

Customer Pending Tests  
DENTAL CONSULTATION WILL BE DONE ON 26/03/2024.

Name : Mrs. Kimaya Nilesh Borate

Age: 35 Y

UHID:SPUN.0000046964

Sex: F



Address : Wai

OP Number:SPUNOPV62357

Plan : ARCOFEMI MEDIWHEEL FEMALE AHC CREDIT PAN  
INDIA OP AGREEMENT

Bill No :SPUN-OCR-10556

Date : 23.03.2024 10:46

Sno	Service Type/ServiceName	Department
1	ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324	
1	GAMMA GLUTAMYL TRANSFERASE (GGT)	
2	2D ECHO	
3	LIVER FUNCTION TEST (LFT)	
4	GLUCOSE, FASTING	
5	HEMOGRAM + PERIPHERAL SMEAR	
6	GYNACEOLOGY CONSULTATION	
7	DIET CONSULTATION	
8	COMPLETE URINE EXAMINATION	
9	URINE GLUCOSE(POST PRANDIAL) (160pm)	
10	PERIPHERAL SMEAR	
11	ECG	
12	LBC PAP TEST- PAPSURE	
13	RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)	
14	DENTAL CONSULTATION	
15	GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL) (160pm)	
16	URINE GLUCOSE(FASTING)	
17	HbA1c, GLYCATED HEMOGLOBIN	
18	X-RAY CHEST PA	
19	ENT CONSULTATION	
20	FITNESS BY GENERAL PHYSICIAN	
21	BLOOD GROUP ABO AND RH FACTOR	
22	LIPID PROFILE	
23	BODY MASS INDEX (BMI)	
24	OPHTHAL BY GENERAL PHYSICIAN	
25	ULTRASOUND - WHOLE ABDOMEN	
26	THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)	


## CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

of Kimaya Borate on 23/03/24

After reviewing the medical history and on clinical examination it has been found that he/she is

	Tick
<ul style="list-style-type: none"><li>• Medically Fit</li></ul>	<input checked="" type="checkbox"/>
<ul style="list-style-type: none"><li>• Fit with restrictions/recommendations</li></ul> <p>Though following restrictions have been revealed, in my opinion, these are not impediments to the job.</p> <p>1.....</p> <p>2.....</p> <p>3.....</p> <p>However the employee should follow the advice/medication that has been communicated to him/her.</p> <p>Review after _____</p>	
<ul style="list-style-type: none"><li>• Currently Unfit.</li></ul> <p>Review after _____ recommended</p>	
<ul style="list-style-type: none"><li>• Unfit</li></ul>	

Dr. Samrat Shah   
General Physician  
Apollo Spectra Hospital Pune

*This certificate is not meant for medico-legal purposes*

**Dr. Samrat Shah**  
MBBS MD  
Reg No. 2021097302  
Consultant Internal Medicine  
Apollo Speciality Hospital

Date : 23/03/24  
 MRNO :  
 Name : Kimaya Borate  
 Age/Gender : 35 / F  
 Mobile No :  
 Department : Gen Physician  
 Consultant :  
 Reg. No : Dr. Samrat  
 Qualification : Shah  
 Consultation Timing :

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

General Examination / Allergies  
History

Clinical Diagnosis & Management Plan

Pt not seen

Reports noted: found fit

Follow up date:

**Dr. Samrat Shah**  
MBBS MD  
Reg No. 2021097302  
Consultant Internal Medicine  
Apollo Spectra Hospital  
Doctor Signature  
*Samrat Shah*

Date : 23/3/24.  
MRNO :  
Name : Kimaya Borate  
Age/Gender :  
Mobile No :

Department :  
Consultant : Dr. Sayali  
Reg. No : Bogam.  
Qualification :  
Consultation Timing :

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

General Examination / Allergies  
History

Clinical Diagnosis & Management Plan

35yrs / F  
M/H - Regular  
K/O PCOD.  
MS : 15yrs.  
P<sub>2</sub>L<sub>2</sub> - Both LSCS.  
Presently no complaints  
LMP - 18/3/24.  
Breasts - soft  
P/A - LSCS scar (+)  
P/S -  
P/V -  
Pap smear (LBC) taken

Follow up date:

  
Doctor Signature

Date : 23/3/24  
MRNO :  
Name : Kinaya Bredde (46964)  
Age/Gender :  
Mobile No : 3571F

Department : ENT  
Consultant : Dr. Mehta.  
Reg. No :  
Qualification :  
Consultation Timing :

SPO2L 100%.

Pulse: 66/44	B.P: 130/70	Resp: 18/44	Temp: 98 F
Weight: 79	Height: 155cm	BMI: 32.8	Waist Circum: -

General Examination / Allergies  
History

Clinical Diagnosis & Management Plan

ENT - NAS



**Dr. Shiv Mehta**  
MBBS, MS (ENT), Head & Neck Surgeon  
Reg. No. 2010030364 (MMC)  
Mob.: 9890250205

Follow up date:

Doctor Signature

Patient Name : Mrs.KIMAYA NILESH BORATE  
Age/Gender : 35 Y 8 M 11 D/F  
UHID/MR No : SPUN 000046964  
Visit ID : SPUNOPV62357  
Ref Doctor : Dr.SELF  
Emp/Auth/TPA ID : 89564

