

APOLLO CLINIC

CONSENT FORM

PATIENT NAME Mrs. A. Sudhakar AGE: 31y

UHID NUMBER CN12-123254 COMPANY NAME Arcofemi Mediworks

I ~~MR~~/MRS/MS A. Sudhakar EMPLOYEE OF Arcofemi Mediworks

COMPANY WANT TO INFORM YOU THAT I AM NOT INTERESTED IN

GETTING..... PAP (Delivery within 3 months)

TEST DONE WHICH IS A PART OF MY ROUTINE HEALTH CHECK PACKAGE.

AND I CLAIM THE ABOVE STATEMENT IN MY FULL CONSCIOUSNESS.

PATIENT SIGNATURE A. Sudha

DATE: 24-02-2024

प्रति,

समन्वयक,

Mediwheel (Arcofemi Healthcare Limited)

हेल्पलाइन नंबर: 011-41195959

महोदय/ महोदया,

विषय: बैंक ऑफ़ बड़ौदा के कर्मचारियों के लिए वार्षिक स्वास्थ्य जांच।

हम आपको सूचित करना चाहते हैं कि हमारे कर्मचारी की पत्नी/पति जिनके विवरण निम्नानुसार हैं हमारे करार के अनुसार आपके द्वारा उपलब्ध कराई गई कैशलेस वार्षिक स्वास्थ्य जांच सुविधा का लाभ लेना चाहते हैं।

स्वास्थ्य जांच लाभार्थी के विवरण	
नाम	SUDHA DEVI
जन्म की तारीख	28-04-1992
कर्मचारी की पत्नी/पति के स्वास्थ्य जांच की प्रस्तावित तारीख	24-02-2024
बुकिंग संदर्भ सं.	23M171635100093472S
पत्नी/पति के विवरण	
कर्मचारी का नाम	MR. AMBATI ANANDAKUMAR
कर्मचारी की क.कू.संख्या	171635
कर्मचारी का पद	BRANCH HEAD
कर्मचारी के कार्य का स्थान	HYDERABAD, MANIKONDA VB
कर्मचारी के जन्म की तारीख	10-05-1988

यह अनुमोदन/ संस्तुति पत्र तभी वैध माना जाएगा जब इसे बैंक ऑफ़ बड़ौदा के कर्मचारी आईडी कार्ड की प्रति के साथ प्रस्तुत किया जाएगा। यह अनुमोदन पत्र दिनांक 23-02-2024 से 31-03-2024 तक मान्य है। इस पत्र के साथ किए जाने वाले चिकित्सा जांच की सूची अनुलग्नक के रूप में दी गई है। कृपया नोट करें कि उक्त स्वास्थ्य जांच हमारी टाई-अप व्यवस्था के अनुसार कैशलेस सुविधा है। हम अनुरोध करते हैं कि आप हमारे कर्मचारी के पत्नी/पति की स्वास्थ्य जांच संबंधी आवश्यकताओं पर उचित कार्रवाई करें तथा इस संबंध में अपनी सर्वोच्च प्राथमिकता तथा सर्वोत्तम संसाधन उपलब्ध कराएं। उपर्युक्त सारणी में दी गई कर्मचारी कूट संख्या एवं बुकिंग संदर्भ संख्या का उल्लेख अनिवार्य रूप से इनवॉइस में किया जाना चाहिए।

हम इस संबंध में आपके सहयोग की अपेक्षा करते हैं।

भवदीय,

हस्ता/-

(मुख्य महाप्रबंधक)

मानव संसाधन प्रबंधन विभाग

बैंक ऑफ़ बड़ौदा

(नोट: यह कंप्यूटर द्वारा जनरेट किया गया पत्र है। हस्ताक्षर की आवश्यकता नहीं है। कृपया किसी भी स्पष्टीकरण के लिए



భారత విశిష్ట గుర్తింపు ప్రాధికార సంస్థ

భారత ప్రభుత్వం
Unique Identification Authority of India
Government of India

రిజిస్ట్రేషన్/ Enrolment No.: 2052/30520/92093

To
అంబటి సుధాదేవి
Ambati Sudhadevi
W/O Ambati Anandakumar
hno 8-2-3/1
ambati appala swamy street
tailor peta
Narasapuram
Narsapur
West Godavari Andhra Pradesh - 534275
7010074883

