptocytes+  
WBC's are normal in number and morphology  
Platelets are Adequate  
No Abnormal cells/hemoparasite seen.



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

SIN No:BED240048962

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



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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
<b>HEMOGRAM , WHOLE BLOOD EDTA</b>				
HAEMOGLOBIN	10.8	g/dL	12-15	Spectrophotometer
PCV	32.10	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.24	Million/cu.mm	3.8-4.8	Electrical Impedance
MCV	75.8	fL	83-101	Calculated
MCH	25.5	pg	27-32	Calculated
MCHC	33.6	g/dL	31.5-34.5	Calculated
R.D.W	16.6	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	6,600	cells/cu.mm	4000-10000	Electrical Impedance
<b>DIFFERENTIAL LEUCOCYTIC COUNT (DLC)</b>				
NEUTROPHILS	55.6	%	40-80	Electrical Impedance
LYMPHOCYTES	28.6	%	20-40	Electrical Impedance
EOSINOPHILS	6.8	%	1-6	Electrical Impedance
MONOCYTES	8.4	%	2-10	Electrical Impedance
BASOPHILS	0.6	%	<1-2	Electrical Impedance
<b>ABSOLUTE LEUCOCYTE COUNT</b>				
NEUTROPHILS	3669.6	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	1887.6	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	448.8	Cells/cu.mm	20-500	Calculated
MONOCYTES	554.4	Cells/cu.mm	200-1000	Calculated
BASOPHILS	39.6	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	1.94		0.78- 3.53	Calculated
PLATELET COUNT	203000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	11	mm at the end of 1 hour	0-20	Modified Westergren
<b>PERIPHERAL SMEAR</b>				

RBC's Anisocytosis+, Microcytes+, Elliptocytes+  
WBC's are normal in number and morphology  
Platelets are Adequate  
No Abnormal cells/hemoparasite seen.



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



SIN No:BED240048962

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UHID/MR No : CPIM.0000053888	Reported : 24/Feb/2024 05:54PM
Visit ID : CPIMOPV157396	Status : Final Report
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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
<b>BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA</b>				
BLOOD GROUP TYPE	A			Microplate Hemagglutination
Rh TYPE	Positive			Microplate Hemagglutination



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

SIN No: BED240048962

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Patient Name : Mrs.VARSHA PANDEY	Collected : 24/Feb/2024 11:04AM
Age/Gender : 28 Y 10 M 15 D/F	Received : 24/Feb/2024 03:57PM
UHID/MR No : CPIM.0000053888	Reported : 24/Feb/2024 05:37PM
Visit ID : CPIMOPV157396	Status : Final Report
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Emp/Auth/TPA ID : bobS10890	

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	85	mg/dL	70-100	HEXOKINASE

Comment:

As per American Diabetes Guidelines, 2023

Fasting Glucose Values in mg/dL	Interpretation
70-100 mg/dL	Normal
100-125 mg/dL	Prediabetes
≥126 mg/dL	Diabetes
<70 mg/dL	Hypoglycemia

Note:

- The diagnosis of Diabetes requires a fasting plasma glucose of > or = 126 mg/dL and/or a random / 2 hr post glucose value of > or = 200 mg/dL on at least 2 occasions.
- Very high glucose levels (>450 mg/dL in adults) may result in Diabetic Ketoacidosis & is considered critical.



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

SIN No: PLF02112771

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





Patient Name : Mrs.VARSHA PANDEY	Collected : 24/Feb/2024 11:04AM
Age/Gender : 28 Y 10 M 15 D/F	Received : 24/Feb/2024 03:43PM
UHID/MR No : CPIM.0000053888	Reported : 24/Feb/2024 06:29PM
Visit ID : CPIMOPV157396	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobS10890	

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

**Comment:**

It is recommended that FBS and PPBS should be interpreted with respect to their Biological reference ranges and not with each other.

Conditions which may lead to lower postprandial glucose levels as compared to fasting glucose levels may be due to reactive hypoglycemia, dietary meal content, duration or timing of sampling after food digestion and absorption, medications such as insulin preparations, sulfonylureas, amylin analogues, or conditions such as overproduction of insulin.

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA</b>				
HBA1C, GLYCATED HEMOGLOBIN	6	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	126	mg/dL		Calculated

**Comment:**

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

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

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

- HbA1C is recommended by American Diabetes Association for Diagnosing Diabetes and monitoring Glycemic Control by American Diabetes Association guidelines 2023.
- Trends in HbA1C values is a better indicator of Glycemic control than a single test.
- Low HbA1C in Non-Diabetic patients are associated with Anemia (Iron Deficiency/Hemolytic), Liver Disorders, Chronic Kidney Disease. Clinical Correlation is advised in interpretation of low Values.



