


|  |                                       |   |
|--|---------------------------------------|---|
| <b>Name :</b> Mrs. LALITHA S<br><br><b>Address :</b> BANGALORE<br>: ARCOFEMI MEDIWHEEL FEMALE AHC CREDIT PAN<br><b>Plan :</b> INDIA OP AGREEMENT | <b>Age:</b> 60 Y<br><br><b>Sex:</b> F | <b>UHID:</b> RJAY.0000054193<br><br><b>OP Number:</b> CBASOPV95152<br><b>Bill No :</b> CBAS-OCR-58017<br><b>Date :</b> 12.09.2023 08:30 |
|--|---------------------------------------|---|

| Sno | Service Type/ServiceName  | Department |
|-----|---|------------|
| 1   | ARCOFEMI - MEDIWHEEL -FULL BODY COMPREHENSIVE PLUS VITAMINS - FEMALE - 2D ECHO - PAN INDIA - FY2324 |            |
| 1   | URINE GLUCOSE(FASTING)  | Recd Urd   |
| 2   | GAMMA GLUTAMYL TRANSFERASE (GGT)  |            |
| 3   | SONO MAMOGRAPHY - SCREENING   |            |
| 4   | HbA1c. GLYCATED HEMOGLOBIN  | -3-        |
| 5   | 2D ECHO   |            |
| 6   | ALKALINE PHOSPHATASE - SERUM/PLASMA   |            |
| 7   | LIVER FUNCTION TEST (LFT)   |            |
| 8   | X-RAY CHEST PA <span style="margin-left: 50px;">9:23 Am</span>                                      | -4-        |
| 9   | GLUCOSE, FASTING  |            |
| 10  | HEMOGRAM + PERIPHERAL SMEAR   |            |
| 11  | ENT CONSULTATION  |            |
| 12  | FITNESS BY GENERAL PHYSICIAN  |            |
| 13  | GYNAECOLOGY CONSULTATION <span style="margin-left: 50px;">Done</span>                               |            |
| 14  | DIET CONSULTATION   |            |
| 15  | COMPLETE URINE EXAMINATION  |            |
| 16  | URINE GLUCOSE(POST PRANDIAL)  |            |
| 17  | PERIPHERAL SMEAR  | -3-        |
| 18  | ECG   |            |
| 19  | BLOOD GROUP ABO AND RH FACTOR   |            |
| 20  | VITAMIN B12   |            |
| 21  | LIPID PROFILE   |            |
| 22  | BODY MASS INDEX (BMI)   |            |
| 23  | LBC PAP TEST- PAPSURE <span style="margin-left: 50px;">Done</span>                                  | -3-        |
| 24  | OPHTHAL BY GENERAL PHYSICIAN  |            |
| 25  | RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)   |            |
| 26  | ULTRASOUND - WHOLE ABDOMEN <span style="margin-left: 50px;">10:00 to 10:30 am</span>                | -5-        |
| 27  | THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)   |            |
| 28  | DENTAL CONSULTATION   |            |
| 29  | GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL)  |            |
| 30  | VITAMIN D - 25 HYDROXY (D2+D3)  |            |

31) Physio

Ht → 160cm  
 Wt → 67.8 kg  
 Hip → 95cm  
 Wid → 190cm  
 B.P → 120/67 mmHg  
 PR → 75b/m

**ECHOCARDIOGRAPHY REPORT**

**Name: Mrs LALITHA    Age: 60 YEARS    GENDER: FEMALE**

**Consultant: Dr.VISHAL KUMAR.H.    Date : 12/09/2023**

**Findings**

**2D Echo cardiography**

**Chambers**

- Left Ventricle: Normal, No RWMA'S,
- Left Atrium: Normal
- Right Ventricle: Normal
- Right Atrium: Normal

**Septa**

- IVS: Intact
- IAS: Intact

**Valves**

- Mitral Valve: Normal
- Tricuspid Valve: Normal
- Aortic Valve: Tricuspid, Normal Mobility
- Pulmonary Valve: Normal

**Great Vessels**

- Aorta: Normal
- Pulmonary Artery: Normal

**Pericardium: Normal**

**Doppler echocardiography**

|                       |      |      |       |   |      |       |       |
|-----------------------|------|------|-------|---|------|-------|-------|
| Mitral Valve          | E    | 0.95 | m/sec | A | 0.73 | m/sec | No MR |
| Tricuspid Valve       | E    | 0.62 | m/sec | A | 0.41 | m/sec | No TR |
| Aortic Valve          | Vmax | 1.39 | m/sec |   |      |       | No AR |
| Pulmonary Valve       | Vmax | 1.01 | m/sec |   |      |       | No PR |
| Diastolic Dysfunction |      |      |       |   |      |       |       |

Multiple Measurements

| P  | Parameter               | Observed Value | Normal Range |    |
|----|-------------------------|----------------|--------------|----|
| A  | Aorta                   | 2.8            | 2.6-3.6      | cm |
| LI | left Atrium             | 3.5            | 2.7-3.8      | cm |
| A  | Aortic Cusp Separation  | 1.6            | 1.4-1.7      | cm |
| II | IVS - Diastole          | 1.0            | 0.9-1.1      | cm |
| L  | left Ventricle-Diastole | 4.4            | 4.2-5.9      | cm |
| P  | Posterior wall-Diastole | 1.0            | 0.9-1.1      | cm |
| I  | IVS-Systole             | 1.2            | 1.3-1.5      | cm |
| LL | left Ventricle-Systole  | 2.8            | 2.1-4.0      | cm |
| P  | Posterior wall-Systole  | 1.1            | 1.3-1.5      | cm |
| E  | Ejection Fraction       | 60             | ≥ 50         | %  |
| F  | Fractional shortening   | 30             | ≥ 20         | %  |
| R  | Right Ventricle         | 2.6            | 2.0-3.3      | cm |

**Impression -**

- Normal Sized Cardiac Chambers
- No RWMA,S
- normal LV and RV Systolic Function, LVEF 60%
- Normal valves
- No Pericardial Effusion/Vegetation/Clot

**DR. VISHAL KUMAR .H**  
**CLINICAL CARDIOLOGIST**

Mrs. Lalitha

12/9/23

60 years

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

General Examination / Allergies  
History

Clinical Diagnosis & Management Plan

- Came for regular health check up
- No ENT complaints at present.
- K/C/O Rheumatoid Arthritis since 8 years.  
is on T-Methotrexate.

