





Age/Gender

: 42 Y 9 M 14 D/F

UHID/MR No

: CANN.0000111238

Visit ID

: CANNOPV350618

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

: 75984

Collected : 14/Apr/2023 08:47AM

Received : 14/Apr/2023 01:51PM

Reported : 14/Apr/2023 03:48PM

Status : Final Report

: ARCOFEMI HEALTHCARE LIMITED Sponsor Name

#### **DEPARTMENT OF HAEMATOLOGY**

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

PERIPHERAL SMEAR, WHOLE BLOOD-EDTA

METHODOLOGY

: Microscopic

RBC MORPHOLOGY

: Mild anisocytosis, predominantly normocytic normochromic RBC's noted.

WBC MORPHOLOGY

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

**PLATELETS** 

: Adequate in number.

PARASITES

: No haemoparasites seen.

NOTE/ COMMENT

: Please correlate clinically.

Page 1 of 13











Age/Gender : 42 Y 9 M 14 D/F UHID/MR No : CANN.0000111238

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#### **DEPARTMENT OF HAEMATOLOGY**

ARCOFEMI - MEDIWHEEL - FULL BODY	ANNUAL PLUS CHE	CK ADVANCED	- FEMALE - 2D ECHO -	PAN INDIA - FY2324		
Test Name	Result	Unit	Bio, Ref. Range	Method		

PCV RBC COUNT MCV MCH MCHC R.D.W TOTAL LEUCOCYTE COUNT (TLC)	35.80  4.27  83.9  27.1  32.2  15.5  10,200	% Million/cu.mm fL pg g/dL % cells/cu.mm	36-46  3.8-4.8  83-101  27-32  31.5-34.5  11.6-14  4000-10000	Electronic pulse & Calculation Electrical Impedence Calculated Calculated Calculated Calculated Calculated
MCV WCH MCHC R.D.W FOTAL LEUCOCYTE COUNT (TLC)	83.9 27.1 32.2 15.5 10,200	fL pg g/dL %	83-101 27-32 31.5-34.5 11.6-14	Calculated Calculated Calculated Calculated
MCH MCHC R.D.W TOTAL LEUCOCYTE COUNT (TLC)	27.1 32.2 15.5 10,200	pg g/dL %	27-32 31.5-34.5 11.6-14	Calculated Calculated Calculated
MCHC R.D.W  TOTAL LEUCOCYTE COUNT (TLC)	32.2 15.5 10,200	g/dL %	31.5-34.5 11.6-14	Calculated Calculated
R.D.W FOTAL LEUCOCYTE COUNT (TLC)	15.5 10,200	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	10,200			
,		cells/cu.mm	4000-10000	
			1000 10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	66.2	%	40-80	Electrical Impedance
LYMPHOCYTES	25.2	%	20-40	Electrical Impedance
EOSINOPHILS	2.1	%	1-6	Electrical Impedance
MONOCYTES	4.6	%	2-10	Electrical Impedance
BASOPHILS	1.9	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	6752.4	Cells/cu.mm	2000-7000	Electrical Impedance
YMPHOCYTES	2570.4	Cells/cu.mm	1000-3000	Electrical Impedance
EOSINOPHILS	214.2	Cells/cu.mm	20-500	Electrical Impedance
MONOCYTES	469.2	Cells/cu.mm	200-1000	Electrical Impedance
BASOPHILS	193.8	Cells/cu.mm	0-100	Electrical Impedance
PLATELET COUNT	265000	cells/cu.mm	150000-410000	Electrical impedence
ERYTHROCYTE SEDIMENTATION RATE (ESR)	38	mm at the end of 1 hour	0-20	Modified Westergre

METHODOLOGY : Microscopic

RBC MORPHOLOGY : Mild anisocytosis, predominantly normocytic normochromic RBC's noted.

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

PLATELETS : Adequate in number.

PARASITES : No haemoparasites seen.