Collected : 23/Mar/2024 11:04AM  
Received : 23/Mar/2024 12:24PM  
Reported : 23/Mar/2024 01:30PM  
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**

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>HEMOGRAM , WHOLE BLOOD EDTA</b>				
HAEMOGLOBIN	13	g/dL	12-15	Spectrophotometer
PCV	39.50	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.49	Million/cu.mm	3.8-4.8	Electrical Impedance
MCV	88	fL	83-101	Calculated
MCH	29	pg	27-32	Calculated
MCHC	33	g/dL	31.5-34.5	Calculated
R.D.W	12.5	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	6,400	cells/cu.mm	4000-10000	Electrical Impedance
<b>DIFFERENTIAL LEUCOCYTIC COUNT (DLC)</b>				
NEUTROPHILS	55.4	%	40-80	Electrical Impedance
LYMPHOCYTES	34.7	%	20-40	Electrical Impedance
EOSINOPHILS	4.2	%	1-6	Electrical Impedance
MONOCYTES	5.7	%	2-10	Electrical Impedance
BASOPHILS	0	%	<1-2	Electrical Impedance
<b>ABSOLUTE LEUCOCYTE COUNT</b>				
NEUTROPHILS	3545.6	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2220.8	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	268.8	Cells/cu.mm	20-500	Calculated
MONOCYTES	364.8	Cells/cu.mm	200-1000	Calculated
Neutrophil lymphocyte ratio (NLR)	1.6		0.78- 3.53	Calculated
PLATELET COUNT	376000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	5	mm at the end of 1 hour	0-20	Modified Westergren

**PERIPHERAL SMEAR**

RBC's are Normocytic Normochromic  
WBC's are normal in number and morphology  
Platelets are Adequate  
No hemoparasite seen.

Page 1 of 15



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



SIN No:BED240080394

This test has been performed at Apollo Health and Lifestyle Ltd -Gandhinagar Pedd Pedd, Diagnostics Lab

Patient Name : Mrs.KIMAYA NILESH BORATE  
Age/Gender : 35 Y 8 M 11 D/F  
UHID/MR No : SPUN.0000048964  
Visit ID : SPUNOPV62357  
Ref Doctor : Dr.SELF  
Emp/Auth/TPA ID : 89564

Collected : 23/Mar/2024 11:04AM  
Received : 23/Mar/2024 12:24PM  
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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.Sanjay Ingle  
M.B.B.S,M.D(Pathology)  
Consultant Pathologist

SIN No:BED240080394



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



Patient Name : Mrs.KIMAYA NILESH BORATE  
Age/Gender : 35 Y 8 M 11 DiF  
UHID/DMR No : SPUN 0000046964  
Visit ID : SPUNOPV62357  
Ref Doctor : Dr.SELF  
Emp/Auth/TPA ID : 89564

Collected : 23/Mar/2024 11:04AM  
Received : 23/Mar/2024 12:24PM  
Reported : 23/Mar/2024 02:31PM  
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

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA</b>				
BLOOD GROUP TYPE	B			Microplate Hemagglutination
Rh TYPE	Positive			Microplate Hemagglutination



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

SIN No:BED240080394

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



Patient Name	: Mrs.KIMAYA NILESH BORATE	Collected	: 23/Mar/2024 11:04AM
Age/Gender	: 35 Y 8 M 11 D/F	Received	: 23/Mar/2024 12:46PM
UHID/MR No	: SPUN.0000046954	Reported	: 23/Mar/2024 01:04PM
Visit ID	: SPUNOPV62357	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 89584		

**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	92	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.



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

SIN No:PLF02132306

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



Patient Name : Mrs KIMAYA NILESH BORATE  
 Age/Gender : 35 Y 8 M 11 D/F  
 UHID/IR No : SPUN.0000046964  
 Visit ID : SPUNOPV62357  
 Ref Doctor : Dr.SELF  
 Emp/Auth/TPA ID : 89564

Collected : 23/Mar/2024 11:04AM  
 Received : 23/Mar/2024 12:23PM  
 Reported : 23/Mar/2024 03:15PM  
 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)	89	mg/dL	70-140	HEXOKINASE

**Comment:**

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

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

Test Name	Result	Unit	Bio. Ref. Range	Method
HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA				
HBA1C, GLYCATED HEMOGLOBIN	5.5	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	111	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.

1. HbA1C is recommended by American Diabetes Association for Diagnosing Diabetes and monitoring Glycemic Control by American Diabetes Association guidelines 2023.

2. Trends in HbA1C values is a better indicator of Glycemic control than a single test.

3. Low HbA1C in Non-Diabetic patients are associated with Anemia (Iron Deficiency/Hemolytic), Liver Disorders, Chronic Kidney Disease. Clinical Correlation is advised in interpretation of low Values.



Dr Saeha Shah  
 MBBS, MD (Pathology)  
 Consultant Pathologist  
 SIN No: EDT240036966



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

Patient Name : Mrs.KIMAYA NILESH BORATE  
Age/Gender : 35 Y 8 M 11 D/F  
UHID/MR No : SPUN.0000046964  
Visit ID : SPUNOPV62357  
Ref Doctor : Dr SELF  
Emp/Auth/TPA ID : 89664

Collected : 23/Mar/2024 11:04AM  
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**DEPARTMENT OF BIOCHEMISTRY**

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

4. Falsely low HbA1c (below 4%) may be observed in patients with clinical conditions that shorten erythrocyte life span or decrease mean erythrocyte age. HbA1c may not accurately reflect glycoemic control when clinical conditions that affect erythrocyte survival are present.