O/E:

Ear : B/L TM Intact.

Nose : nom.

Oral cavity : nom.

Adv:

T<sub>3</sub>, T<sub>4</sub>, TSH. - follow up c' reports.  
USG NECK (for thyroid & lymphnodes).

Follow up date:

  
DR. ANITHA PUDANIK  
MBBS, MS, ENT, FRCO  
Doctor Signature

12/9/23

Mr. Lalitha, 60yr.

Rheumatoid Arthritis (8yrs)

Ht -> 160cm

Abts -> 1 bowl High zinc low fat diet

Wt -> 67.8kg

IBW -> 60-62kg

WALK -> Sunlight

(20-30min)

Apt. dinner walk -> 30min/day

Water -> 2.24L/day  
50-60g  
Zinc  
Diet

BF & Dinner, No rice/puri/veg.

Registred -> health / m.

FLAX Seed -> Half spoon.

Walnuts - 2 / Almonds - 5-6/day.

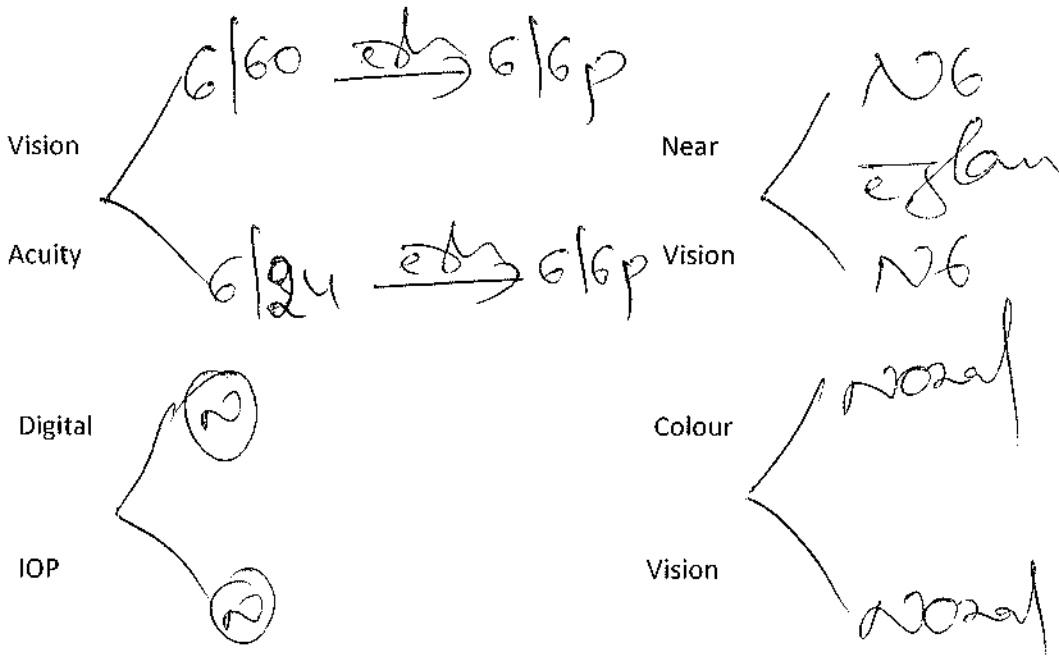
Eggs -> 1/day.

Chicken, fish / soyabean / m.

Dr. Lalitha / only  
ph. no. 080-2612121

EYE CHECK UP REPORT

Mrs. Lalitha.S. 60/F 54193 12/9/23



- Fundus:
- Ant. Segment :-
- Media:

} need retine evaluation

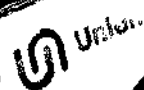
• pupil: n n

Pupil:

Be Myopic Astigmatism Presbyopia, partially corrected by glan. Adv for dilated refraction & retine opinion.

KAC

यूनियन बैंक  
of India



नाम : एस ललिता  
Name : S ALITHA  
कर्मचारी क्र / Employee No. : 551472  
जन्म तिथि / Date of Birth : 07-09-1963  
रक्त समूह / Blood Group : B+ve

जारी करने का स्थान : क्षेत्रीय कार्यालय  
Place of Issue : RO Bengaluru South  
जारी करने की तारीख  
Date of Issue : 16.08.2020

हस्ताक्षर / Signature  
के अधिकारी / अधिकारी

अधिकारी / Issuing Authority

Health checkup at tie-up Ctr

HealthChkup Authorisatn letter



Union Bank of India

RO - BANGALORE SOUTH  
Chandrakiran, 10-A, Kasturba Road, P.B.  
No. 5179, Bangalore, Karnataka, ,  
Bangalore- 80

To,

The Chief Medical Officer

M/S Mediwheel  
https://mediwheel.in/signup011-  
41195959(A brand name of  
Arcofemi Healthcare Ltd),  
Mumbai400021

Dear Sir,

**Tie-up arrangement for Health Checkup under Health Checkup 50-60 Female**

Shri/Smt./Kum. S LALITHA,.

P.F. No. 551472

Designation : Single Window Operator-B

Checkup for Financial Year 2023-2024 **Approved Charges Rs. 5000.00**

The above mentioned staff member of our Branch/Office desires to undergo Health Checkup at your Hospital/Centre/Clinic, under the tie-up arrangement entered into with you, by our bank.

Please send the receipt of the above payment and the relevant reports to our above address.