Download Date: 15/11/2017

Generation Date: 03/11/2017

Signature Not Verified

Digital Signature of
UNIQUE IDENTIFICATION
AUTHORITY OF INDIA 03
Date: 2017.11.15 20:03:27
021



మీ ఆధార్ సంఖ్య / Your Aadhaar No. :

8634 9348 8924

నా ఆధార్, నా గుర్తింపు



భారత ప్రభుత్వం
Government of India



అంబటి సుధాదేవి
Ambati Sudhadevi
పుట్టిన తేదీ/DOB: 28/04/1992
స్వ/ FEMALE



Name: Mrs. A Sudhadevi
Age/Gender: 31 Y/F
Address: hyd
Location: HYDERABAD, TELANGANA
Doctor:
Department: GENERAL
Rate Plan: NIZAMPEI_06042023
Sponsor: ARCOFEMI HEALTHCARE LIMITED

MR No.: CNIZ.0000123254
Visit ID: CNIZOPV192226
Visit Date: 24-02-2024 09:20
Discharge Date:
Referred By: SELF

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 14:24	76 Beats/min	120/80 mmHg	18 Rate/min	98.7 F	163 cms	92.4 Kgs	%	%	31 Years	34.78	cms	cms	cms		AHLL09792

Patient Name	: Mrs. A Sudhadevi	Age	: 31 Y/F
UHID	: CNIZ.0000123254	OP Visit No	: CNIZOPV192226
Reported By:	: Dr. VIKASH KUMAR SHUKLA	Conducted Date	: 24-02-2024 18:32
Referred By	: SELF		

ECG REPORT

Observation :-

1. Normal Sinus Rhythm.
2. Heart rate is 72beats per minutes.
3. No pathological Q wave or S-T,T changes seen.
4. Normal P,Q,R,S,T waves and axis.
5. No evidence of chamber, hypertrophy or enlargement see

Impression:

**NORMAL SINUS RHYTHM
WITH IN NORMAL LIMITS**

----- END OF THE REPORT -----

Dr. VIKASH KUMAR SHUKLA

Cardiology

Arcofeni

Name <i>MU. Sudharani</i>	Date <i>24/2/24</i>
Age <i>31/1</i>	UHID No. <i>CU. 123254</i>
<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female	Ref. Physician
Ref. Diagnosis	

Echocardiogram Report

Echogenicity Poor Adequate Good Ht. _____ Wt. _____ BSA _____

DIMENSIONS	NORMAL	DIMENSIONS	NORMAL
Ao (ed) <i>2.9</i> cm	(1.5cm / m2)	IVS (Ed) <i>0.9</i> cm	(0.6 - 1.2 cm)
LA (es) <i>3.2</i> cm	(1.5cm / m2)	LVPW (Ed) <i>0.9</i> cm	(0.6 - 1.1 cm)
RVID (ed) _____ cm	(0.9 cm / m2)	EF <i>67</i>	(0.62 - 0.85)
LVID (ed) <i>4.7</i> cm	(2.6 - 3.4 cm / m2)	% FD <i>37.1</i>	(2.8% - 42%)
LVID (es) <i>3.0</i>			

MORPHOLOGICAL DATA

Mitral Valve	AML <i>✓</i>	Interatrial septum <i>2-4</i>
	PML <i>✓</i>	Interventricular septum <i>2-4</i>
Aortic Valve	<i>✓</i>	Pulmonary artery <i>✓</i>
Tricuspid valve	<i>✓</i>	Aorta <i>✓</i>
Pulmonary valve	<i>✓</i>	Right atrium <i>✓</i>
Right ventricle	<i>✓</i>	Left atrium <i>✓</i>

Patient Name : Mrs. A Sudhadevi
UHID : CNIZ.0000123254
Conducted By : Dr. VIKASH KUMAR SHUKLA
Referred By : SELF

Age : 31 Y/F
OP Visit No : CNIZOPV192226
Conducted Date : 25-02-2024 09:37

2D-ECHO WITH COLOUR DOPPLER

Dimensions:

Ao (ed)	2.9 CM
LA (cs)	3.2 CM
LVID (ed)	4.7 CM
LVID (es)	3.0 CM
IVS (Ed)	0.9 CM
LVPW (Ed)	0.9 CM
EF	67.00%
%FD	37.00%