Dr Sneha Shah  
MBBS, MD (Pathology)  
Consultant Pathologist

SIN No:EDT240022085

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Patient Name : Mrs.VARSHA PANDEY	Collected : 24/Feb/2024 11:04AM
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**DEPARTMENT OF BIOCHEMISTRY**

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

- Falsely low HbA1c (below 4%) may be observed in patients with clinical conditions that shorten erythrocyte life span or decrease mean erythrocyte age. HbA1c may not accurately reflect glycemic control when clinical conditions that affect erythrocyte survival are present.
- In cases of Interference of Hemoglobin variants in HbA1C, alternative methods (Fructosamine) estimation is recommended for Glycemic Control
  - A: HbF >25%
  - B: Homozygous Hemoglobinopathy.
 (Hb Electrophoresis is recommended method for detection of Hemoglobinopathy)



Dr Sneha Shah  
MBBS, MD (Pathology)  
Consultant Pathologist

SIN No:EDT240022085

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Patient Name : Mrs.VARSHA PANDEY	Collected : 24/Feb/2024 11:04AM
Age/Gender : 28 Y 10 M 15 D/F	Received : 24/Feb/2024 04:06PM
UHID/MR No : CPIM.0000053888	Reported : 24/Feb/2024 08:54PM
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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
<b>LIPID PROFILE , SERUM</b>				
TOTAL CHOLESTEROL	139	mg/dL	<200	CHO-POD
TRIGLYCERIDES	65	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	48	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	91	mg/dL	<130	Calculated
LDL CHOLESTEROL	77.63	mg/dL	<100	Calculated
VLDL CHOLESTEROL	13.02	mg/dL	<30	Calculated
CHOL / HDL RATIO	2.88		0-4.97	Calculated

**Comment:**

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

	Desirable	Borderline High	High	Very High
TOTAL CHOLESTEROL	< 200	200 - 239	≥ 240	
TRIGLYCERIDES	<150	150 - 199	200 - 499	≥ 500
LDL	Optimal < 100 Near Optimal 100-129	130 - 159	160 - 189	≥ 190
HDL	≥ 60			
NON-HDL CHOLESTEROL	Optimal <130; Above Optimal 130-159	160-189	190-219	>220

- Measurements in the same patient on different days can show physiological and analytical variations.
- NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.
- Primary prevention algorithm now includes absolute risk estimation and lower LDL Cholesterol target levels to determine eligibility of drug therapy.
- Low HDL levels are associated with Coronary Heart Disease due to insufficient HDL being available to participate in reverse cholesterol transport, the process by which cholesterol is eliminated from peripheral tissues.
- As per NCEP guidelines, all adults above the age of 20 years should be screened for lipid status. Selective screening of children above the age of 2 years with a family history of premature cardiovascular disease or those with at least one parent with high total cholesterol is recommended.
- VLDL, LDL Cholesterol Non HDL Cholesterol, CHOL/HDL RATIO, LDL/HDL RATIO are calculated parameters when Triglycerides are below 400 mg/dL. When Triglycerides are more than 400 mg/dL LDL cholesterol is a direct measurement.

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



SIN No:SE04640857

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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
<b>LIVER FUNCTION TEST (LFT) , SERUM</b>				
BILIRUBIN, TOTAL	0.51	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.14	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.37	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	16.38	U/L	<35	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	18.6	U/L	<35	IFCC
ALKALINE PHOSPHATASE	<b>133.08</b>	U/L	30-120	IFCC
PROTEIN, TOTAL	6.82	g/dL	6.6-8.3	Biuret
ALBUMIN	4.26	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.56	g/dL	2.0-3.5	Calculated
A/G RATIO	1.66		0.9-2.0	Calculated

**Comment:**

LFT results reflect different aspects of the health of the liver, i.e., hepatocyte integrity (AST & ALT), synthesis and secretion of bile (Bilirubin, ALP), cholestasis (ALP, GGT), protein synthesis (Albumin)

Common patterns seen:

**1. Hepatocellular Injury:**


- AST – Elevated levels can be seen. However, it is not specific to liver and can be raised in cardiac and skeletal injuries.
- ALT – Elevated levels indicate hepatocellular damage. It is considered to be most specific lab test for hepatocellular injury. Values also correlate well with increasing BMI.
- Disproportionate increase in AST, ALT compared with ALP.
- Bilirubin may be elevated.
- AST: ALT (ratio) – In case of hepatocellular injury AST: ALT > 1 In Alcoholic Liver Disease AST: ALT usually >2. This ratio is also seen to be increased in NAFLD, Wilson's's diseases, Cirrhosis, but the increase is usually not >2.