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: Dr.SELF : 75984

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: 14/Apr/2023 01:51PM

Reported Status

: 14/Apr/2023 03:48PM : Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

#### **DEPARTMENT OF HAEMATOLOGY**

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

**Test Name** 

Result

Unit

Bio. Ref. Range

Method

NOTE/ COMMENT

: Please correlate clinically.

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SIN No:BED230092869

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

Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)

Address:







Age/Gender

: 42 Y 9 M 14 D/F

UHID/MR No Visit ID

: CANN.0000111238

Ref Doctor

: CANNOPV350618

: Dr.SELF Emp/Auth/TPA ID : 75984

Collected : 14/Apr/2023 08:47AM

Received : 14/Apr/2023 01:51PM

Reported : 14/Apr/2023 05:10PM

Status : Final Report

: ARCOFEMI HEALTHCARE LIMITED Sponsor Name

DEPARTMENT OF HAEMATOLOGY					
ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - 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	А		Microplate Hemagglutination	
Rh TYPE	Positive		Microplate Hemagglutination	
PLEASE NOTE THIS SAMPLE HAS BE	EEN TESTED ONLY	FOR ABO MAJOR GRO	OUPING AND ANTI D ONLY.	

Page 4 of 13











Patient Name

: Mrs.KALPANA KALYANA SUKUMARI

Age/Gender

: 42 Y 9 M 14 D/F

UHID/MR No

: CANN.0000111238

Visit ID

: CANNOPV350618

Ref Doctor Emp/Auth/TPA ID : Dr.SELF : 75984

Collected

: 14/Apr/2023 08:47AM

Received

: 14/Apr/2023 01:51PM

Reported Status

: 14/Apr/2023 02:52PM : Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

#### **DEPARTMENT OF BIOCHEMISTRY**

ARCOFEMI - MEDIWHEEL - FULL BODY	ANNUAL PLUS CHE	CK ADVANCED	- FEMALE - 2D ECHO -	PAN INDIA - FY2324
Test Name	Result	Unit	Bio. Ref. Range	Method

GLUCOSE, FASTING, NAF PLASMA	110	mg/dL	70-100	HEXOKINASE

#### **Comment:**

#### As per American Diabetes Guidelines

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

GLUCOSE, POST PRANDIAL (PP), 2	161	mg/dL	70-140	HEXOKINASE
HOURS, NAF PLASMA				

#### **Comment:**

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

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







Age/Gender : 42 Y 9 M 14 D/F UHID/MR No : CANN.0000111238 Visit ID : CANNOPV350618

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: 14/Apr/2023 08:47AM Collected

Received : 14/Apr/2023 01:51PM Reported : 14/Apr/2023 02:52PM

Status : Final Report

: ARCOFEMI HEALTHCARE LIMITED Sponsor Name

#### **DEPARTMENT OF BIOCHEMISTRY**

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY2324					
Test Name	Result	Unit	Bio. Ref. Range	Method	
HBA1C, GLYCATED HEMOGLOBIN ,	6.7	%	*	HPLC	

HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD-EDTA	6.7	%	*-	HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD-EDTA	146	mg/dL		Calculated

#### **Comment:**

Reference Range as per American Diabetes Association (ADA):

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

Note: Dietary preparation or fasting is not required.

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

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SIN No:PLF01959553,PLP1321967,EDT230037849

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

Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)

Address:







Age/Gender

: 42 Y 9 M 14 D/F

UHID/MR No Visit ID

: CANN.0000111238

Ref Doctor

: CANNOPV350618

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Collected : 14/Apr/2023 08:47AM

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: 14/Apr/2023 04:14PM Status : Final Report

: ARCOFEMI HEALTHCARE LIMITED Sponsor Name

#### DEPARTMENT OF BIOCHEMISTRY

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ARCOFEMI - MEDIWHEEL - FULL BODY	ANNUAL PLUS CHE	CK ADVANCED	- FEMALE - 2D ECHO -	PAN INDIA - FY2324
Test Name	Result	Unit	Bio. Ref. Range	Method

LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	191	mg/dL	<200	CHO-POD
TRIGLYCERIDES	92	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	51	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	140	mg/dL	<130	Calculated
LDL CHOLESTEROL	121.6	mg/dL	<100	Calculated
VLDL CHOLESTEROL	18.4	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.75		0-4.97	Calculated

#### **Comment:**

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

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

Measurements in the same patient can show physiological and analytical variations.

NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.

Page 7 of 13



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

Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)

Address: Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telanga

SIN No:SE04348666







Age/Gender

: 42 Y 9 M 14 D/F

UHID/MR No

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Ref Doctor

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: Dr.SELF Emp/Auth/TPA ID : 75984

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Status : Final Report

: ARCOFEMI HEALTHCARE LIMITED Sponsor Name

DEPARTMENT	OF BIOCHEMISTRY
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ARCOFEMI - MEDIWHEEL	FULL BODY ANNUA	AL PLUS CHECK ADVANCED	) - FEMALE - 2D ECHO	- PAN INDIA - FY2324

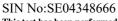
Test Name	Result	Unit	Bio. Ref. Range	Method
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LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.39	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.08	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.31	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	11	U/L	<35	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	17.0	U/L	<35	IFCC
ALKALINE PHOSPHATASE	53.00	U/L	30-120	IFCC
PROTEIN, TOTAL	7.10	g/dL	6.6-8.3	Biuret
ALBUMIN	4.20	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.90	g/dL	2.0-3.5	Calculated
A/G RATIO	1.45		0.9-2.0	Calculated

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Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)

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#### **DEPARTMENT OF BIOCHEMISTRY** ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY2324 Unit Method Result Bio. Ref. Range

RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	0.47	mg/dL	0.72 – 1.18	JAFFE METHOD
UREA	13.00	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	6.1	mg/dL	8.0 - 23.0	Calculated
URIC ACID	3.60	mg/dL	2.6-6.0	Uricase PAP
CALCIUM	8.90	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	3.60	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	136	mmol/L	136–146	ISE (Indirect)
POTASSIUM	3.9	mmol/L	3.5–5.1	ISE (Indirect)
CHLORIDE	103	mmol/L	101–109	ISE (Indirect)

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

Method **Test Name** Unit Result Bio. Ref. Range

GAMMA GLUTAMYL TRANSPEPTIDASE 15.00 U/L <38 **IFCC** (GGT), SERUM

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Age/Gender

: 42 Y 9 M 14 D/F

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: Dr.SELF Emp/Auth/TPA ID : 75984

Collected

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: 14/Apr/2023 01:48PM : 14/Apr/2023 02:34PM

Reported Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

#### **DEPARTMENT OF IMMUNOLOGY**

ARCOFEMI - MEDIWHEEL - FULL BODY	ANNUAL PLUS CHE	CK ADVANCED	- FEMALE - 2D ECHO -	- PAN INDIA - FY2324
Test Name	Result	Unit	Bio. Ref. Range	Method

THYROID PROFILE (TOTAL T3, TOTAL T4,	TSH), SERUM			
TRI-IODOTHYRONINE (T3, TOTAL)	0.93	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	9.26	μg/dL	6.09-12.23	CLIA
THYROID STIMULATING HORMONE (TSH)	1.722	μIU/mL	0.34-5.60	CLIA

#### **Comment:**

Serum TSH concentrations exhibit a diurnal variation with the peak occurring during the night and the nadir occurring between 10 a.m. and 4 p.m.In primary hypothyroidism, thyroid-stimulating hormone (TSH) levels will be elevated. In primary hyperthyroidism, TSH levels will be low. Elevated or low TSH in the context of normal free thyroxine is often referred to as subclinical hypo- or hyperthyroid-ism, respectively. Physiological rise in Total T3 / T4 levels is seen in pregnancy and in patients on steroid therapy.

Recommended test for T3 and T4 is unbound fraction or free levels as it is metabolically active.