Thanking you,

*S. Lalitha*  
(Signature of the Employee)

युनियन बँक ऑफ इंडिया / For UNION BANK OF INDIA

Yours Faithfully,

Senior Manager

Branch Manager, Bangalore - 501507  
BRANCH MANAGER/SENIOR MANAGER

PS. : Status of the application- Sanctioned

Notify

Add

Update/Display



**Personal Details**

UHID: 01P3FGAT6OG0R71  
 PatientID: 54193  
 Name: MRS LALITHA S  
 Age: 60  
 Gender: Female  
 Mobile: 676766767337

**Pre-Existing Medical Conditions**

**Vitals**

**Measurements**

HR: 72 BPM  
 PR: 166 ms  
 PD: 121 ms  
 QRS: 83 ms  
 QRS Axis: deg  
 QT/QTc: 397/435 ms

**Interpretation**

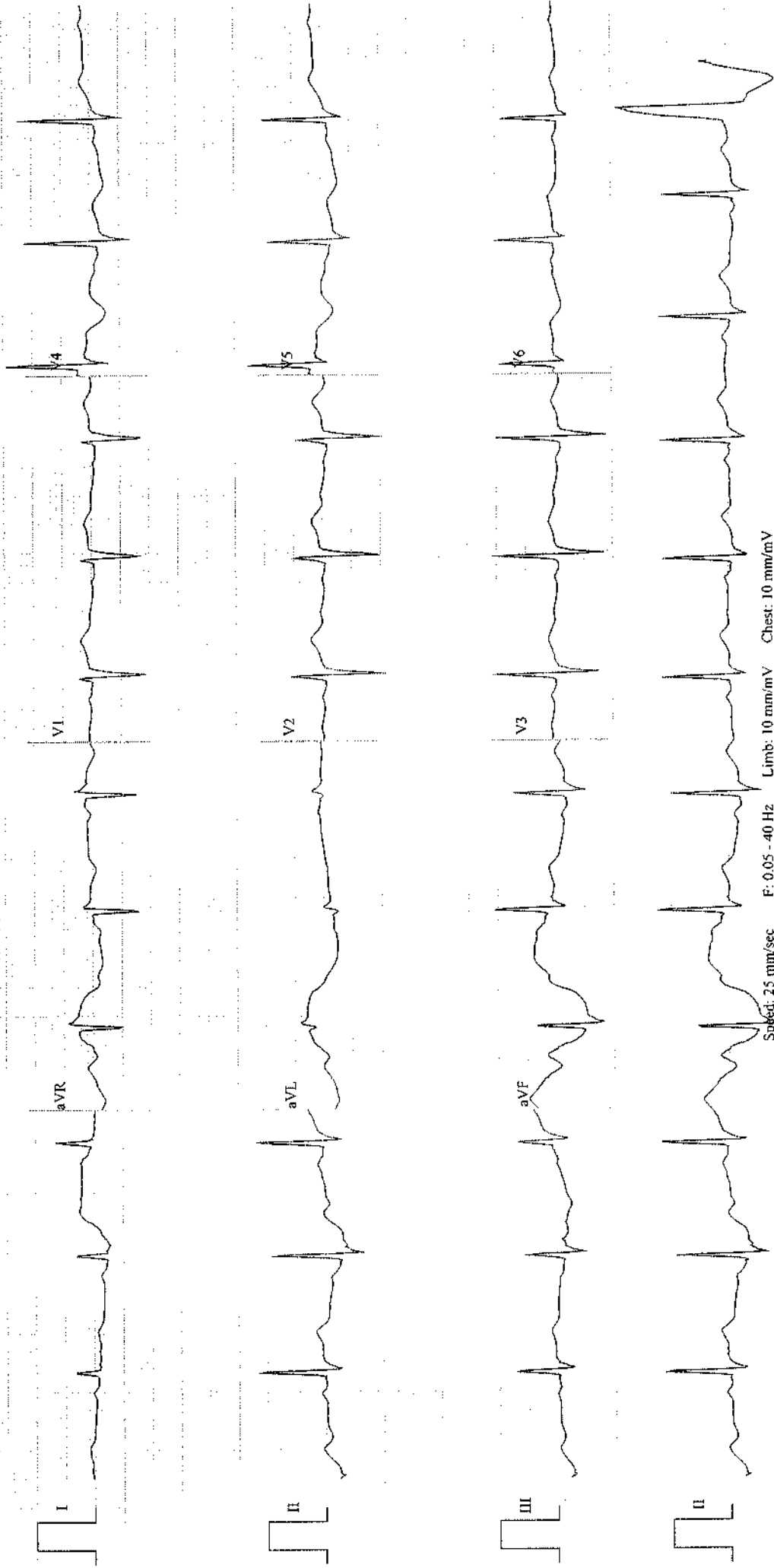
SINUS RHYTHM, REGULAR  
 PREMATURE VENTRICULAR ECTOPICS PRESENT  
 NORMAL AXIS  
 AUGMENTED LEADS UNSTABLE FOR ANALYSIS

Authorized by

*Yogesh*

Dr. Yogesh Kothari  
 MD, DNB, FESC, FEP  
 Reg No- KMC 44065

This trace is generated by *KinatioScreen*; Cloud-Connected. Portable, Digital, 6-12 Lead Scalable ECG Platform from *IMEDRIX*



Speed: 25 mm/sec F: 0.05 - 40 Hz Limb: 10 mm/mV Chest: 10 mm/mV

Disclaimer: Analysis in this report is based on ECG alone and should be used as an adjunct to clinical history, symptoms and results of other non-invasive tests and must be interpreted by a qualified physician. Normal ECG does not rule out heart disease. Abnormal ECG does not always mean severe heart disease. Comments & report is based on available data. Clinical correlation is important.

|                              |  |
|------------------------------|--|
| Patient Name : Mrs.LALITHA S | Collected : 12/Sep/2023 08:43AM            |
| Age/Gender : 60 Y 0 M 5 D/F  | Received : 12/Sep/2023 11:36AM             |
| UHID/MR No : RJAY.0000054193 | Reported : 12/Sep/2023 12:44PM             |
| Visit ID : CBASOPV95152      | Status : Final Report                      |
| Ref Doctor : Dr.SELF         | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 551472     |  |