**2. Cholestatic Pattern:**

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

**3. Synthetic function impairment:**

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



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

SIN No:SE04640857

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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
<b>RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM</b>				
CREATININE	0.37	mg/dL	0.55-1.02	Modified Jaffe, Kinetic
UREA	16.98	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	7.9	mg/dL	8.0 - 23.0	Calculated
URIC ACID	3.51	mg/dL	2.6-6.0	Uricase PAP
CALCIUM	8.61	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	2.96	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	138.5	mmol/L	136-146	ISE (Indirect)
POTASSIUM	4.0	mmol/L	3.5-5.1	ISE (Indirect)
CHLORIDE	104.14	mmol/L	101-109	ISE (Indirect)



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



SIN No:SE04640857


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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	18.95	U/L	<38	IFCC



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



SIN No:SE04640857

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Patient Name : Mrs.VARSHA PANDEY	Collected : 24/Feb/2024 11:04AM
Age/Gender : 28 Y 10 M 15 D/F	Received : 24/Feb/2024 04:07PM
UHID/MR No : CPIM.0000053888	Reported : 24/Feb/2024 04:37PM
Visit ID : CPIMOPV157396	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobS10890	

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

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

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

Result/s to Follow:  
LBC PAP TEST (PAPSURE)

  
Dr Sneha Shah  
MBBS, MD (Pathology)  
Consultant Pathologist

SIN No:UF010807

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



**Patient Name** : Mrs. VARSHA PANDEY

**Age/Gender** : 28 Y/F

**UHID/MR No.** : CPIM.0000053888

**OP Visit No** : CPIMOPV157396

**Sample Collected on** :

**Reported on** : 24-02-2024 16:23

**LRN#** : RAD2247183

**Specimen** :

**Ref Doctor** : SELF

**Emp/Auth/TPA ID** : bobS10890

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**DEPARTMENT OF RADIOLOGY**

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**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. VARSHA PANDEY

**Age/Gender** : 28 Y/F

**UHID/MR No.** : CPIM.0000053888

**OP Visit No** : CPIMOPV157396

**Sample Collected on** :

**Reported on** : 24-02-2024 15:01

**LRN#** : RAD2247183

**Specimen** :

**Ref Doctor** : SELF

**Emp/Auth/TPA ID** : bobS10890

## 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 8.8 mm. No intra/extra uterine gestational sac seen.

**Both ovaries** appear normal in size, shape and echotexture.

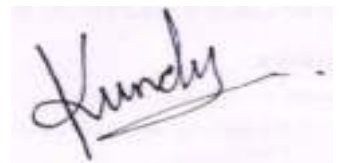
No evidence of any adnexal pathology noted.

#### **IMPRESSION:-**

**No significant abnormality detected.**

**Suggest – clinical correlation.**

(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







Patient Name : Mrs.VARSHA PANDEY Age/Gender : 28 Y 10 M 15 D/F UI ID/MR No : CP/M.000003996 VGL ID : CPI/MO-PM157358 Ref Doctor : Dr.SELF Emp/Auth/IFA ID : sobS10830	Collected : 24/Feb/2024 11:04AM Received : 24/Feb/2024 03:46PM Reported : 24/Feb/2024 04:58PM Status : Final Report Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
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**DEPARTMENT OF HAEMATOLOGY**

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




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

S/N No:DED240648962

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













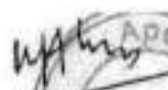


Patient Name : Mrs.VARSHA PANDY Age/Gender : 28 Y 10 M 15 D/F UH C/M/R No : CHIM.0000053800 Visit ID : CPIMOPV157395 Ref Doctor : Dr.SELF Emp/Auth/TPA ID : sobS10590	Collected : 24/Feb/2024 11:04AM Received : 24/Feb/2024 04:06PM Reported : 24/Feb/2024 08:54PM Status : Final Report Sponsor Name : ARCOFEMI HEALTH-CARE LIMITED
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**DEPARTMENT OF BIOCHEMISTRY**

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

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BLOOD UREA NITROGEN	7.9	mg/dL	5.0 - 23.0	Calculated
URIC ACID	3.51	mg/dL	2.6-6.0	Uricase PAP
CALCIUM	8.61	mg/dL	8.9-10.8	Arsenazo III
PHOSPHORUS, INORGANIC	2.98	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	136.5	mmol/L	136-146	ISE (Indirect)
POTASSIUM	4.0	mmol/L	3.5-5.1	ISE (Indirect)
CHLORIDE	104.14	mmol/L	101-109	ISE (Indirect)



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



SIN No:SF04640K57

This test has been performed at Apollo Health and Lifestyle Ltd- Sadeally Peti, PUNE, Diagnostics Lab