#### Note:

IFOr pregnant temales	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

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: 42 Y 9 M 14 D/F

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Collected : 14/Apr/2023 08:47AM

Received : 14/Apr/2023 01:43PM

Reported : 14/Apr/2023 02:46PM

Status : Final Report

: ARCOFEMI HEALTHCARE LIMITED Sponsor Name

#### **DEPARTMENT OF CLINICAL PATHOLOGY**

Test Name	Result	Unit	Bio. Ref. Range	Method
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COMPLETE URINE EXAMINATION , $U$	RINE			
PHYSICAL EXAMINATION				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
рН	6.0		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	1.010		1.002-1.030	Bromothymol Blue
BIOCHEMICAL EXAMINATION				
URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE		NEGATIVE	GLUCOSE OXIDASE
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING REACTION
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	SODIUM NITRO PRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	MODIFED EHRLICH REACTION
BLOOD	NEGATIVE		NEGATIVE	Peroxidase
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	LEUCOCYTE ESTERASE
CENTRIFUGED SEDIMENT WET MO	UNT AND MICROSCOPY	,		
PUS CELLS	2-4	/hpf	0-5	Microscopy
EPITHELIAL CELLS	2-4	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	ABSENT		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY

Page 12 of 13







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

Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)

Address:







Patient Name

: Mrs.KALPANA KALYANA SUKUMARI

Age/Gender

: 42 Y 9 M 14 D/F

UHID/MR No Visit ID

: CANN.0000111238

Ref Doctor

: CANNOPV350618

Emp/Auth/TPA ID

: Dr.SELF : 75984

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Reported Status

: 14/Apr/2023 02:39PM

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF CLI	NICAL	. PATHOL	.OGY
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AF	RCOFEMI -	MEDIWHEEL	- FULL BODY	'ANNUAL	<b>PLUS CHECK</b>	ADVANCED	- 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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URINE GLUCOSE(FASTING)	NEGATIVE	NEGATIVE	Dipstick

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

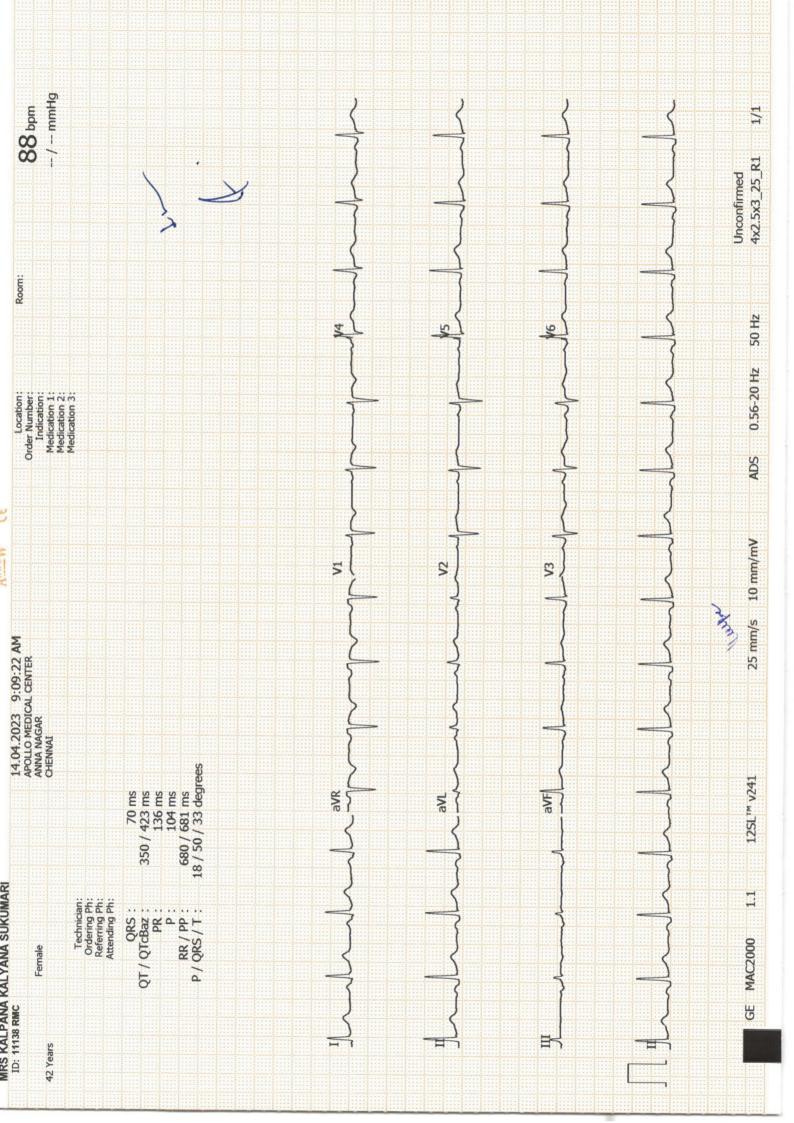
DR. R.SRIVATSAN M.D.(Biochemistry)