**DEPARTMENT OF HAEMATOLOGY**

**ARCOFEMI - MEDIWHEEL -FULL BODY COMPREHENSIVE PLUS VITAMINS - FEMALE - 2D ECHO - PAN INDIA - FY2324**

| Test Name | Result | Unit | Bio. Ref. Range | Method |
|-----------|--------|------|-----------------|--------|
|-----------|--------|------|-----------------|--------|

**HEMOGRAM , WHOLE BLOOD EDTA**

|                             |       |               |            |                                |
|-----------------------------|-------|---------------|------------|--------------------------------|
| <b>HAEMOGLOBIN</b>          | 12.9  | g/dL          | 12-15      | Spectrophotometer              |
| PCV                         | 37.60 | %             | 36-46      | Electronic pulse & Calculation |
| RBC COUNT                   | 4.13  | Million/cu.mm | 3.8-4.8    | Electrical Impedance           |
| MCV                         | 91.2  | fL            | 83-101     | Calculated                     |
| MCH                         | 31.2  | pg            | 27-32      | Calculated                     |
| MCHC                        | 34.2  | g/dL          | 31.5-34.5  | Calculated                     |
| R.D.W                       | 13.8  | %             | 11.6-14    | Calculated                     |
| TOTAL LEUCOCYTE COUNT (TLC) | 5,810 | cells/cu.mm   | 4000-10000 | Electrical Impedance           |

**DIFFERENTIAL LEUCOCYTIC COUNT (DLC)**

|             |            |   |       |                      |
|-------------|------------|---|-------|----------------------|
| NEUTROPHILS | 74.2       | % | 40-80 | Electrical Impedance |
| LYMPHOCYTES | 21.3       | % | 20-40 | Electrical Impedance |
| EOSINOPHILS | <b>0.3</b> | % | 1-6   | Electrical Impedance |
| MONOCYTES   | 4.1        | % | 2-10  | Electrical Impedance |
| BASOPHILS   | 0.1        | % | <1-2  | Electrical Impedance |

**ABSOLUTE LEUCOCYTE COUNT**

|             |              |             |           |                      |
|-------------|--------------|-------------|-----------|----------------------|
| NEUTROPHILS | 4311.02      | Cells/cu.mm | 2000-7000 | Electrical Impedance |
| LYMPHOCYTES | 1237.53      | Cells/cu.mm | 1000-3000 | Electrical Impedance |
| EOSINOPHILS | <b>17.43</b> | Cells/cu.mm | 20-500    | Electrical Impedance |
| MONOCYTES   | 238.21       | Cells/cu.mm | 200-1000  | Electrical Impedance |
| BASOPHILS   | 5.81         | Cells/cu.mm | 0-100     | Electrical Impedance |

|   |           |                         |               |                           |
|---|-----------|-------------------------|---------------|---------------------------|
| <b>PLATELET COUNT</b>                       | 272000    | cells/cu.mm             | 150000-410000 | Electrical impedance      |
| <b>ERYTHROCYTE SEDIMENTATION RATE (ESR)</b> | <b>44</b> | mm at the end of 1 hour | 0-20          | Modified Westegren method |

**PERIPHERAL SMEAR**

RBCs: are normocytic normochromic

WBCs: are normal in total number with normal distribution and morphology.

PLATELETS: appear adequate in number.

|                              |  |
|------------------------------|--|
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| UHID/MR No : RJAY.0000054193 | Reported : 12/Sep/2023 12:44PM             |
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**DEPARTMENT OF HAEMATOLOGY**

**ARCOFEMI - MEDIWHEEL -FULL BODY COMPREHENSIVE PLUS VITAMINS - FEMALE - 2D ECHO - PAN INDIA - FY2324**

| Test Name | Result | Unit | Bio. Ref. Range | Method |
|-----------|--------|------|-----------------|--------|
|-----------|--------|------|-----------------|--------|

HEMOPARASITES: negative

**IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE**



SIN No:BED230220126

NABL renewal accreditation under process

|                              |  |
|------------------------------|--|
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| Age/Gender : 60 Y 0 M 5 D/F  | Received : 12/Sep/2023 11:36AM             |
| UHID/MR No : RJAY.0000054193 | Reported : 12/Sep/2023 02:09PM             |
| Visit ID : CBASOPV95152      | Status : Final Report                      |
| Ref Doctor : Dr.SELF         | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 551472     |  |

**DEPARTMENT OF HAEMATOLOGY**

**ARCOFEMI - MEDIWHEEL -FULL BODY COMPREHENSIVE PLUS VITAMINS - 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 Hemagglutination |
| Rh TYPE          | Positive |  |  | Microplate Hemagglutination |



|                              |  |
|------------------------------|--|
| Patient Name : Mrs.LALITHA S | Collected : 12/Sep/2023 08:43AM            |
| Age/Gender : 60 Y 0 M 5 D/F  | Received : 12/Sep/2023 11:55AM             |
| UHID/MR No : RJAY.0000054193 | Reported : 12/Sep/2023 12:43PM             |
| Visit ID : CBASOPV95152      | Status : Final Report                      |
| Ref Doctor : Dr.SELF         | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 551472     |  |

**DEPARTMENT OF BIOCHEMISTRY**

**ARCOFEMI - MEDIWHEEL -FULL BODY COMPREHENSIVE PLUS VITAMINS - FEMALE - 2D ECHO - PAN INDIA - FY2324**

| Test Name | Result | Unit | Bio. Ref. Range | Method |
|-----------|--------|------|-----------------|--------|
|-----------|--------|------|-----------------|--------|

|                                      |            |       |        |            |
|--------------------------------------|------------|-------|--------|------------|
| <b>GLUCOSE, FASTING , NAF PLASMA</b> | <b>106</b> | 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:**

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.