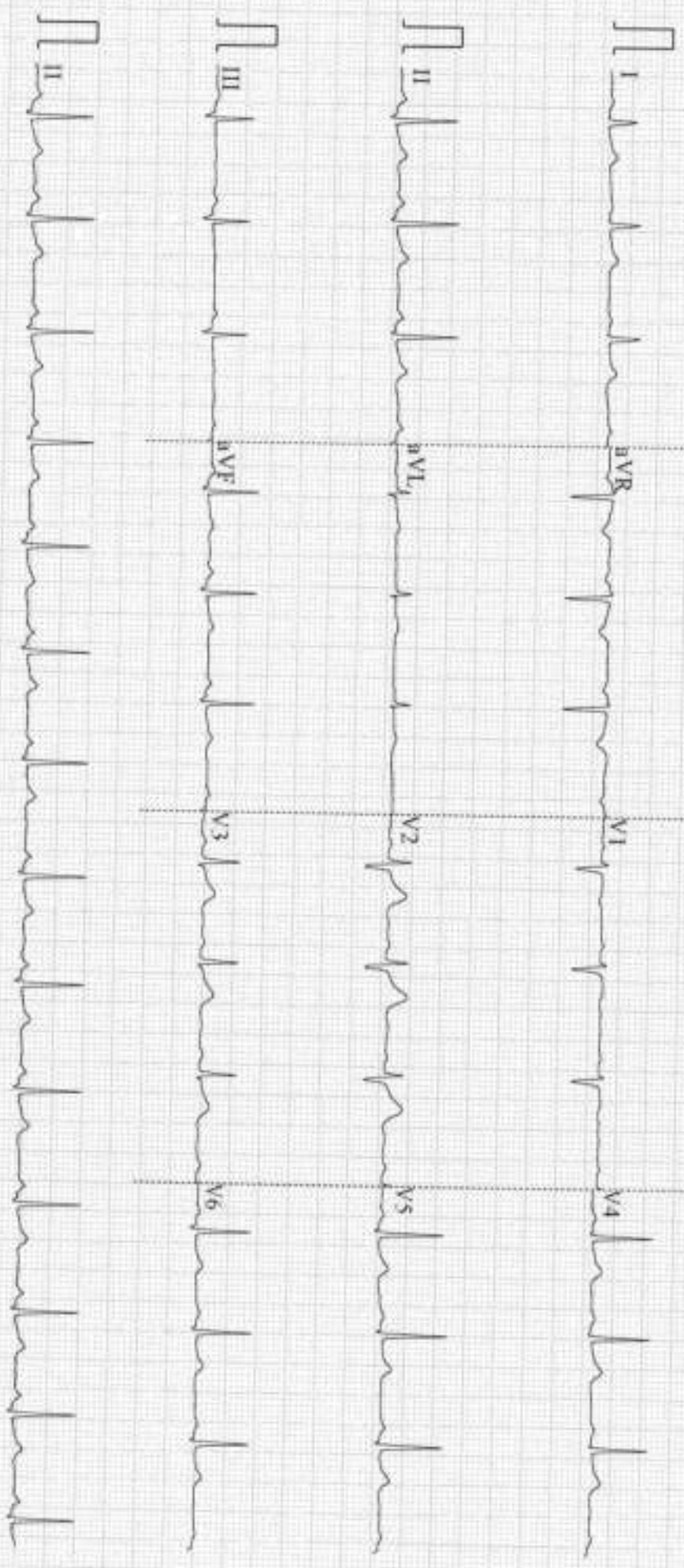
VARSHA PANDEY  
Female 28Years

HR : 82 bpm  
P : 94 ms  
PR : 141 ms  
QRS : 76 ms  
QT/QTc : 340/397 ms  
P/QRST : 66/52/46 °  
RV5/SVI : 1.067/0.438 mV

Diagnosis Information:  
Sinus Rhythm  
\*\*\*Normal ECG\*\*\*

*Well  
Awake*

Report Confirmed by:



Patient Name	: Mrs. VARSHA PANDEY	Age	: 28 Y F
UHID	: CPIM.0000053888	OP Visit No	: CPIMOPV157396
Reported on	: 24-02-2024 12:42	Printed on	: 24-02-2024 16:23
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: 24-02-2024 12:42

---End of the Report---



**Dr. KIRAN PRALHAD SUDHARE**  
**MBBS, DMRD**  
Radiology

Patient Name	: Mrs. VARSHA PANDEY	Age	: 28 Y F
UNITD	: CPTM.0000053888	OP Visit No	: CPTMOPV157396
Reported on	: 24-02-2024 12:25	Printed on	: 24-02-2024 15:01
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 calculi. 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 8.8 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:-**

**No significant abnormality detected.**

**Suggest - clinical correlation.**

Patient Name : Mrs. VARSHA PANDEY  
UHID : CPTM.0000053888  
Reported on : 24-02-2024 12:25  
Admin/Consult Doctor :  
Age : 28 Y F  
OP Visit No : CP1MOPV157396  
Printed on : 24-02-2024 15:01  
Ref Doctor : SELJ

(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.