5. In cases of interference of Hemoglobin variants in HbA1C, alternative methods (Fructosamine) estimation is recommended for Glycemic Control

A: HbF >25%

B: Homozygous Hemoglobinopathy.

(Hb Electrophoresis is recommended method for detection of Hemoglobinopathy)



Dr Soeha Shah  
MBBS, MD (Pathology)  
Consultant Pathologist

SIN No: EDT240036966

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



Patient Name : Mrs.KIMAYA NILESH BORATE  
 Age/Gender : 35 Y 8 M 11 D/F  
 UHID/MR No : SPUN.0000046964  
 Visit ID : SPUNOPV62357  
 Ref Doctor : Dr. SELF  
 Emp/Auth/TPA ID : 89564

Collected : 23/Mar/2024 11:04AM  
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 Reported : 23/Mar/2024 02:14PM  
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 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
<b>LIPID PROFILE , SERUM</b>				
TOTAL CHOLESTEROL	190	mg/dL	<200	CHO-POD
TRIGLYCERIDES	85	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	38	mg/dL	40-60	Enzymatic Immuno-inhibition
NON-HDL CHOLESTEROL	152	mg/dL	<130	Calculated
LDL CHOLESTEROL	134.98	mg/dL	<100	Calculated
VLDL CHOLESTEROL	16.97	mg/dL	<30	Calculated
CHOL / HDL RATIO	4.96		0-4.97	Calculated
ATHEROGENIC INDEX (AIP)	< 0.01		<0.11	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
ATHEROGENIC INDEX(AIP)	<0.11	0.12 - 0.20	>0.21	

**Note:**

- 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.

Page 7 of 15



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

SIN No:SE04673533

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



Patient Name : Mrs KIMAYA NILESH BORATE  
Age/Gender : 35 Y 8 M 11 D/F  
UHID/MR No : SPUN 0000046964  
Visit ID : SPUNOPV62357  
Ref Doctor : Dr.SELF  
Emp/Auth/TPA ID : 89664

Collected : 23/Mar/2024 11:04AM  
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Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

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

- 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.
- 7) Triglycerides and HDL-cholesterol in Atherogenic index (AIP) reflect the balance between the atherogenic and protective lipoproteins. Clinical studies have shown that AIP (log (TG/HDL) & values used are in mmol/L) predicts cardiovascular risk and a useful measure of response to treatment (pharmacological intervention).



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

SIN No:SE04673533

This test has been performed at Apollo Health and Lifestyle Hub - Sadashiv Pedd Punt, Diagnostics Lab



Patient Name	Mrs.KIMAYA NILESH BORATE	Collected	23/Mar/2024 11:04AM
Age/Gender	35 Y 8 M 11 D/F	Received	11:09PM
UHID/MR No	SPUN 0000046964	Report	Final Report
Visit ID	SPUNOPV62357	Sponsor Name	ARCOFEMI HEALTHCARE LTD
Ref Doctor	Dr SELF		
Emp/Auth/TPA ID	89564		

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDI/ Y2324

Test Name	Result	Unit	Bi	Ref. Range	Method
<b>LIVER FUNCTION TEST (LFT) , SERUM</b>					
BILIRUBIN, TOTAL	0.41	mg/dL		0.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.08	mg/dL			DPD
BILIRUBIN (INDIRECT)	0.32	mg/dL			Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	13.75	U/L		<35	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	15.3	U/L		<35	IFCC
ALKALINE PHOSPHATASE	45.40	U/L		30-120	IFCC
PROTEIN, TOTAL	6.93	g/dL		6.6-8.3	Biuret
ALBUMIN	3.85	g/dL		3.5-5.2	BROMOCRESOL GREEN
GLOBULIN	3.08	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 excretion 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 usually 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.




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

SIN No: SE04673533

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

Patient Name : Mrs.KIMAYA NILESH BORATE  
 Age/Gender : 35 Y 8 M 11 D/F  
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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM</b>				
CREATININE	0.63	mg/dL	0.55-1.02	Modified Jaffe, Kinetic
UREA	14.71	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	6.9	mg/dL	8.0 - 23.0	Calculated
URIC ACID	4.80	mg/dL	2.6-6.0	Uricase PAP
CALCIUM	9.15	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	3.28	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	141.81	mmol/L	136-146	ISE (Indirect)
POTASSIUM	4.5	mmol/L	3.5-5.1	ISE (Indirect)
CHLORIDE	105.83	mmol/L	101-109	ISE (Indirect)
PROTEIN, TOTAL	6.93	g/dL	6.6-8.3	Buret
ALBUMIN	3.85	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.08	g/dL	2.0-3.5	Calculated
A/G RATIO	1.25		0.9-2.0	Calculated



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

SIN No: SE04673533

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





Patient Name : Mrs KIMAYA NILESH BORATE  
 Age/Gender : 35 Y 8 M 11 D/F  
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**DEPARTMENT OF BIOCHEMISTRY**

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

Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	14.41	U/L	<38	IFCC



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

SIN No: SE04673533

This test has been performed at Apollo Health and Lifestyle Lab - Madhav Reddy Park, Diagnostics Lab