SIN No:PLF02026353

NABL renewal accreditation under process

|                              |  |
|------------------------------|--|
| Patient Name : Mrs.LALITHA S | Collected : 12/Sep/2023 10:47AM            |
| Age/Gender : 60 Y 0 M 5 D/F  | Received : 12/Sep/2023 04:26PM             |
| UHID/MR No : RJAY.0000054193 | Reported : 12/Sep/2023 04:54PM             |
| Visit ID : CBASOPV95152      | Status : Final Report                      |
| Ref Doctor : Dr.SELF         | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 551472     |  |

**DEPARTMENT OF BIOCHEMISTRY**

**ARCOFEMI - MEDIWHEEL -FULL BODY COMPREHENSIVE PLUS VITAMINS - FEMALE - 2D ECHO - PAN INDIA - FY2324**

| Test Name   | Result | Unit  | Bio. Ref. Range | Method     |
|---|--------|-------|-----------------|------------|
| <b>GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)</b> | 127    | mg/dL | 70-140          | HEXOKINASE |

**Comment:**

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

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

Ref: Marks medical biochemistry and clinical approach



|                              |  |
|------------------------------|--|
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| Age/Gender : 60 Y 0 M 5 D/F  | Received : 12/Sep/2023 11:54AM             |
| UHID/MR No : RJAY.0000054193 | Reported : 12/Sep/2023 05:21PM             |
| Visit ID : CBASOPV95152      | Status : Final Report                      |
| Ref Doctor : Dr.SELF         | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
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**DEPARTMENT OF BIOCHEMISTRY**

**ARCOFEMI - MEDIWHEEL -FULL BODY COMPREHENSIVE PLUS VITAMINS - FEMALE - 2D ECHO - PAN INDIA - FY2324**

| Test Name   | Result | Unit  | Bio. Ref. Range | Method     |
|---|--------|-------|-----------------|------------|
| <b>HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD EDTA</b>      | 5.4    | %     |                 | HPLC       |
| <b>ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD EDTA</b> | 108    | 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%

|                              |  |
|------------------------------|--|
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| UHID/MR No : RJAY.0000054193 | Reported : 12/Sep/2023 05:21PM             |
| Visit ID : CBASOPV95152      | Status : Final Report                      |
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| Emp/Auth/TPA ID : 551472     |  |

**DEPARTMENT OF BIOCHEMISTRY**

**ARCOFEMI - MEDIWHEEL -FULL BODY COMPREHENSIVE PLUS VITAMINS - FEMALE - 2D ECHO - PAN INDIA - FY2324**

| Test Name | Result | Unit | Bio. Ref. Range | Method |
|-----------|--------|------|-----------------|--------|
|-----------|--------|------|-----------------|--------|

B: Homozygous Hemoglobinopathy.  
(Hb Electrophoresis is recommended method for detection of Hemoglobinopathy)





|                              |  |
|------------------------------|--|
| Patient Name : Mrs.LALITHA S | Collected : 12/Sep/2023 08:43AM            |
| Age/Gender : 60 Y 0 M 5 D/F  | Received : 12/Sep/2023 12:00PM             |
| UHID/MR No : RJAY.0000054193 | Reported : 12/Sep/2023 12:44PM             |
| Visit ID : CBASOPV95152      | Status : Final Report                      |
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**DEPARTMENT OF BIOCHEMISTRY**

**ARCOFEMI - MEDIWHEEL -FULL BODY COMPREHENSIVE PLUS VITAMINS - FEMALE - 2D ECHO - PAN INDIA - FY2324**

| Test Name | Result | Unit | Bio. Ref. Range | Method |
|-----------|--------|------|-----------------|--------|
|-----------|--------|------|-----------------|--------|

**LIPID PROFILE , SERUM**

|                     |              |       |        |                            |
|---------------------|--------------|-------|--------|----------------------------|
| TOTAL CHOLESTEROL   | <b>200</b>   | mg/dL | <200   | CHO-POD                    |
| TRIGLYCERIDES       | 56           | mg/dL | <150   | GPO-POD                    |
| HDL CHOLESTEROL     | 55           | mg/dL | 40-60  | Enzymatic Immunoinhibition |
| NON-HDL CHOLESTEROL | <b>145</b>   | mg/dL | <130   | Calculated                 |
| LDL CHOLESTEROL     | <b>133.4</b> | mg/dL | <100   | Calculated                 |
| VLDL CHOLESTEROL    | 11.2         | mg/dL | <30    | Calculated                 |
| CHOL / HDL RATIO    | 3.63         |       | 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<br>Near Optimal 100-129  | 130 - 159       | 160 - 189 | ≥ 190     |
| HDL                 | ≥ 60                                   |                 |           |           |
| NON-HDL CHOLESTEROL | Optimal <130;<br>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

|                              |  |
|------------------------------|--|
| Patient Name : Mrs.LALITHA S | Collected : 12/Sep/2023 08:43AM            |
| Age/Gender : 60 Y 0 M 5 D/F  | Received : 12/Sep/2023 12:00PM             |
| UHID/MR No : RJAY.0000054193 | Reported : 12/Sep/2023 12:44PM             |
| Visit ID : CBASOPV95152      | Status : Final Report                      |
| Ref Doctor : Dr.SELF         | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 551472     |  |

**DEPARTMENT OF BIOCHEMISTRY**

**ARCOFEMI - MEDIWHEEL -FULL BODY COMPREHENSIVE PLUS VITAMINS - FEMALE - 2D ECHO - PAN INDIA - FY2324**

| Test Name | Result | Unit | Bio. Ref. Range | Method |
|-----------|--------|------|-----------------|--------|
|-----------|--------|------|-----------------|--------|

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.



SIN No:SE04479183

NABL renewal accreditation under process

|                              |  |
|------------------------------|--|
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| UHID/MR No : RJAY.0000054193 | Reported : 12/Sep/2023 12:44PM             |
| Visit ID : CBASOPV95152      | Status : Final Report                      |
| Ref Doctor : Dr.SELF         | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 551472     |  |