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

Page 13 of 13







Patient Name : Mrs. KALPANA KALYANA SUKUMARI Age : 42 Y/F

UHID : CANN.0000111238 OP Visit No : CANNOPV350618 Reported By: : Dr. ARULNITHI AYYANATHAN Conducted Date : 15-04-2023 16:25

Referred By : SELF

## **ECG REPORT**

## **Observation:**-

- 1. Normal Sinus Rhythm.
- 2. Heart rate is 88 beats per minutes.

## **Impression:**

NORMAL RESTING ECG.

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

Dr. ARULNITHI AYYANATHAN



Tadent Tame . Mile. In the International Content of the Content of	Patient Name	: Mrs. KALPANA KALYANA SUKUMARI	Age/Gender	: 42 Y/F
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UHID/MR No.

: CANN.0000111238

Sample Collected on :

LRN#

: RAD1976357

**Ref Doctor** : SELF **Emp/Auth/TPA ID** : 75984

OP Visit No Reported on : CANNOPV350618 : 14-04-2023 16:52

Specimen :

#### DEPARTMENT OF RADIOLOGY

#### **ULTRASOUND - WHOLE ABDOMEN**

Liver is normal in size (liver span ~14.5cm) and shows mild fatty changes Intra and extra hepatic biliary passages are not dilated.

Gall bladder appears normal with no evidence of calculus. Wall thickness appear normal.

Pancreas and spleen appear normal.

Spleen measures 8.5 cms.

Portal and splenic veins appear normal.

No evidence of ascites or lymphadenopathy. Diaphragmatic movements are satisfactory. There is no evidence of sub diaphragmatic pathology or pleural effusion.

Right kidney measures 9.5 x 4.0cms.

Left kidney measures 10.9 x 5.3 cms.

Both kidneys show normal echopattern with no evidence of calculi or calyceal dilatation.



Patient Name

: Mrs. KALPANA KALYANA SUKUMARI

Age/Gender

: 42 Y/F

uterus measures 10.9 x 7.2 x 5.5cms

A small intramural fibroid measuring ~ 1.3 x 1.2cm in anterior wall of uterus

The endometrial thickness 10 mm.

Right ovary measures 3.0 x 1.3 cms.

Left ovary measures 2.9 x 1.5 cms.

Both ovaries are normal in size and echotexture.

Bladder is normal in contour.

IMPRESSION:

\*GRADE I FATTY LIVER.

\*SMALL INTRAMURAL UTERINE FIBROID

Dr. M SWAPNA
MBBS ,DNB(RD)
Radiology



Patient Name : Mrs. KALPANA KALYANA SUKUMARI Age/Gender : 42 Y/F

UHID/MR No.

: CANN.0000111238

OP Visit No

: CANNOPV350618

Sample Collected on :

LRN#

: RAD1976357

Reported on

: 14-04-2023 16:06

**Ref Doctor** : SELF **Emp/Auth/TPA ID** : 75984

: SELF

Specimen

.