MITRAL VALVE : NORMAL

AML NORMAL

PML NORMAL

AORTIC VALVE NORMAL

TRICUSPID VALVE NORMAL

RIGHT VENTRICLE NORMAL

INTER ATRIAL SEPTUM NORMAL

INTER VENTRICULAR SEPTUM INTACT

AORTA NORMAL

RIGHT ATRIUM NORMAL

LEFT ATRIUM NORMAL

Pulmonary Valve NORMAL

PERICARDIUM NORMAL

LEFT VENTRICLE:

NO REGIONAL WALL MOTION ABNORMALITY

NORMAL LEFT VENTRICULAR SYSTOLIC FUNCTION

COLOUR AND DOPPLER STUDIES

PJV:0.6M/SEC AJV:1.1M/SEC
E/A-E: 0.7m/sec A: 0.4m/sec

VELOCITY ACROSS THE PULMONIC VALVE UPTO
1.0m/sec

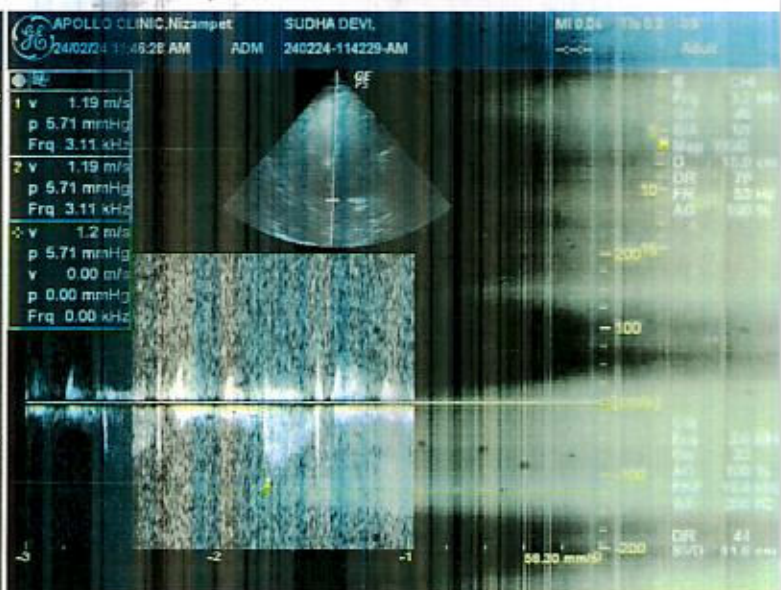
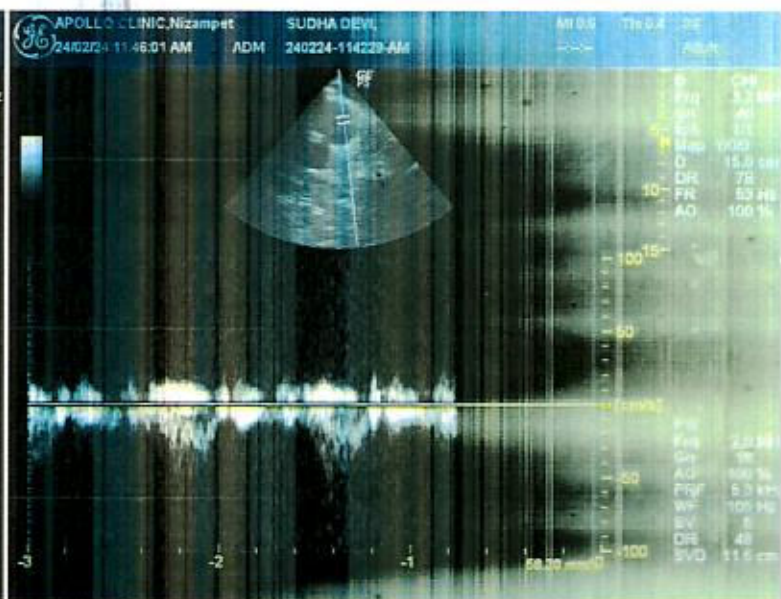
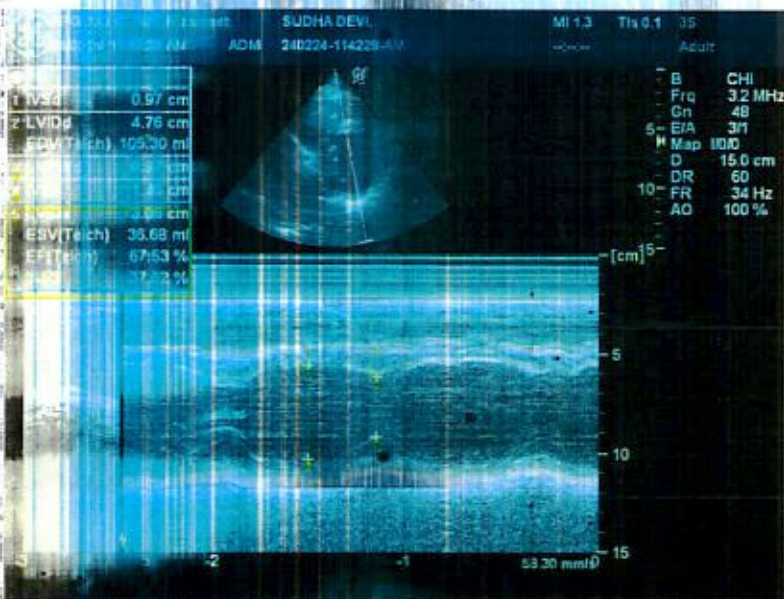
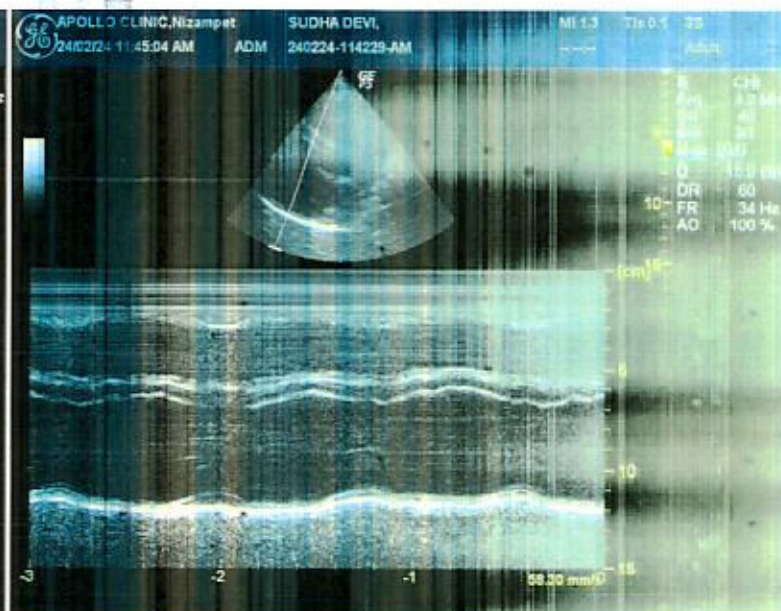
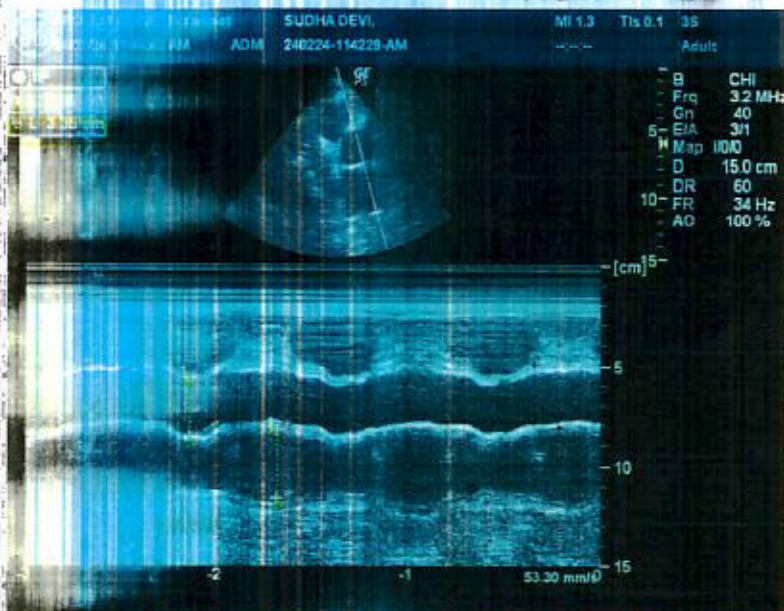
VELOCITY ACROSS THE AV UPTO 1.3m/sec

TR VELOCITY UPTO 1.9m/sec 8.6mmHg

IMPRESSION:

**NORMAL SIZED CARDIAC CHAMBERS
NO RWMA AT REST
GOOD LV/RV FUNCTION
NO MR/AR/PR/TR
NO PE/PAH**

Dr. VIKASH
KUMAR SHUKLA



GLASS PRESCRIPTION

DATE: 29/02/24

UHID: CN12 123254

PATIENT NAME: Sudha devi

AGE/ GENDER: 31/F

	UAVA	SPH	CYL	AXIS	ADD	BCVA
OD	6/6		—		—	6/6
OS	6/6		—		—	6/6

COLOR VISION : normal

INSTRUCTIONS:


SIGNATURE

Patient Name	: Mrs. A Sudhadevi	Age/Gender	: 31 Y/F
UHID/MR No.	: CNIZ.0000123254	OP Visit No	: CNIZOPV192226
Sample Collected on	:	Reported on	: 24-02-2024 18:22
LRN#	: RAD2246922	Specimen	:
Ref Doctor	: SELF		
Emp/Auth/TPA ID	: 863493488924		

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

Liver : 150 mm , appears normal in size and shows mild increased in 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 : 110 mm , 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 :

Right kidney : 99 x 35 mm

Left kidney : 99 x 52 mm

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 : 65 x 48 x 31 mm , appears normal in size. It shows normal shape & echo pattern. Endometrial echo-complex appears normal and measures 7 mm. No intra/extra uterine gestational sac seen.

Both ovaries :

Right ovary : 40 x 17 mm

Left ovary : 32 x 15 mm

Both ovaries appear normal in size and Multiple cysts of subcentimeter in size noted on both sides.

IMPRESSION:-

Mild fatty Liver.

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.

Patient Name : Mrs. A Sudhadevi

Age/Gender : 31 Y/F



Dr. REVANTH REDDY
MBBS MD RD
Radiology

Patient Name : Mrs. A Sudhadevi

Age/Gender : 31 Y/F

UHID/MR No. : CNIZ.0000123254

OP Visit No : CNIZOPV192226

Sample Collected on :

Reported on : 25-02-2024 08:42

LRN# : RAD2246922

Specimen :

Ref Doctor : SELF

Emp/Auth/TPA ID : 863493488924

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. P SATISH KUMAR
MBBS,DMRD
Radiology


Patient Name : Mrs.A SUDHADEVI	Collected : 24/Feb/2024 12:21PM
Age/Gender : 31 Y 9 M 26 D/F	Received : 24/Feb/2024 01:58PM
UHID/MR No : CNIZ.0000123254	Reported : 24/Feb/2024 04:18PM
Visit ID : CNIZOPV192226	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 863493488924	

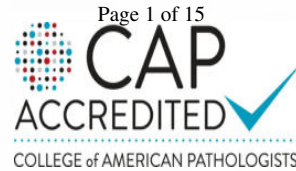
DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	13.3	g/dL	12-15	Spectrophotometer
PCV	38.30	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.53	Million/cu.mm	3.8-4.8	Electrical Impedence
MCV	84.4	fL	83-101	Calculated
MCH	29.4	pg	27-32	Calculated
MCHC	34.8	g/dL	31.5-34.5	Calculated
R.D.W	14	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	6,380	cells/cu.mm	4000-10000	Electrical Impedence
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	43.6	%	40-80	Electrical Impedence
LYMPHOCYTES	40.2	%	20-40	Electrical Impedence
EOSINOPHILS	8	%	1-6	Electrical Impedence
MONOCYTES	8.1	%	2-10	Electrical Impedence
BASOPHILS	0.1	%	0-2	Electrical Impedence
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	2781.68	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2564.76	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	510.4	Cells/cu.mm	20-500	Calculated
MONOCYTES	516.78	Cells/cu.mm	200-1000	Calculated
BASOPHILS	6.38	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	1.08		0.78- 3.53	Calculated
PLATELET COUNT	226000	cells/cu.mm	150000-410000	Electrical impedence
ERYTHROCYTE SEDIMENTATION RATE (ESR)	13	mm at the end of 1 hour	0-20	Modified Westergren
PERIPHERAL SMEAR				

RBC NORMOCYTIC NORMOCHROMIC
WBC - MILD EOSINOPHILIA
PLATELETS ARE ADEQUATE ON SMEAR
NO HEMOPARASITES SEEN
IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE WITH MILD EOSINOPHILIA