Patient Name : Mrs KIMAYA NILESH BORATE  
 Age/Gender : 35 Y 8 M 11 D/F  
 UHID/MR No : SPUN.0000046964  
 Visit ID : SPUNOPV62357  
 Ref Doctor : Dr.SELF  
 Emp/Auth/TPA ID : 89554

Collected : 23/Mar/2024 11:04AM  
 Received : 23/Mar/2024 12:43PM  
 Reported : 23/Mar/2024 01:36PM  
 Status : Final Report  
 Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

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
<b>THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM</b>				
TRI-IODOTHYRONINE (T3, TOTAL)	0.83	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	9.98	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	1.430	µIU/mL	0.34-5.60	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



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

SIN No: SPL24054032

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



Patient Name : Mrs.KIMAYA NILESH BORATE  
 Age/Gender : 35 Y 6 M 11 D/F  
 UHID/MR No : SPUN.0000046964  
 Visit ID : SPUNOPV62357  
 Ref Doctor : Dr.SELF  
 Emp/Auth/TPA ID : 89564

Collected : 23/Mar/2024 11:04AM  
 Received : 23/Mar/2024 01:02PM  
 Reported : 23/Mar/2024 01:15PM  
 Status : Final Report  
 Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF CLINICAL PATHOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>COMPLETE URINE EXAMINATION (CUE) , URINE</b>				
<b>PHYSICAL EXAMINATION</b>				
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
<b>BIOCHEMICAL EXAMINATION</b>				
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	MODIFIED EHRlich REACTION
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	LEUCOCYTE ESTERASE
<b>CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY</b>				
PUS CELLS	2 - 3	/hpf	0-5	Microscopy
EPITHELIAL CELLS	1 - 2	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY



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

SIN No:UR2314704

This test has been performed at Apollo Health and Lifestyle Ltd - Subashya Pedd Pet, Diagnostics Lab



Patient Name : Mrs KIMAYA NILESH BORATE  
 Age/Gender : 35 Y 8 M 11 D/F  
 UHID/MR No : SPUN.0000046964  
 Visit ID : SPUNOPV62357  
 Ref Doctor : Dr SELF  
 Emp/Auth/TPA ID : 89564

Collected : 23/Mar/2024 02:03PM  
 Received : 23/Mar/2024 03:39PM  
 Reported : 23/Mar/2024 04:02PM  
 Status : Final Report  
 Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF CLINICAL PATHOLOGY

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

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

  
 Dr Sneha Shah  
 MBBS, MD (Pathology)  
 Consultant Pathologist  
 SIN No: UPP017337



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

Patient Name	: Mrs KIMAYA NILESH BORATE	Collected	: 23/Mar/2024 11:04AM
Age/Gender	: 35 Y 8 M 11 D/F	Received	: 23/Mar/2024 01:02PM
UHID/MR No	: SPUN.0000046964	Reported	: 23/Mar/2024 01:14PM
Visit ID	: SPUNOPV62357	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 89564		

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:  
LBC PAP TEST (PAPSURE)



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

SIN No: UF011408

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



# EYE REPORT



ASH/PUN/OPHTH/06/02-0216

Name: Mrs Kimaya Borate

Date: 23/03/24

Age / Sex: 35 y / F

Ref No.:

Complaint: No Complaints

**Examination**

NO DM

NO HTN

**Spectacle Rx**

Unaided Vision  
 R 6/6 NG  
 L 6/6 NG

	Right Eye				Left Eye			
	Vision	Sphere	Cyl.	Axis	Vision	Sphere	Cyl.	Axis
Distance	6/6	plano	—	—	6/6	plano	—	—
Read	—	—	—	NG	—	—	—	NG
	Sphere	CYL	Axis	Vision	Sphere	CYL	Axis	Vision

**Remarks:**

WNL

PGP  
 R  
 L

Medications: ∴ BE colour vision Normal.

Trade Name	Frequency	Duration

Follow up: 1 yr

Consultant:

**Apollo Spectra Hospitals**

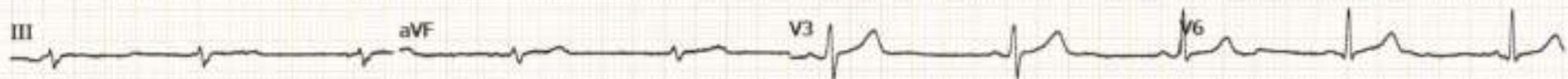
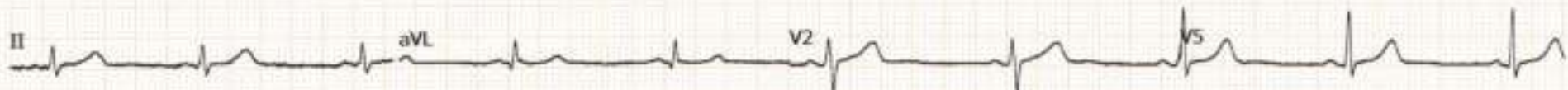
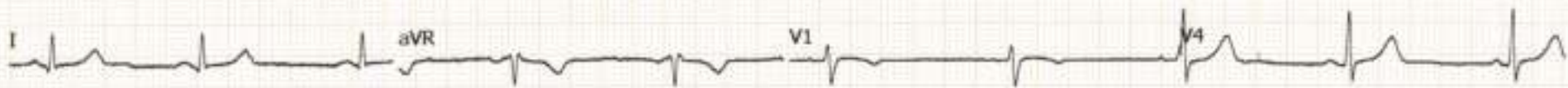
Opp. Sanas Sports Ground, Sanas Baug, Sadashiv Peth, Pune, Maharashtra- 411030  
 Ph : 020 67206500 | Fax: 020 67206523 | www.apollospectra.com