#### DEPARTMENT OF RADIOLOGY

#### SONO MAMOGRAPHY - SCREENING

CH :No complaints, Annual check up

Family H/O Breast cancer: No History of breast surgery: No

Previous USG : 2018 (normal)

## **REPORT:**

MAMMOGRAM Both sides Views: Cranio caudal /oblique mediolateral

Special views (if any):No

Type of Breast Parenchyma- Heterogeneously dense fibroglandular tissue

ACR category: C

**Asymmetry: No** 

## **MASS/OPACITY:**

No mass/opacity noted in both breasts.

#### **CALCIFICATION:**

## Round calcification with lucent centre in left breast -benign

No Calcification of suspicious Morphology/ Distribution noted in both breast.

## **ASSOCIATED FEATURES (Both Breast):**

Architectural distortion :Absent



Patient Name : Mrs. KALPANA KALYANA SUKUMARI Age/Gender : 42 Y/F

Intramammary lymph node : Absent

solitary dilated ducts : Absent

Skin lesion : Absent

Skin and nipple retraction : Absent Skin/Subcutaneous/trabecular thickening : Absent

Axilla : No significant abnormality

**ULTRASOUND SCREENING:** 

TISSUE COMPOSITION: heterogeneous background echotexture

#### **MASSES/CYST:**

No suspicious solid /cystic lesions in both breasts

**Associated features (Both Breasts)** 

Architectural Distortion :Absent

Duct changes :Absent
Skin changes :Absent

Skin changes :Absent
Edema :Absent
Vascularity :Absent

Calcification :Absent

Both Axilla : No axillary lymphadenopathy

#### **IMPRESSION:**

NO SUSPICIOUS ABNORMALITY IN BOTH BREASTS

-BIRADS -I

#### SUGGESTION:

Regular Mammogram screening.

Though mammography is the single best method of screening breast cancer, it does not detect all breast cancers. The false negative rate of mammography is approximately 10 % It is important for you to do breast self - examination on a continuing basis .If lump is felt, consult your Doctor.

NB:BIRADS Categories.

- I. Normal.
- II. Benign finding.



**Patient Name** 

: Mrs. KALPANA KALYANA SUKUMARI

Age/Gender

: 42 Y/F

- III. Probably benign to be followed up after 6 months.
- IV. Indeterminate lesion further evaluation necessary.
- V. Highly suggestive of malignancy
- VI. Proven malignancy.

BIRADS is an Imaging based classification. This has to be further correlated clinically and with other investigations including histopathological findings where ever warranted.

Disclaimer: Please note that this report is a radiological profesional opinion. It has to be correlated clinically and interpreted along with other investigations for comprehensive Health care management.

Dr. M SWAPNA
MBBS ,DNB(RD)
Radiology



Patient Name : Mrs. KALPANA KALYANA SUKUMARI Age/Gender : 42 Y/F

UHID/MR No.

: CANN.0000111238

OP Visit No

: CANNOPV350618

Sample Collected on :

: RAD1976357

Reported on

: 14-04-2023 11:29

Ref Doctor Emp/Auth/TPA ID

LRN#

: SELF : 75984 Specimen

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#### DEPARTMENT OF RADIOLOGY

#### X-RAY CHEST PA

Lung fields are clear.

Cardio thoracic ratio is normal.

Apices, costo and cardiophrenic angles are free.

Cardio vascular shadow and hila show no abnormal feature.

Bony thorax shows no significant abnormality.

Domes of diaphragm are well delineated.

## **IMPRESSION:**

\*NO SIGNIFICANT ABNORMALITY DETECTED.