Printed on:24-02-2024 12:25

--End of the Report--



**Dr. KUNDAN MEHTA**  
**MBBS, DMRE (RADIOLOGY)**  
Radiology

**2D ECHOCARDIOGRAPHY & COLOUR DOPPLER STUDY**

<b>Patient's Name: MRS. VARSHA PANDEY</b>	<b>Age/Sex: 28 /F</b>
<b>Ref: ARCOFEMI</b>	<b>Date: 24.02.2024</b>

**2 DIMENSIONAL ECHOCARDIOGRAPHY:**

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

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

1. Normal transvalvular pressure gradients, No AR, Trivial MR/TR
2. No LV diastolic dysfunction
3. No pulmonary hypertension
4. No Intracardiac or extracardiac shunt noted

**DIMENSIONS (M-MODE) :**

Left Atrium	27.0 mm	Aortic Root	25.0 mm
IVS (d)	09.0 mm	IVS (s)	14.0 mm
LVID (d)	43.0 mm	LVID (s)	22.0 mm
LVPW(d)	09.0 mm	LVPW(s)	14.0 mm

**IMPRESSION :**

**NORMAL CARDIAC CHAMBER DIMENSIONS**

**NO RWMA; LVEF = 60%**

**NO LV DIASTOLIC DYSFUNCTION**

**GOOD RIGHT VENTRICULAR FUNCTION**

**NORMAL CARDIAC VALVES**

**NO PULMONARY HYPERTENSION**

**IAS/IVS INTACT**

**NO CLOTT/VEGETATION/PERICARDIAL EFFUSION**



**DR. RAJENDRA V. CHAVAN**

**MD (MEDICINE), DM (CARDIOLOGY)**

**CONSULTANT CARDIOLOGIST**





Varsha Pandey

28yr

24/2/24

Height :	Weight :	BMI :	Waist Circum :
Temp :	Pulse :	Resp :	B.P :

**General Examination / Allergies History**

**Clinical Diagnosis & Management Plan**

Comp + 11/2/24  
 POC RML -  
 5-6 days of heavy  
 hi - F TCS - 15mlh (F)  
 icallan PM  
 No other any medication  
 P/A: sub  
 P/S: Cr-Ug (M)

(F) how to auto  
 problem  
 except  
 anemia

5/1/24  
 sub Vit B12  
 sr. Vit D3

Follow up date:

TACHION  
 Dr. Anil Chandra  
  
 Doctor Signature

Mrs Varsha Pandey.

28 yrs / F.

Ht - 164 cm      wt - 61 kg.

24th Feb. 2024.

Dietary habit - Vegetarian diet.

Daily Diet

- Morning Time :- 1 glass luke warm water with 1 spoon ajawne, sof powder
- Morning :- 1 cup milk + add cinnamon powder.  
OR :- 4-5 Almonds + 4-5 walnut + Figs.
- Breakfast :- Mng chilla & curd / Sprouts boiled.  
OR 2-3 Idli (Rice, dal) + Sambar.  
+ Fruit :- [Avoid fruit juices]
- Mid Time - Buttermilk.
- Lunch :- 1 Big Bowl Salad + Roti + Sabji + Dal / Sprouts / Dahi Kadhi / Steamed dal wada. + Rice [No rice at night time]
- Evening :- Fruit plate.
- Dinner - 7-30 - 8 pm :- Salad + Roti + Sabji + Dal.
- Bed Time :- 1 glass luke warm water with 1 spoon ajawne, sof powder.

ds



Date : 24-02-2024  
MR NO : CPIM.0000053888

Department : GENERAL  
Doctor :

Name : Mrs. VARSHA PANDEY  
Age/ Gender : 28 Y / Female

Registration No : Ht 159  
Qualification : ht 61.5  
BP 110/70

Consultation Timing: 09:47

BMI -

Mother: TSH

SIE

CVS: S<sub>1</sub> S<sub>2</sub> ⊕

RS: ACBL

Diet Veg.