Female

Technician:  
Ordering Ph:  
Referring Ph:  
Attending Ph:

QRS : 92 ms  
QT / QTcBaz : 412 / 404 ms  
PR : 112 ms  
P : 94 ms  
RR / PP : 1042 / 1034 ms  
P / QRS / T : -3 / 5 / 28 degrees

Sinus bradycardia with sinus arrhythmia  
Otherwise normal ECG



Name	Mrs Kimaya Nilesh Borate	Age	35 Years
Patient ID	DD/233/2023-2024/1610	Gender	FEMALE
Ref By	Dr. Apollo Spectra Hospital	Date	23/03/2024

### USG ABDOMEN AND PELVIS.

**The liver** appears normal in size, shape and echotexture. No focal lesion is seen. The hepatic venous radicals and intrahepatic biliary tree appear normal. The portal vein and CBD appears normal.

**The gall bladder** is distended with a normal wall thickness and there are no calculi seen in it. No pericholecystic collection seen.

**The pancreas** appear normal in size and echotexture. No focal lesion seen.

**The spleen** appears normal in size and echotexture. No focal lesion seen.

**The right kidney** measures 10x5.0cms and **the left kidney** measures 11x5.0cms. Both kidneys appear normal in size, shape & echotexture. There is no hydronephrosis or calculus seen on either side.

**The urinary bladder** distends well and is normal in shape and contour. No intrinsic lesion or calculus is seen in it. The bladder wall is of normal thickness.


**The uterus** measures 8.7x4.7x3.8cms in size. The myometrium appears uniform in echotexture. The endometrium measures 7 mm

**Both ovaries** are normal in size, shape and echotexture. No adnexal mass is seen.

There is no free fluid or paraaortic lymphadenopathy seen. The aorta and IVC appear normal.

#### IMPRESSION:

**No significant abnormality is seen.**



Dr. Lalitkumar S Deore  
MD(Radiology) (2001/04/1671)



MRS.KIMAYA BORATE 35Y  
35 Years

MR No:  
Location:

SPUN.00049954  
Apollo Spectra Hospital, Puro  
(Swargate)

Gender: F  
Image Count: 1  
Arrival Time: 23-Mar-2024 11:55

Physician: SELF  
Date of Exam: 23-Mar-2024  
Date of Report: 23-Mar-2024 12:11

### X-RAY CHEST PA VIEW

#### FINDINGS

Normal heart and mediastinum.  
There is no focal pulmonary mass lesion is seen.  
No collapse or consolidation is evident.  
The apices, costo and cardiophrenic angles are free.  
No hilar or mediastinal lymphadenopathy is demonstrated.  
No destructive osseous pathology is evident.  
**IMPRESSION:** No significant abnormality is seen.



**Dr.Santhosh Kumar DMRD,DNB**  
Consultant Radiologist  
Reg.No: 59248

#### CONFIDENTIALITY:

This transmission is confidential. If you are not the intended recipient, please notify us immediately. Any disclosure, distribution or other action based on the contents of this report may be unlawful.

#### PLEASE NOTE:

This radiological report is the professional opinion of the reporting radiologist based on the interpretation of the images and information provided at the time of reporting. It is meant to be used in correlation with other relevant clinical findings.

**2D ECHO / COLOUR DOPPLER**

**Name : Mr. Kimaya Borate**  
**Ref by : HEALTH CHECKUP**

**Age : 35YRS / F**  
**Date : 23/03/2024**

LA – 32      AO – 26      IVS – 10      PW – 10  
LVIDD – 37      LVIDS - 25  
EF 60 %

Normal LV size and systolic function.  
No diastolic dysfunction  
Normal LV systolic function, LVEF 60 %  
No regional wall motion abnormality  
Normal sized other cardiac chambers.  
Mitral valve has thin leaflets with normal flow.  
Aortic valve has three thin leaflets with normal structure and function.No LVOT gradient  
Normal Tricuspid & pulmonary valves.  
No tricuspid regurgitation.  
PA pressures Normal  
Intact IAS and IVS.  
No clots, vegetations, pericardial effusion noted.

**IMPRESSION :**  
**NORMAL LV SYSTOLIC AND DIASTOLIC FUNCTION.**  
**NO RWMA. NO PULMONARY HTN**  
**NO CLOTS/VEGETATIONS**



**DR.SAMRAT SHAH**  
**MD, CONSULTANT PHYSICIAN**

## Apollo Clinic

### CONSENT FORM

Patient Name: Kimaya Borate Age: 35/F

UHID Number: ..... Company Name: .....

I Mr/Mrs/Ms ..... Employee of .....

(Company) Want to inform you that I am not interested in getting .....

Tests done which is a part of my routine health check package.

And I claim the above statement in my full consciousness.