Dr.KASULA SIDDARTHA
M.B.B.S,DNB(Pathology)
Consultant Pathologist



SIN No:BED240049167

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

Patient Name : Mrs.A SUDHADEVI
Age/Gender : 31 Y 9 M 26 D/F
UHID/MR No : CNIZ.0000123254
Visit ID : CNIZOPV192226
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : 863493488924

Collected : 24/Feb/2024 12:21PM
Received : 24/Feb/2024 01:58PM
Reported : 24/Feb/2024 04:18PM
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



Dr.KASULA SIDDARTHA
M.B.B.S,DNB(Pathology)
Consultant Pathologist

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ACCREDITED
COLLEGE of AMERICAN PATHOLOGISTS



SIN No:BED240049167

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

Patient Name : Mrs.A SUDHADEVI	Collected : 24/Feb/2024 12:21PM
Age/Gender : 31 Y 9 M 26 D/F	Received : 24/Feb/2024 01:58PM
UHID/MR No : CNIZ.0000123254	Reported : 24/Feb/2024 05:47PM
Visit ID : CNIZOPV192226	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 863493488924	

DEPARTMENT OF HAEMATOLOGY

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

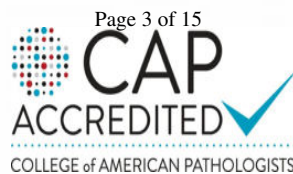
Test Name	Result	Unit	Bio. Ref. Range	Method
BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA				
BLOOD GROUP TYPE	B			Microplate technology
Rh TYPE	Positive			Microplate technology



Dr.KASULA SIDDARTHA
M.B.B.S,DNB(Pathology)
Consultant Pathologist

SIN No:BED240049167

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



Patient Name : Mrs.A SUDHADEVI	Collected : 24/Feb/2024 12:21PM
Age/Gender : 31 Y 9 M 26 D/F	Received : 24/Feb/2024 02:15PM
UHID/MR No : CNIZ.0000123254	Reported : 24/Feb/2024 04:23PM
Visit ID : CNIZOPV192226	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 863493488924	

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	83	mg/dL	70-100	Hexokinase

Comment:

As per American Diabetes Guidelines, 2023

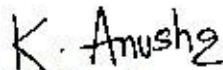
Fasting Glucose Values in mg/dL	Interpretation
70-100 mg/dL	Normal
100-125 mg/dL	Prediabetes
≥126 mg/dL	Diabetes
<70 mg/dL	Hypoglycemia

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. RAJESH BATTINA
PhD.(Biochemistry)
Consultant Biochemist



Dr.K.Anusha
M.B.B.S.,M.D(Biochemistry)
Consultant Biochemist

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COLLEGE of AMERICAN PATHOLOGISTS



SIN No:PLF02112914

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

Patient Name : Mrs.A SUDHADEVI
Age/Gender : 31 Y 9 M 26 D/F
UHID/MR No : CNIZ.0000123254
Visit ID : CNIZOPV192226
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : 863493488924

Collected : 24/Feb/2024 04:06PM
Received : 25/Feb/2024 09:52AM
Reported : 25/Feb/2024 10:21AM
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
GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	105	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.

K. Anusha

Dr.K.Anusha
M.B.B.S,M.D(Biochemistry)
Consultant Biochemist

SIN No:PLP1423824

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



Patient Name : Mrs.A SUDHADEVI	Collected : 24/Feb/2024 12:21PM
Age/Gender : 31 Y 9 M 26 D/F	Received : 24/Feb/2024 02:01PM
UHID/MR No : CNIZ.0000123254	Reported : 24/Feb/2024 02:55PM
Visit ID : CNIZOPV192226	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 863493488924	

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				
HBA1C, GLYCATED HEMOGLOBIN	5.6	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	114	mg/dL		Calculated

Comment:

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

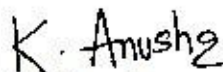
REFERENCE GROUP	HBA1C %
NON DIABETIC	<5.7
PREDIABETES	5.7 – 6.4
DIABETES	≥ 6.5
DIABETICS	
EXCELLENT CONTROL	6 – 7
FAIR TO GOOD CONTROL	7 – 8
UNSATISFACTORY CONTROL	8 – 10
POOR CONTROL	>10

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.
- 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)