CNS: NAD

PA: NAD

No known allergy

DSCS

1.5 yrs ago

Anam

28

Name : Mrs. VARSHA PANDEY      Age: 28 Y      Sex: F      UHID:OPIN.0063053388

Address : FL 25, PRACHINIS SOCIETY, NEGLI PRADIKARAN      GP Number:OPINOPV157396

Plan : ARCOFIMI MED|WHBL FEMALE AIC CREDIT PAN INDIA OP AGREEMENT      RUI No :CPDA\_OCR\_76275      Date : 24.02.2024 09:47

Sno	Service Type/ServiceName	Department
1	ARCOFIMI - MED WHBL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D FCIO - PAN INDIA - FY2324	
<input checked="" type="checkbox"/>	1 GAMMA GLUTAMYL TRANSFERASE (GGT)	
<input checked="" type="checkbox"/>	2 2D FCIO	
<input checked="" type="checkbox"/>	3 LIVER FUNCTION TEST (LFT)	
<input checked="" type="checkbox"/>	4 GLUCOSE, FASTING	
<input checked="" type="checkbox"/>	5 HEMOGRAM - PERIPHERAL SMEAR	
<input checked="" type="checkbox"/>	6 GYNAECOLOGY CONSULTATION	
<input checked="" type="checkbox"/>	7 DIET CONSULTATION	
<input checked="" type="checkbox"/>	8 COMPLETE URINE EXAMINATION	
<input checked="" type="checkbox"/>	9 URINE GLUCOSE (POST PRANDIAL)	
<input checked="" type="checkbox"/>	10 PERIPHERAL SMEAR	
<input checked="" type="checkbox"/>	11 PBCG	
<input checked="" type="checkbox"/>	12 GYN PAP TEST- PAPSURE	
<input checked="" type="checkbox"/>	13 RENAL PROFILE/RENAL FUNCTION TEST (RPF/RFT)	
<input checked="" type="checkbox"/>	14 DENTAL CONSULTATION	
<input checked="" type="checkbox"/>	15 GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL) <i>MISS-</i>	
<input checked="" type="checkbox"/>	16 URINE GLUCOSE (FASTING)	
<input checked="" type="checkbox"/>	17 HbA1c GLYCATED HEMOGLOBIN	
<input checked="" type="checkbox"/>	18 X-RAY CHEST PA	
<input checked="" type="checkbox"/>	19 ENT CONSULTATION	
<input checked="" type="checkbox"/>	20 FITNESS BY GENERAL PHYSICIAN	
<input checked="" type="checkbox"/>	21 BLOOD GROUP ABO AND RH FACTOR	
<input checked="" type="checkbox"/>	22 LIPID PROFILE	
<input checked="" type="checkbox"/>	23 BODY MASS INDEX (BMI)	
<input checked="" type="checkbox"/>	24 OPHTHAL BY GENERAL PHYSICIAN	
<input checked="" type="checkbox"/>	25 ULTRASOUND - WHOLE ABDOMEN	
<input checked="" type="checkbox"/>	26 THYROID PROFILE (TOTAL T3, T4, T4, TSE)	