Dental consultation  
will be done on 26/03/2024

Patient Signature: 

Date: 23/3/24

Appointment Id	Corporate Name	Name	Email id	Mobile	Agreen	Action
115966	ARCOFEMI HEALTHCARE LIMITED	Ajay Vijay Wadate	rupali.pagare@bankofbaroda.com	8605484770	ARCOFEMI MEDIWHEI	  
114664	BURCKHARDT COMPRESSION INDIA P.	Mr. Jitesh Singh	Mayura.Kodlikar@burckhardtcompression.com	9119839306	BURCKHARDT COMPRI	  
✓ 114413	ARCOFEMI HEALTHCARE LIMITED	KIMAYA BORATE	boratenillesh@yahoo.co.in	9822862605	ARCOFEMI MEDIWHEI	  
114412	ARCOFEMI HEALTHCARE LIMITED	MR. BORATE NILESH	boratenillesh@yahoo.co.in	9822862605	ARCOFEMI MEDIWHEI	  
111370	ACCENTURE SOLUTIONS PRIVATE LI	VISHAKA KOCHHAR	v.surendra.kochhar@accenture.com	09870433793	ACCENTURE SOLUTIK	  
110524	ACCENTURE SOLUTIONS PRIVATE LI	kaivalya Joshi	kaivalya.r.joshi@accenture.com	9403289563	ACCENTURE SOLUTIK	  
109465	CONNECT AND HEAL PRIMARY CARE	Bipin Bhaskar Sonale	reports@connectandheal.com	9075019350	CONNECT AND HEAL C	  


 भारत सरकार  
 Government of India


 किमया निलेश बोरटे  
 Kimaya Nilesh Borate  
 जन्म तारीख/DOB: 12/07/1988  
 लिंग/SEX: FEMALE

9431 5332 9256  
 UID: 9162 2997 6186 0504

आदर्श आधार, आदर्श ओळख


 भारतीय पहचान, आधिकारिक संस्थान  
 Unique Identification Authority of India

पत्ता  
 अनुराग, गणेश होमिंग सोसायटी, वाई, सतारा जिल्हा, टी.  
 सतारा  
 महाराष्ट्र - 412803

**Address:**  
 Anurag, Ganesh housing society, wai,  
 yashwanth nagar, Wai, Satara,  
 Maharashtra - 412803

9431 5332 9256  
 UID: 9162 2997 6186 0504

QR Code with Photo/Portrait

Patient Name : Mrs.KIMAYA NILESH BORATE	Collected : 23/Mar/2024 11:04AM
Age/Gender : 35 Y 8 M 11 D/F	Received : 23/Mar/2024 12:24PM
UHID/MR No : SPUN.0000046964	Reported : 23/Mar/2024 01:30PM
Visit ID : SPUNOPV62357	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 89564	

**DEPARTMENT OF HAEMATOLOGY**

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

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>HEMOGRAM , WHOLE BLOOD EDTA</b>				
<b>HAEMOGLOBIN</b>	13	g/dL	12-15	Spectrophotometer
PCV	39.50	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.49	Million/cu.mm	3.8-4.8	Electrical Impedance
MCV	88	fL	83-101	Calculated
MCH	29	pg	27-32	Calculated
MCHC	33	g/dL	31.5-34.5	Calculated
R.D.W	12.5	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	6,400	cells/cu.mm	4000-10000	Electrical Impedance
<b>DIFFERENTIAL LEUCOCYTIC COUNT (DLC)</b>				
NEUTROPHILS	55.4	%	40-80	Electrical Impedance
LYMPHOCYTES	34.7	%	20-40	Electrical Impedance
EOSINOPHILS	4.2	%	1-6	Electrical Impedance
MONOCYTES	5.7	%	2-10	Electrical Impedance
BASOPHILS	0	%	<1-2	Electrical Impedance
<b>ABSOLUTE LEUCOCYTE COUNT</b>				
NEUTROPHILS	3545.6	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2220.8	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	268.8	Cells/cu.mm	20-500	Calculated
MONOCYTES	364.8	Cells/cu.mm	200-1000	Calculated
Neutrophil lymphocyte ratio (NLR)	1.6		0.78- 3.53	Calculated
<b>PLATELET COUNT</b>	376000	cells/cu.mm	150000-410000	Electrical impedance
<b>ERYTHROCYTE SEDIMENTATION RATE (ESR)</b>	5	mm at the end of 1 hour	0-20	Modified Westergren
<b>PERIPHERAL SMEAR</b>				

**RBC's are Normocytic Normochromic**  
**WBC's are normal in number and morphology**  
**Platelets are Adequate**  
**No hemoparasite seen.**



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



SIN No: BED240080394

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

**Apollo Speciality Hospitals Private Limited**  
(Formerly known as Apollo Speciality Hospitals Private Limited)  
CIN- U85100TG2009PTC099414  
Regd Off: 1-10-62/62, 5th Floor, Ashoka Raghupathi Chambers,  
Begumpet, Hyderabad, Telangana - 500016

P.No.9 & 10a, S.No.2/64, Renata Chambers, Saras Baug Road,  
Vijayanagar Colony, Opp. Saras Play Ground, Sadashiv Peth,  
Pune, Maharashtra

Patient Name : Mrs.KIMAYA NILESH BORATE  
Age/Gender : 35 Y 8 M 11 D/F  
UHID/MR No : SPUN.0000046964  
Visit ID : SPUNOPV62357  
Ref Doctor : Dr.SELF  
Emp/Auth/TPA ID : 89564

Collected : 23/Mar/2024 11:04AM  
Received : 23/Mar/2024 12:24PM  
Reported : 23/Mar/2024 01:30PM  
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. Sanjay Ingle  
M.B.B.S, M.D(Pathology)  
Consultant Pathologist