**DEPARTMENT OF BIOCHEMISTRY**

**ARCOFEMI - MEDIWHEEL -FULL BODY COMPREHENSIVE PLUS VITAMINS - FEMALE - 2D ECHO - PAN INDIA - FY2324**

| Test Name | Result | Unit | Bio. Ref. Range | Method |
|-----------|--------|------|-----------------|--------|
|-----------|--------|------|-----------------|--------|

| LIVER FUNCTION TEST (LFT) , SERUM     |        |       |                 |                    |
|---------------------------------------|--------|-------|-----------------|--------------------|
| Test Name                             | Result | Unit  | Bio. Ref. Range | Method             |
| BILIRUBIN, TOTAL                      | 0.78   | mg/dL | 0.3-1.2         | DPD                |
| BILIRUBIN CONJUGATED (DIRECT)         | 0.14   | mg/dL | <0.2            | DPD                |
| BILIRUBIN (INDIRECT)                  | 0.64   | mg/dL | 0.0-1.1         | Dual Wavelength    |
| ALANINE AMINOTRANSFERASE (ALT/SGPT)   | 14     | U/L   | <35             | IFCC               |
| ASPARTATE AMINOTRANSFERASE (AST/SGOT) | 19.0   | U/L   | <35             | IFCC               |
| ALKALINE PHOSPHATASE                  | 66.00  | U/L   | 30-120          | IFCC               |
| PROTEIN, TOTAL                        | 7.01   | g/dL  | 6.6-8.3         | Biuret             |
| ALBUMIN                               | 3.89   | g/dL  | 3.5-5.2         | BROMO CRESOL GREEN |
| GLOBULIN                              | 3.12   | g/dL  | 2.0-3.5         | Calculated         |
| A/G RATIO                             | 1.25   |       | 0.9-2.0         | Calculated         |



SIN No:SE04479183

NABL renewal accreditation under process

|                              |  |
|------------------------------|--|
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| UHID/MR No : RJAY.0000054193 | Reported : 12/Sep/2023 12:44PM             |
| Visit ID : CBASOPV95152      | Status : Final Report                      |
| Ref Doctor : Dr.SELF         | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 551472     |  |

**DEPARTMENT OF BIOCHEMISTRY**

**ARCOFEMI - MEDIWHEEL -FULL BODY COMPREHENSIVE PLUS VITAMINS - FEMALE - 2D ECHO - PAN INDIA - FY2324**

| Test Name | Result | Unit | Bio. Ref. Range | Method |
|-----------|--------|------|-----------------|--------|
|-----------|--------|------|-----------------|--------|

**RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM**

|                       |             |        |             |                          |
|-----------------------|-------------|--------|-------------|--------------------------|
| CREATININE            | <b>0.64</b> | mg/dL  | 0.72 – 1.18 | JAFFE METHOD             |
| UREA                  | 27.50       | mg/dL  | 17-43       | GLDH, Kinetic Assay      |
| BLOOD UREA NITROGEN   | 12.8        | mg/dL  | 8.0 - 23.0  | Calculated               |
| URIC ACID             | 3.58        | mg/dL  | 2.6-6.0     | Uricase PAP              |
| CALCIUM               | 9.10        | mg/dL  | 8.8-10.6    | Arsenazo III             |
| PHOSPHORUS, INORGANIC | 3.57        | mg/dL  | 2.5-4.5     | Phosphomolybdate Complex |
| SODIUM                | 138         | mmol/L | 136–146     | ISE (Indirect)           |
| POTASSIUM             | 4.0         | mmol/L | 3.5–5.1     | ISE (Indirect)           |
| CHLORIDE              | 104         | mmol/L | 101–109     | ISE (Indirect)           |



SIN No:SE04479183

NABL renewal accreditation under process

|                              |  |
|------------------------------|--|
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| Age/Gender : 60 Y 0 M 5 D/F  | Received : 12/Sep/2023 12:00PM             |
| UHID/MR No : RJAY.0000054193 | Reported : 12/Sep/2023 12:44PM             |
| Visit ID : CBASOPV95152      | Status : Final Report                      |
| Ref Doctor : Dr.SELF         | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 551472     |  |

**DEPARTMENT OF BIOCHEMISTRY**

**ARCOFEMI - MEDIWHEEL -FULL BODY COMPREHENSIVE PLUS VITAMINS - FEMALE - 2D ECHO - PAN INDIA - FY2324**

| Test Name  | Result | Unit | Bio. Ref. Range | Method |
|--|--------|------|-----------------|--------|
| ALKALINE PHOSPHATASE , <i>SERUM</i>                | 66.00  | U/L  | 30-120          | IFCC   |
| GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , <i>SERUM</i> | 16.00  | U/L  | <38             | IFCC   |



SIN No:SE04479183

NABL renewal accreditation under process

|                              |  |
|------------------------------|--|
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| Age/Gender : 60 Y 0 M 5 D/F  | Received : 12/Sep/2023 12:00PM             |
| UHID/MR No : RJAY.0000054193 | Reported : 12/Sep/2023 01:05PM             |
| Visit ID : CBASOPV95152      | Status : Final Report                      |
| Ref Doctor : Dr.SELF         | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 551472     |  |

**DEPARTMENT OF IMMUNOLOGY**

**ARCOFEMI - MEDIWHEEL -FULL BODY COMPREHENSIVE PLUS VITAMINS - FEMALE - 2D ECHO - PAN INDIA - FY2324**

| Test Name | Result | Unit | Bio. Ref. Range | Method |
|-----------|--------|------|-----------------|--------|
|-----------|--------|------|-----------------|--------|

**THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM**

| Test Name                         | Result | Unit   | Bio. Ref. Range | Method |
|-----------------------------------|--------|--------|-----------------|--------|
| TRI-iodothyronine (T3, TOTAL)     | 0.6    | ng/mL  | 0.7-2.04        | CLIA   |
| THYROXINE (T4, TOTAL)             | 9.43   | µg/dL  | 5.48-14.28      | CLIA   |
| THYROID STIMULATING HORMONE (TSH) | 0.965  | 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   |

|                              |  |
|------------------------------|--|
| Patient Name : Mrs.LALITHA S | Collected : 12/Sep/2023 08:43AM            |
| Age/Gender : 60 Y 0 M 5 D/F  | Received : 12/Sep/2023 12:00PM             |
| UHID/MR No : RJAY.0000054193 | Reported : 12/Sep/2023 01:05PM             |
| Visit ID : CBASOPV95152      | Status : Final Report                      |
| Ref Doctor : Dr.SELF         | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 551472     |  |