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SIN No:EDT240022186

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

Patient Name : Mrs.A SUDHADEVI
 Age/Gender : 31 Y 9 M 26 D/F
 UHID/MR No : CNIZ.0000123254
 Visit ID : CNIZOPV192226
 Ref Doctor : Dr.SELF
 Emp/Auth/TPA ID : 863493488924

Collected : 24/Feb/2024 12:21PM
 Received : 24/Feb/2024 02:01PM
 Reported : 24/Feb/2024 02:55PM
 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

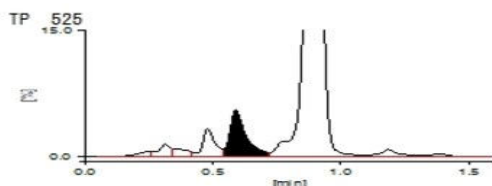
Chromatogram Report

V5.28.1 2024-02-24 14:47:23
 ID EDT240022186
 Sample No. 02240147 SL 0011 - 09
 Patient ID
 Name
 Comment

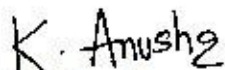
CALIB			
Name	%	Time	Area
A1A	0.4	0.24	6.17
A1B	0.8	0.31	12.68
F	0.6	0.39	10.09
LA1C+	2.0	0.48	31.11
SA1C	5.6	0.59	67.89
A0	92.5	0.89	1452.52
H-V0			
H-V1			
H-V2			

Total Area 1580.46

HbA1c 5.6 % **IFCC 38 mmol/mol**
HbA1 6.8 % **HbF 0.6 %**




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SIN No:EDT240022186

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Patient Name : Mrs.A SUDHADEVI	Collected : 24/Feb/2024 12:21PM
Age/Gender : 31 Y 9 M 26 D/F	Received : 24/Feb/2024 02:21PM
UHID/MR No : CNIZ.0000123254	Reported : 24/Feb/2024 04:55PM
Visit ID : CNIZOPV192226	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 863493488924	

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	252	mg/dL	<200	CHO-POD
TRIGLYCERIDES	380	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	55	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	197	mg/dL	<130	Calculated
LDL CHOLESTEROL	121	mg/dL	<100	Calculated
VLDL CHOLESTEROL	76	mg/dL	<30	Calculated
CHOL / HDL RATIO	4.58		0-4.97	Calculated

Comment:

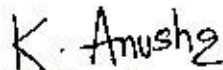
Reference Interval as per National Cholesterol Education Program (NCEP) Adult Treatment Panel III Report.

	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

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 400 mg/dL. When Triglycerides are more than 400 mg/dL LDL cholesterol is a direct measurement.



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SIN No:SE04641065

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

Patient Name : Mrs.A SUDHADEVI	Collected : 24/Feb/2024 12:21PM
Age/Gender : 31 Y 9 M 26 D/F	Received : 24/Feb/2024 02:21PM
UHID/MR No : CNIZ.0000123254	Reported : 24/Feb/2024 04:55PM
Visit ID : CNIZOPV192226	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 863493488924	

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	0.48	mg/dL	0.3–1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.04	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.44	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	32	U/L	<35	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	27.0	U/L	<35	IFCC
ALKALINE PHOSPHATASE	87.00	U/L	30-120	IFCC
PROTEIN, TOTAL	7.71	g/dL	6.6-8.3	Biuret
ALBUMIN	4.29	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.42	g/dL	2.0-3.5	Calculated
A/G RATIO	1.25		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 diseases, Cirrhosis, but the increase is usually not >2.

2. Cholestatic Pattern:

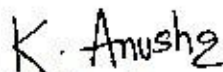
- ALP – Disproportionate increase in ALP compared with AST, ALT.
- Bilirubin may be elevated.
- ALP elevation also seen in pregnancy, impacted by age and sex.
- To establish the hepatic origin correlation with GGT helps. If GGT elevated indicates hepatic cause of increased ALP.

3. Synthetic function impairment:

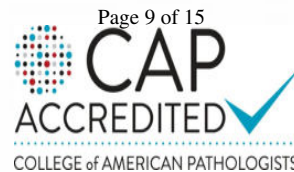
- Albumin- Liver disease reduces albumin levels.
- Correlation with PT (Prothrombin Time) helps.