SIN No: BED240080394

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

Patient Name : Mrs.KIMAYA NILESH BORATE	Collected : 23/Mar/2024 11:04AM
Age/Gender : 35 Y 8 M 11 D/F	Received : 23/Mar/2024 12:24PM
UHID/MR No : SPUN.0000046964	Reported : 23/Mar/2024 02:31PM
Visit ID : SPUNOPV62357	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 89564	

**DEPARTMENT OF HAEMATOLOGY**

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

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA</b>				
BLOOD GROUP TYPE	B			Microplate Hemagglutination
Rh TYPE	Positive			Microplate Hemagglutination



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



SIN No: BED240080394

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

**Apollo Speciality Hospitals Private Limited**  
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Begumpet, Hyderabad, Telangana - 500016

P.No.9 & 10a, S.NO.2/64, Renata Chambers, Saras Baug Road,  
Vijayanagar Colony, Opp. Saras Play Ground, Sadashiv Peth,  
Pune, Maharashtra



Patient Name : Mrs.KIMAYA NILESH BORATE	Collected : 23/Mar/2024 11:04AM
Age/Gender : 35 Y 8 M 11 D/F	Received : 23/Mar/2024 12:46PM
UHID/MR No : SPUN.0000046964	Reported : 23/Mar/2024 01:04PM
Visit ID : SPUNOPV62357	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 89564	

**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	92	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  $> \text{ or } = 126 \text{ mg/dL}$  and/or a random / 2 hr post glucose value of  $> \text{ or } = 200 \text{ mg/dL}$  on at least 2 occasions.
- Very high glucose levels ( $>450 \text{ mg/dL}$  in adults) may result in Diabetic Ketoacidosis & is considered critical.



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



SIN No: PLF02132306

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

**Apollo Speciality Hospitals Private Limited**  
(Formerly known as a Nova Speciality Hospitals Private Limited)  
CIN- U85100TG2009PTC099414  
Regd Off: 1-10-62/62, 5th Floor, Ashoka Raghupathi Chambers,  
Begumpet, Hyderabad, Telangana - 500016

P.No.9 & 10a, S.No.2/64, Renata Chambers, Saras Baug Road,  
Vijayanagar Colony, Opp. Saras Play Ground, Sadashiv Peth,  
Pune, Maharashtra

Patient Name : Mrs.KIMAYA NILESH BORATE	Collected : 23/Mar/2024 11:04AM
Age/Gender : 35 Y 8 M 11 D/F	Received : 23/Mar/2024 12:23PM
UHID/MR No : SPUN.0000046964	Reported : 23/Mar/2024 03:15PM
Visit ID : SPUNOPV62357	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 89564	

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)	89	mg/dL	70-140	HEXOKINASE

**Comment:**

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

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

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA</b>				
HBA1C, GLYCATED HEMOGLOBIN	5.5	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	111	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.

1. HbA1C is recommended by American Diabetes Association for Diagnosing Diabetes and monitoring Glycemic Control by American Diabetes Association guidelines 2023.

2. Trends in HbA1C values is a better indicator of Glycemic control than a single test.

3. Low HbA1C in Non-Diabetic patients are associated with Anemia (Iron Deficiency/Hemolytic), Liver Disorders, Chronic Kidney Disease. Clinical Correlation is advised in interpretation of low Values.



Dr Sneha Shah  
MBBS, MD (Pathology)  
Consultant Pathologist

SIN No:EDT240036966

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

**Apollo Speciality Hospitals Private Limited**  
(Formerly known as a Nova Speciality Hospitals Private Limited)  
CIN- U85100TG2009PTC099414  
Regd Off:1-10-62/62 ,5th Floor, Ashoka RaghupathiChambers,  
Begumpet, Hyderabad, Telangana - 500016

Address:  
P.No.9 & 10a, S.NO.2/64, Renata Chambers, Saras Baug Road,  
Vijayanagar Colony, Opp. Saras Play Ground, Sadashiv Peth,  
Pune, Maharashtra



Patient Name : Mrs.KIMAYA NILESH BORATE  
Age/Gender : 35 Y 8 M 11 D/F  
UHID/MR No : SPUN.0000046964  
Visit ID : SPUNOPV62357  
Ref Doctor : Dr.SELF  
Emp/Auth/TPA ID : 89564

Collected : 23/Mar/2024 11:04AM  
Received : 23/Mar/2024 12:23PM  
Reported : 23/Mar/2024 03:15PM  
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**

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

  
Dr Sneha Shah  
MBBS, MD (Pathology)  
Consultant Pathologist

SIN No:EDT240036966

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UHID/MR No : SPUN.0000046964	Reported : 23/Mar/2024 02:14PM
Visit ID : SPUNOPV62357	Status : Final Report
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**DEPARTMENT OF BIOCHEMISTRY**

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

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>LIPID PROFILE , SERUM</b>				
TOTAL CHOLESTEROL	190	mg/dL	<200	CHO-POD
TRIGLYCERIDES	85	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	<b>38</b>	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	<b>152</b>	mg/dL	<130	Calculated
LDL CHOLESTEROL	<b>134.98</b>	mg/dL	<100	Calculated
VLDL CHOLESTEROL	16.97	mg/dL	<30	Calculated
CHOL / HDL RATIO	4.96		0-4.97	Calculated
ATHEROGENIC INDEX (AIP)	< 0.01		<0.11	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
ATHEROGENIC INDEX(AIP)	<0.11	0.12 – 0.20	>0.21	

**Note:**

- 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.