*Audio*

*Am*

*Sono Mamma  
NIRAMI*

*EN Met B12  
Si Met D3*

*30501-*



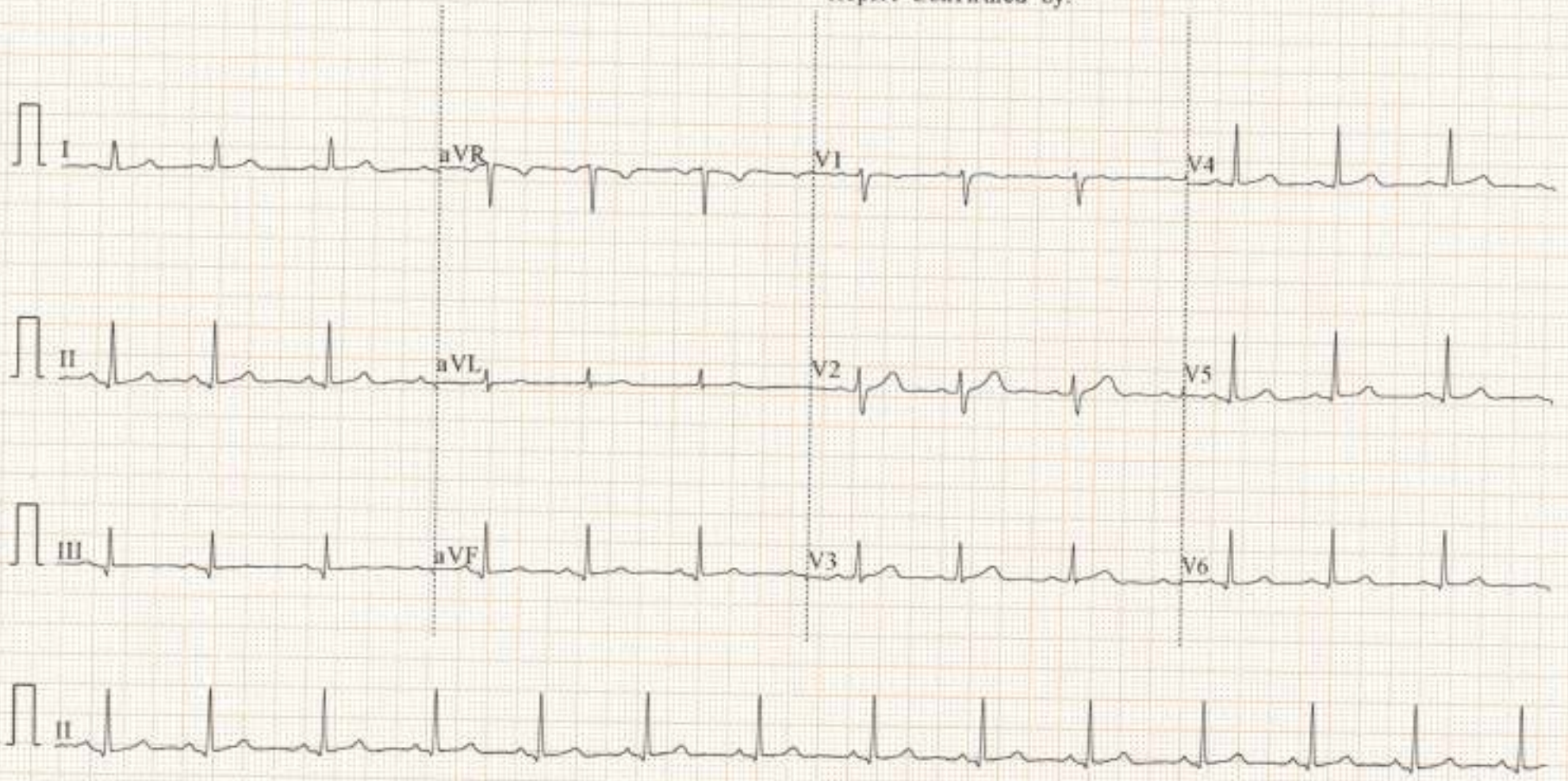
ID: 240  
VARSHA PANDEY  
Female 28Years

24-02-2024 11:18:36 AM  
HR : 82 bpm  
P : 94 ms  
PR : 141 ms  
QRS : 76 ms  
QT/QTc : 340/397 ms  
P/QRS/T : 66/52/46 °  
RV5/SV1 : 1.067/0.438 mV

Diagnosis Information:  
Sinus Rhythm  
\*\*\*Normal ECG\*\*\*

*sent from*

Report Confirmed by:





Name: Mrs. VARSHA PANDEY  
Age/Gender: 28 Y/F  
Address: FL 25, PRACHI HSG SOCIETY, NIGDI PRADHIKARAN  
Location: PUNE, MAHARASHTRA  
Doctor:  
Department: GENERAL  
Rate Plan: PIMPRI\_06042023  
Sponsor: ARCOFEMI HEALTHCARE LIMITED  
Consulting Doctor: Dr. PRADNYA AJAYKUMAR VASUDEV

MR No: CPIM.0000053888  
Visit ID: CPIMOPV157396  
Visit Date: 24-02-2024 09:47  
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**

Date : 24-02-2024  
MR NO : CPIM.0000053888

Department : GENERAL  
Doctor :

Name : Mrs. VARSHA PANDEY

Registration No :

Age/ Gender : 28 Y / Female

Qualification :

Ht 159  
wt 61.5  
BP 110/70

Consultation Timing: 09:47

BMI -

No other: TSH

SLE

CS: S<sub>1</sub> S<sub>2</sub> ⊕

RS: ACBL

Diet Veg. CNS: NAD.  
PA: NAD.

No known allergy

DSCS

1.5 yrs ago

Anam

Name: Mrs. VARSHA PANDEY  
Age/Gender: 28 Y/F  
Address: FL 25, PRACHI HSG SOCIETY, NIGDI PRADHIKARAN  
Location: PUNE, MAHARASHTRA  
Doctor:  
Department: GENERAL  
Rate Plan: PIMPRI\_06042023  
Sponsor: ARCOFEMI HEALTHCARE LIMITED  
Consulting Doctor: Dr. PRADNYA AJAYKUMAR VASUDEV

MR No: CPIM.0000053888  
Visit ID: CPIMOPV157396  
Visit Date: 24-02-2024 09:47  
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**HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS**