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UHID/MR No : CNIZ.0000123254
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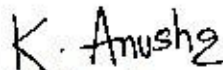
DEPARTMENT OF BIOCHEMISTRY

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	0.56	mg/dL	0.66 - 1.09	Modified Jaffe, Kinetic
UREA	19.20	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	9.0	mg/dL	8.0 - 23.0	Calculated
URIC ACID	7.69	mg/dL	2.6-6.0	Uricase PAP
CALCIUM	9.43	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	4.60	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	139	mmol/L	136-146	ISE (Indirect)
POTASSIUM	4.1	mmol/L	3.5-5.1	ISE (Indirect)
CHLORIDE	103	mmol/L	101-109	ISE (Indirect)



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SIN No:SE04641065

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Visit ID : CNIZOPV192226
Ref Doctor : Dr.SELF
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Collected : 24/Feb/2024 12:21PM
Received : 24/Feb/2024 02:21PM
Reported : 24/Feb/2024 04:54PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

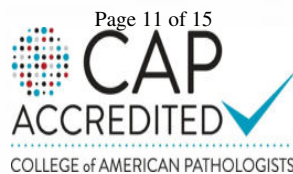
ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL TRANSEPTIDASE (GGT) , SERUM	27.00	U/L	<38	IFCC

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SIN No:SE04641065

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Patient Name : Mrs.A SUDHADEVI	Collected : 24/Feb/2024 12:21PM
Age/Gender : 31 Y 9 M 26 D/F	Received : 24/Feb/2024 02:20PM
UHID/MR No : CNIZ.0000123254	Reported : 24/Feb/2024 04:12PM
Visit ID : CNIZOPV192226	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 863493488924	

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)	0.91	ng/mL	0.87-1.78	CLIA
THYROXINE (T4, TOTAL)	10.33	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	1.509	µIU/mL	0.38-5.33	CLIA

Comment:

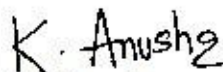
For pregnant females	Bio Ref Range for TSH in uIU/ml (As per American Thyroid Association)
First trimester	0.1 - 2.5
Second trimester	0.2 – 3.0
Third trimester	0.3 – 3.0

- 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.
- 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.
- 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.
- 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
High	High	High	High	Pituitary Adenoma; TSHoma/Thyrotropinoma



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SIN No:SPL24032489


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

Patient Name : Mrs.A SUDHADEVI	Collected : 24/Feb/2024 12:21PM
Age/Gender : 31 Y 9 M 26 D/F	Received : 24/Feb/2024 03:55PM
UHID/MR No : CNIZ.0000123254	Reported : 24/Feb/2024 05:58PM
Visit ID : CNIZOPV192226	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 863493488924	

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	6.0		5-7.5	Bromothymol Blue
SP. GRAVITY	1.025		1.002-1.030	Bromothymol Blue
BIOCHEMICAL EXAMINATION				
URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE		NEGATIVE	GOD - POD
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	SODIUM NITRO PRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	EHRlich
BLOOD	POSITIVE +		NEGATIVE	Peroxidase
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	PYRROLE HYDROLYSIS
CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY				
PUS CELLS	2-3	/hpf	0-5	Microscopy
EPITHELIAL CELLS	4-5	/hpf	<10	MICROSCOPY
RBC	6-8	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY


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SIN No:UR2291148

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

Patient Name : Mrs.A SUDHADEVI	Collected : 24/Feb/2024 04:06PM
Age/Gender : 31 Y 9 M 26 D/F	Received : 25/Feb/2024 09:39AM
UHID/MR No : CNIZ.0000123254	Reported : 25/Feb/2024 11:27AM
Visit ID : CNIZOPV192226	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 863493488924	

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



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SIN No:UPP016797

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

Patient Name : Mrs.A SUDHADEVI	Collected : 24/Feb/2024 12:21PM
Age/Gender : 31 Y 9 M 26 D/F	Received : 24/Feb/2024 03:55PM
UHID/MR No : CNIZ.0000123254	Reported : 24/Feb/2024 05:51PM
Visit ID : CNIZOPV192226	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 863493488924	

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(FASTING)	NEGATIVE		NEGATIVE	Dipstick

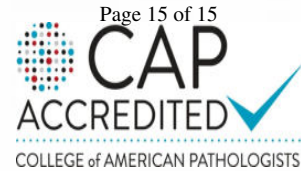
***** End Of Report *****

Result/s to Follow:

PERIPHERAL SMEAR, LBC PAP TEST (PAPSURE)



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SIN No:UF010816

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