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



SIN No:SE04673533

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**DEPARTMENT OF BIOCHEMISTRY**

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

- 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.
- 7) Triglycerides and HDL-cholesterol in Atherogenic index (AIP) reflect the balance between the atherogenic and protective lipoproteins. Clinical studies have shown that AIP (log (TG/HDL) & values used are in mmol/L) predicts cardiovascular risk and a useful measure of response to treatment (pharmacological intervention).



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



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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>LIVER FUNCTION TEST (LFT) , SERUM</b>				
BILIRUBIN, TOTAL	0.41	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.08	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.32	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	13.75	U/L	<35	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	15.3	U/L	<35	IFCC
ALKALINE PHOSPHATASE	45.40	U/L	30-120	IFCC
PROTEIN, TOTAL	6.93	g/dL	6.6-8.3	Biuret
ALBUMIN	3.85	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.08	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'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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**DEPARTMENT OF BIOCHEMISTRY**

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

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM</b>				
CREATININE	0.63	mg/dL	0.55-1.02	Modified Jaffe, Kinetic
UREA	<b>14.71</b>	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	<b>6.9</b>	mg/dL	8.0 - 23.0	Calculated
URIC ACID	4.80	mg/dL	2.6-6.0	Uricase PAP
CALCIUM	9.15	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	3.28	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	141.81	mmol/L	136-146	ISE (Indirect)
POTASSIUM	4.5	mmol/L	3.5-5.1	ISE (Indirect)
CHLORIDE	105.83	mmol/L	101-109	ISE (Indirect)
PROTEIN, TOTAL	6.93	g/dL	6.6-8.3	Biuret
ALBUMIN	3.85	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.08	g/dL	2.0-3.5	Calculated
A/G RATIO	1.25		0.9-2.0	Calculated



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**DEPARTMENT OF BIOCHEMISTRY**

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

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM</b>	14.41	U/L	<38	IFCC



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UHID/MR No : SPUN.0000046964	Reported : 23/Mar/2024 01:36PM
Visit ID : SPUNOPV62357	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 89564	

**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
<b>THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM</b>				
TRI-IODOTHYRONINE (T3, TOTAL)	0.83	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	9.98	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	1.430	µIU/mL	0.34-5.60	CLIA

**Comment:**

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

1. TSH is a glycoprotein hormone secreted by the anterior pituitary. TSH activates production of T3 (Triiodothyronine) and its prohormone T4 (Thyroxine). Increased blood level of T3 and T4 inhibit production of TSH.
2. TSH is elevated in primary hypothyroidism and will be low in primary hyperthyroidism. Elevated or low TSH in the context of normal free thyroxine is often referred to as sub-clinical hypo- or hyperthyroidism respectively.
3. Both T4 & T3 provides limited clinical information as both are highly bound to proteins in circulation and reflects mostly inactive hormone. Only a very small fraction of circulating hormone is free and biologically active.
4. Significant variations in TSH can occur with circadian rhythm, hormonal status, stress, sleep deprivation, medication & circulating antibodies.

TSH	T3	T4	FT4	Conditions
High	Low	Low	Low	Primary Hypothyroidism, Post Thyroidectomy, Chronic Autoimmune Thyroiditis
High	N	N	N	Subclinical Hypothyroidism, Autoimmune Thyroiditis, Insufficient Hormone Replacement Therapy.
N/Low	Low	Low	Low	Secondary and Tertiary Hypothyroidism
Low	High	High	High	Primary Hyperthyroidism, Goitre, Thyroiditis, Drug effects, Early Pregnancy
Low	N	N	N	Subclinical Hyperthyroidism
Low	Low	Low	Low	Central Hypothyroidism, Treatment with Hyperthyroidism
Low	N	High	High	Thyroiditis, Interfering Antibodies
N/Low	High	N	N	T3 Thyrotoxicosis, Non thyroidal causes
High	High	High	High	Pituitary Adenoma; TSHoma/Thyrotropinoma



DR. Sanjay Ingle  
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Consultant Pathologist



SIN No: SPL24054032

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

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**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
<b>COMPLETE URINE EXAMINATION (CUE) , URINE</b>				
<b>PHYSICAL EXAMINATION</b>				
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
<b>BIOCHEMICAL EXAMINATION</b>				
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	MODIFIED EHRlich REACTION
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	LEUCOCYTE ESTERASE
<b>CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY</b>				
PUS CELLS	2 - 3	/hpf	0-5	Microscopy
EPITHELIAL CELLS	1 - 2	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY



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



SIN No: UR2314704

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Patient Name : Mrs.KIMAYA NILESH BORATE	Collected : 23/Mar/2024 02:03PM
Age/Gender : 35 Y 8 M 11 D/F	Received : 23/Mar/2024 03:39PM
UHID/MR No : SPUN.0000046964	Reported : 23/Mar/2024 04:02PM
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**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



Dr Sneha Shah  
MBBS, MD (Pathology)  
Consultant Pathologist



SIN No:UPP017337

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**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:  
LBC PAP TEST (PAPSURE)



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



SIN No:UF011408

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