Dr. M SWAPNA

MBBS ,DNB(RD)

Radiology



N kayanaks 8500110242

CAM 111238 OCR- 91317



#### LETTER OF APPROVAL / RECOMMENDATION

To,

The Coordinator,

Mediwheel (Arcofemi Healthcare Limited)

Helpline number: 011-41195959

Dear Sir / Madam,

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

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

PARTICULARS	EMPLOYEE DETAILS
NAME	MRS. KALYANA SUKUMARI N KALPANA
EC NO.	75984
DESIGNATION	JOINT MANAGER
PLACE OF WORK	KOVOOR
BIRTHDATE	30-06-1980
PROPOSED DATE OF HEALTH	14-04-2023
CHECKUP	
BOOKING REFERENCE NO.	23J75984100057682E

This letter of approval / recommendation is valid if submitted along with copy of the Bank of Baroda employee id card. This approval is valid from 11-04-2023 till 31-03-2024 The list of medical tests to be conducted is provided in the annexure to this letter. Please note that the said health checkup is a cashless facility as per our tie up arrangement. We request you to attend to the health checkup requirement of our employee and accord your top priority and best resources in this regard. The EC Number and the booking reference number as given in the above table shall be mentioned in the invoice, invariably.

We solicit your co-operation in this regard.

Yours faithfully,

Sd/-

Chief General Manager
HRM Department
Bank of Baroda

(Note: This is a computer generated letter. No Signature required. For any clarification, please contact Mediwheel (Arcoferni Healthcare Limited))



# **OPHTHALMOLOGY**



100		Expertise. Closer to you
Name: Mr. Kalpana Occupation:	1.1	/φ Reg. No.: 111 23 8
4⊋ Age:Sex: Male □	Ref. Physician:	
Address:	Copies to::	
Ph:	(11400111)140011111111111111111111111111	
R	EPORT ON OPHTHALMIC EXAMINA	ATION
History:	Complement Complement	
	als x 10 mm	
	als x 10 gm	
Present Complaint:		
	MI	
ON EXAMINATION:	RE	LE
Ocules Messes 1	tim	tuu
Ocular Movements :	<b>\</b>	tuu
Anterior Segment :	• •	
Intra-Ocular-Pressure :		
Visual Acuity: D.V. :		619
Without Glass :	6/24 6/16 No tun	619
With Glass:	616	0/6
N.V. :	NG	N 6
Visual Fields :	tuu	tue
Fundus:	· ·	
Impression:		
Advice :		1 Root
Colour Vision :	rormel	OPHTHALMOLOGY / OPTOMETRIST













# ENT checkup

Hrs. Kalfana Kalyana Sukumori 42/F 14/4/23

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

General Examination / Allergies History

No complaints ENT - @

Follow up date:

**Doctor Signature & Stamp** 

Convenient & reliable. Complete diagnostic services for the entire family. All under one roof.





Mrs. Kalpara Kalyara Sukumari

42 F

14/4/23

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

General Examination / Allergies History

Adv. Scaling (Restoration) Toeatment - Lating done

Follow up date:

**Doctor Signature & Stamp** 

Convenient & reliable. Complete diagnostic services for the entire family. All under one roof

& AMARIA





## **Apollo Clinic**

## **CONSENT FORM**

Patient Name: Kalpana UHID Number: 111 2 3 8	Company Name: AY COFA?
I Mr/Mrs/Ms	
Patient Signature: N (Cupama K.)	Date: 14/0 4/23
	Apollo Medical Centra No. 30, F-Block. 2nd Avenue. No. 30, F-Block. 2nd Avenue. Anra Nagar East, Chennai-600 102 Anra Nagar East, Chennai-600 102 Ph.: 2620 6666 1 2622 4505 Ph.: 2620 6666 1 2622 4505 Toll free No. 1860 500 7788

Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)

Regd Office: 1-10-60/63, Asheka Raghupathi Chambers, 5th Floor, Begumper, Hyderahad, Telanguna - 500 016 (
www.apoliohi.com [Email 10: wrquiry@apoliohi.com, Ph No: 040-0404 7777, Fax: No: 200-4704

Address:
D No.36, V - Meck. 2nd Avenue, Nous langer Cost, Chemist 640 192,
Phone - 944-2472-1946 / DS



APOLIC CLINICS NETWORK
Inlanguary Physiological Physiologi