**DEPARTMENT OF IMMUNOLOGY**

**ARCOFEMI - MEDIWHEEL -FULL BODY COMPREHENSIVE PLUS VITAMINS - FEMALE - 2D ECHO - PAN INDIA - FY2324**

| Test Name | Result | Unit | Bio. Ref. Range | Method   |
|-----------|--------|------|-----------------|--|
| 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               |



SIN No:SPL23130030

NABL renewal accreditation under process

|                              |  |
|------------------------------|--|
| Patient Name : Mrs.LALITHA S | Collected : 12/Sep/2023 08:43AM            |
| Age/Gender : 60 Y 0 M 5 D/F  | Received : 12/Sep/2023 12:00PM             |
| UHID/MR No : RJAY.0000054193 | Reported : 12/Sep/2023 01:15PM             |
| Visit ID : CBASOPV95152      | Status : Final Report                      |
| Ref Doctor : Dr.SELF         | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 551472     |  |

**DEPARTMENT OF IMMUNOLOGY**

**ARCOFEMI - MEDIWHEEL -FULL BODY COMPREHENSIVE PLUS VITAMINS - FEMALE - 2D ECHO - PAN INDIA - FY2324**

| Test Name | Result | Unit | Bio. Ref. Range | Method |
|-----------|--------|------|-----------------|--------|
|-----------|--------|------|-----------------|--------|

|                                       |      |       |  |      |
|---------------------------------------|------|-------|--|------|
| VITAMIN D (25 - OH VITAMIN D) , SERUM | 12.3 | ng/mL |  | CLIA |
|---------------------------------------|------|-------|--|------|

**Comment:**

**BIOLOGICAL REFERENCE RANGES**

| VITAMIN D STATUS | VITAMIN D 25 HYDROXY (ng/mL) |
|------------------|------------------------------|
| DEFICIENCY       | <10                          |
| INSUFFICIENCY    | 10 – 30                      |
| SUFFICIENCY      | 30 – 100                     |
| TOXICITY         | >100                         |

The assay measures both D2 (Ergocalciferol) and D3 (Cholecalciferol) metabolites of vitamin D. Vitamin D status is best determined by measurement of 25 hydroxy vitamin D, as it is the major circulating form and has longer half life ( 2-3 weeks) than 1,25 Dihydroxy vitamin D ( 5-8 hrs)

The reference ranges discussed in the preceding are related to total 25-OHD; as long as the combined total is 30 ng/mL or more, the patient has sufficient vitamin D.

Levels needed to prevent rickets and osteomalacia (15 ng/mL) are lower than those that dramatically suppress parathyroid hormone levels (20–30 ng/mL). In turn, those levels are lower than levels needed to optimize intestinal calcium absorption (34 ng/mL). Neuromuscular peak performance is associated with levels approximately 38 ng/mL.



|                              |  |
|------------------------------|--|
| Patient Name : Mrs.LALITHA S | Collected : 12/Sep/2023 08:43AM            |
| Age/Gender : 60 Y 0 M 5 D/F  | Received : 12/Sep/2023 12:00PM             |
| UHID/MR No : RJAY.0000054193 | Reported : 12/Sep/2023 01:15PM             |
| Visit ID : CBASOPV95152      | Status : Final Report                      |
| Ref Doctor : Dr.SELF         | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 551472     |  |

**DEPARTMENT OF IMMUNOLOGY**

**ARCOFEMI - MEDIWHEEL -FULL BODY COMPREHENSIVE PLUS VITAMINS - FEMALE - 2D ECHO - PAN INDIA - FY2324**

| Test Name | Result | Unit | Bio. Ref. Range | Method |
|-----------|--------|------|-----------------|--------|
|-----------|--------|------|-----------------|--------|

|                     |    |       |         |      |
|---------------------|----|-------|---------|------|
| VITAMIN B12 , SERUM | 91 | pg/mL | 120-914 | CLIA |
|---------------------|----|-------|---------|------|

**Comment:**

Vitamin B12 deficiency frequently causes macrocytic anemia, glossitis, peripheral neuropathy, weakness, hyperreflexia, ataxia, loss of proprioception, poor coordination, and affective behavioral changes. A significant increase in RBC MCV may be an important indicator of vitamin B12 deficiency.

Patients taking vitamin B12 supplementation may have misleading results. A normal serum concentration of B12 does not rule out tissue deficiency of vitamin B12 . The most sensitive test for B12 deficiency at the cellular level is the assay for MMA. If clinical symptoms suggest deficiency, measurement of MMA and homocysteine should be considered, even if serum B12 concentrations are normal.



SIN No:SPL23130030

NABL renewal accreditation under process

|                              |  |
|------------------------------|--|
| Patient Name : Mrs.LALITHA S | Collected : 12/Sep/2023 08:41AM            |
| Age/Gender : 60 Y 0 M 5 D/F  | Received : 12/Sep/2023 11:33AM             |
| UHID/MR No : RJAY.0000054193 | Reported : 12/Sep/2023 11:51AM             |
| Visit ID : CBASOPV95152      | Status : Final Report                      |
| Ref Doctor : Dr.SELF         | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 551472     |  |

**DEPARTMENT OF CLINICAL PATHOLOGY**

**ARCOFEMI - MEDIWHEEL -FULL BODY COMPREHENSIVE PLUS VITAMINS - 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 | CLEAR       |  | CLEAR       | Visual           |
| pH           | 5.5         |  | 5-7.5       | DOUBLE INDICATOR |
| SP. GRAVITY  | 1.025       |  | 1.002-1.030 | Bromothymol Blue |

**BIOCHEMICAL EXAMINATION**

|                        |            |  |          |                            |
|------------------------|------------|--|----------|----------------------------|
| URINE PROTEIN          | POSITIVE + |  | NEGATIVE | PROTEIN ERROR OF INDICATOR |
| GLUCOSE                | NEGATIVE   |  | NEGATIVE | GLUCOSE OXIDASE            |
| URINE BILIRUBIN        | NEGATIVE   |  | NEGATIVE | AZO COUPLING REACTION      |
| URINE KETONES (RANDOM) | NEGATIVE   |  | NEGATIVE | SODIUM NITRO PRUSSIDE      |
| UROBILINOGEN           | NORMAL     |  | NORMAL   | MODIFIED EHRlich REACTION  |
| BLOOD                  | NEGATIVE   |  | NEGATIVE | Peroxidase                 |
| NITRITE                | NEGATIVE   |  | NEGATIVE | Diazotization              |
| LEUCOCYTE ESTERASE     | NEGATIVE   |  | NEGATIVE | LEUCOCYTE ESTERASE         |

**CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY**

|                  |        |      |                  |            |
|------------------|--------|------|------------------|------------|
| PUS CELLS        | 2-3    | /hpf | 0-5              | Microscopy |
| EPITHELIAL CELLS | 3-4    | /hpf | <10              | MICROSCOPY |
| RBC              | NIL    | /hpf | 0-2              | MICROSCOPY |
| CASTS            | NIL    |      | 0-2 Hyaline Cast | MICROSCOPY |
| CRYSTALS         | ABSENT |      | ABSENT           | MICROSCOPY |

Result Rechecked



SIN No:UR2182596

NABL renewal accreditation under process

|                              |  |
|------------------------------|--|
| Patient Name : Mrs.LALITHA S | Collected : 12/Sep/2023 08:43AM            |
| Age/Gender : 60 Y 0 M 5 D/F  | Received : 12/Sep/2023 11:33AM             |
| UHID/MR No : RJAY.0000054193 | Reported : 12/Sep/2023 11:49AM             |
| Visit ID : CBASOPV95152      | Status : Final Report                      |
| Ref Doctor : Dr.SELF         | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 551472     |  |

**DEPARTMENT OF CLINICAL PATHOLOGY**

**ARCOFEMI - MEDIWHEEL -FULL BODY COMPREHENSIVE PLUS VITAMINS - 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 |



SIN No:UPP015468,UF009450  
NABL renewal accreditation under process

|                              |  |
|------------------------------|--|
| Patient Name : Mrs.LALITHA S | Collected : 12/Sep/2023 11:22AM            |
| Age/Gender : 60 Y 0 M 5 D/F  | Received : 13/Sep/2023 12:57PM             |
| UHID/MR No : RJAY.0000054193 | Reported : 15/Sep/2023 05:05PM             |
| Visit ID : CBASOPV95152      | Status : Final Report                      |
| Ref Doctor : Dr.SELF         | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 551472     |  |

**DEPARTMENT OF CYTOLOGY**

**ARCOFEMI - MEDIWHEEL -FULL BODY COMPREHENSIVE PLUS VITAMINS - FEMALE - 2D ECHO - PAN INDIA - FY2324**

**LBC PAP TEST (PAPSURE) , CERVICAL BRUSH SAMPLE**

|            |                                  |  |
|------------|----------------------------------|--|
|            | <b>CYTOLOGY NO.</b>              | 15436/23   |
| <b>I</b>   | <b>SPECIMEN</b>                  |  |
| <b>a</b>   | SPECIMEN ADEQUACY                | ADEQUATE   |
| <b>b</b>   | <b>SPECIMEN TYPE</b>             | LIQUID-BASED PREPARATION (LBC)   |
|            | SPECIMEN NATURE/SOURCE           | CERVICAL SMEAR   |
| <b>c</b>   | ENDOCERVICAL-TRANSFORMATION ZONE | ABSENT   |
| <b>d</b>   | COMMENTS                         | PAUCICELLULAR SMEAR  |
| <b>II</b>  | <b>MICROSCOPY</b>                | Superficial and intermediate squamous epithelial cells with benign morphology.<br><br>Inflammatory cells, predominantly neutrophils.<br><br>Negative for intraepithelial lesion/ malignancy. |
| <b>III</b> | <b>RESULT</b>                    |  |
| <b>a</b>   | <b>EPITHELIAL CELL</b>           |  |
|            | SQUAMOUS CELL ABNORMALITIES      | NOT SEEN   |
|            | GLANDULAR CELL ABNORMALITIES     | NOT SEEN   |
| <b>b</b>   | <b>ORGANISM</b>                  | NIL  |
| <b>IV</b>  | <b>INTERPRETATION</b>            | NEGATIVE FOR INTRAEPITHELIAL LESION OR MALIGNANCY  |

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

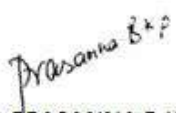

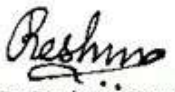

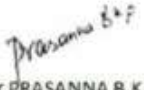
**\*\*\* End Of Report \*\*\***

Result/s to Follow:  
PERIPHERAL SMEAR

|                              |  |
|------------------------------|--|
| Patient Name : Mrs.LALITHA S | Collected : 12/Sep/2023 11:22AM            |
| Age/Gender : 60 Y 0 M 5 D/F  | Received : 13/Sep/2023 12:57PM             |
| UHID/MR No : RJAY.0000054193 | Reported : 15/Sep/2023 05:05PM             |
| Visit ID : CBASOPV95152      | Status : Final Report                      |
| Ref Doctor : Dr.SELF         | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 551472     |  |

**DEPARTMENT OF CYTOLOGY**

**ARCOFEMI - MEDIWHEEL -FULL BODY COMPREHENSIVE PLUS VITAMINS - FEMALE - 2D ECHO - PAN INDIA - FY2324**

|  |   |  |  |  |
|--|---|--|--|--|
| <br><b>Dr PRASANNA B.K.P</b><br>Md.Path.Pathologist | <br><b>DR.SHIVARAJA SHETTY</b><br>M.B.B.S,M.D(Biochemistry)<br>CONSULTANT BIOCHEMIST | <br><b>Dr.Reshma Stanly</b><br>M.B.B.S,DNB(Pathology)<br>Consultant Pathologist | <br><b>Dr.Shobha Emmanuel</b><br>M.B.B.S,M.D(Pathology)<br>Consultant Pathologist | <br><b>Dr PRASANNA B.K.P</b><br>Md.Path.Pathologist |
|--|---|--|--|--|



SIN No:CS067765

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