**SYSTEMIC REVIEW**

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**SYSTEMIC EXAMINATION**

**IMPRESSION**

**RECOMMENDATION**

**Doctor's Signature**

Name: Mrs. VARSHA PANDEY  
Age/Gender: 28 Y/F  
Address: FL 25, PRACHI HSG SOCIETY, NIGDI PRADHIKARAN  
Location: PUNE, MAHARASHTRA  
Doctor:  
Department: GENERAL  
Rate Plan: PIMPRI\_06042023  
Sponsor: ARCOFEMI HEALTHCARE LIMITED  
Consulting Doctor: Dr. SUPRIYA GAWARE

MR No: CPIM.0000053888  
Visit ID: CPIMOPV157396  
Visit Date: 24-02-2024 09:47  
Discharge Date:  
Referred By: SELF

**Doctor's Signature**

Name: Mrs. VARSHA PANDEY  
Age/Gender: 28 Y/F  
Address: FL 25, PRACHI HSG SOCIETY, NIGDI PRADHIKARAN  
Location: PUNE, MAHARASHTRA  
Doctor:  
Department: GENERAL  
Rate Plan: PIMPRI\_06042023  
Sponsor: ARCOFEMI HEALTHCARE LIMITED  
Consulting Doctor: Miss. SNEHA NAIR

MR No: CPIM.0000053888  
Visit ID: CPIMOPV157396  
Visit Date: 24-02-2024 09:47  
Discharge Date:  
Referred By: SELF

**Doctor's Signature**

Name: Mrs. VARSHA PANDEY  
Age/Gender: 28 Y/F  
Address: FL 25, PRACHI HSG SOCIETY, NIGDI PRADHIKARAN  
Location: PUNE, MAHARASHTRA  
Doctor:  
Department: GENERAL  
Rate Plan: PIMPRI\_06042023  
Sponsor: ARCOFEMI HEALTHCARE LIMITED  
Consulting Doctor: Dr. ANAM ABDUL AZIZ INAMDAR

MR No: CPIM.0000053888  
Visit ID: CPIMOPV157396  
Visit Date: 24-02-2024 09:47  
Discharge Date:  
Referred By: SELF

**HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS**

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**RECOMMENDATION**

**Doctor's Signature**



Name: Mrs. VARSHA PANDEY  
Age/Gender: 28 Y/F  
Address: FL 25, PRACHI HSG SOCIETY, NIGDI PRADHIKARAN  
Location: PUNE, MAHARASHTRA  
Doctor:  
Department: GENERAL  
Rate Plan: PIMPRI\_06042023  
Sponsor: ARCOFEMI HEALTHCARE LIMITED  
Consulting Doctor: Dr. ARCHANA CHANDAK

MR No: CPIM.0000053888  
Visit ID: CPIMOPV157396  
Visit Date: 24-02-2024 09:47  
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
24-02-2024 15:16	80 Beats/min	110/70 mmHg	18 Rate/min	98 F	159 cms	61.5 Kgs	%	%	Years	24.33	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
24-02-2024 15:16	80 Beats/min	110/70 mmHg	18 Rate/min	98 F	159 cms	61.5 Kgs	%	%	Years	24.33	cms	cms	cms		AHLL03446

Patient Name : Mrs. VARSHA PANDEY  
UHID : CPIM.0000053888  
Conducted By: :  
Referred By : SELF

Age : 28 Y/F  
OP Visit No : CPIMOPV157396  
Conducted Date : 26-02-2024 17:58

**2 DIMENSIONAL ECHOCARDIOGRAPHY:**

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

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

1. Normal transvalvular pressure gradients, No AR, Trivial MR/TR
2. No LV diastolic dysfunction
3. No pulmonary hypertension
4. No intracardiac or extracardiac shunt noted

**DIMENSIONS (M-MODE) :**

Left Atrium	27.0 mm	Aortic Root	25.0 mm
IVS (d)	09.0 mm	IVS (s)	14.0 mm
LVID (d)	43.0 mm	LVID (s)	22.0 mm
LVPW(d)	09.0 mm	LVPW(s)	14.0 mm

**IMPRESSION :**

**NORMAL CARDIAC CHAMBER DIMENSIONS**

**NO RWMA; LVEF = 60%**

**NO LV DIASTOLIC DYSFUNCTION**

**GOOD RIGHT VENTRICULAR FUNCTION**

**NORMAL 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. VARSHA PANDEY  
UHID : CPIM.0000053888  
Conducted By: :  
Referred By : SELF

Age : 28 Y/F  
OP Visit No : CPIMOPV157396  
Conducted Date :

Patient Name : Mrs. VARSHA PANDEY  
UHID : CPIM.0000053888  
Conducted By :  
Referred By : SELF

Age : 28 Y/F  
OP Visit No : CPIMOPV157396  
Conducted Date :

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