

: M/sPREETI KUMARI

Age/Gender

: 30 Y 10 M 4 D/F

UHID/MR No

: STAR.0000049275

Visit ID Ref Doctor : STAROPV57987

Emp/Auth/TPA ID

: Dr.SELF : 119802

Collected Received : 25/Mar/2023 09:30AM

: 25/Mar/2023 11:44AM

Reported

: 25/Mar/2023 02:50PM

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

PERIPHERAL SMEAR, WHOLE BLOOD-EDTA

Methodology: Microscopic

RBC : Normocytic normochromic

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

Platelets : Adequate in Number Parasites: No Haemoparasites seen

IMPRESSION: Normocytic normochromic blood picture

Note/Comment: Please Correlate clinically

Page 1 of 13





: M/sPREETI KUMARI

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Visit ID Ref Doctor : STAROPV57987 : Dr.SELF

Emp/Auth/TPA ID : 119802

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: 25/Mar/2023 09:30AM

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: 25/Mar/2023 11:44AM

Reported

: 25/Mar/2023 02:50PM

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		

HAEMOGLOBIN	11.4	g/dL	12-15	Spectrophotometer
PCV	35.50	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.05	Million/cu.mm	3.8-4.8	Electrical Impedence
MCV	88	fL	83-101	Calculated
MCH	28.2	pg	27-32	Calculated
MCHC	32.1	g/dL	31.5-34.5	Calculated
R.D.W	14.4	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	4,900	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (D	LC)			
NEUTROPHILS	49	%	40-80	Electrical Impedance
LYMPHOCYTES	44	%	20-40	Electrical Impedance
EOSINOPHILS	02	%	1-6	Electrical Impedance
MONOCYTES	05	%	2-10	Electrical Impedance
BASOPHILS	00	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	2401	Cells/cu.mm	2000-7000	Electrical Impedance
LYMPHOCYTES	2156	Cells/cu.mm	1000-3000	Electrical Impedance
EOSINOPHILS	98	Cells/cu.mm	20-500	Electrical Impedance
MONOCYTES	245	Cells/cu.mm	200-1000	Electrical Impedance
PLATELET COUNT	329000	cells/cu.mm	150000-410000	Electrical impedence
ERYTHROCYTE SEDIMENTATION RATE (ESR)	15	mm at the end of 1 hour	0-20	Modified Westergre

Methodology: Microscopic RBC: Normocytic normochromic

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

Platelets : Adequate in Number Parasites : No Haemoparasites seen

IMPRESSION: Normocytic normochromic blood picture

Note/Comment: Please Correlate clinically

Page 2 of 13



SIN No:BED230075733

Apollo Speciality Hospitals Private Limited

(Formely known as a Nova Speciality Hospitals Private Limited)
CIN- U85100TG2009PTC099414

Regd Off:1-10-62/62 ,5th Floor, Ashoka RaghupathiChambers, Begumpet, Hyderabad, Telangana - 500016



: M/sPREETI KUMARI

Age/Gender

: 30 Y 10 M 4 D/F

UHID/MR No

: STAR.0000049275

Visit ID Ref Doctor : STAROPV57987

Emp/Auth/TPA ID

: Dr.SELF : 119802

Test Name

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: 25/Mar/2023 09:30AM

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: 25/Mar/2023 11:44AM

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: 25/Mar/2023 02:48PM

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: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

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

BLOOD GROUP ABO AND RH FACT	FOR , WHOLE BLOOD-EDTA	
BLOOD GROUP TYPE	0	Forward & Reverse Grouping with Slide/Tube Aggluti
Rh TYPE	POSITIVE	Forward & Reverse Grouping with Slide/Tube Agglutination

Page 3 of 13



Regd Off: 1-10-62/62, 5th Floor, Ashoka RaghupathiChambers, Begumpet, Hyderabad, Telangana - 500016



: M/sPREETI KUMARI

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: 30 Y 10 M 4 D/F

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Visit ID Ref Doctor : STAROPV57987

Emp/Auth/TPA ID

: Dr.SELF : 119802 Collected

: 25/Mar/2023 09:30AM

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: 25/Mar/2023 11:46AM

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: 25/Mar/2023 11:47AM

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: 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, FASTING , NAF PLASMA	87	mg/dL	70-100	GOD - POD	
-------------------------------	----	-------	--------	-----------	--

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

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: Dr.SELF

Collected

: 25/Mar/2023 02:56PM

Received

: 25/Mar/2023 03:57PM

Reported

: 25/Mar/2023 05:11PM

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	84	mg/dL	70-140	GOD - POD
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 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

Page 5 of 13



Begumpet, Hyderabad, Telangana - 500016



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Reported

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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324						
ARCOPEMI - MEDIWHEEL - FULL BODT HEALTH ANNUAL FLOS CHECK - FEMALE - 2D ECHO - FAN INDIA - F12324						
Too! Nome	Decult	I Imit	Die Det Dense	Mathad		
Test Name	Result	Unit	Bio. Ref. Range	Method		

HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD-EDTA	5.4	%	HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD-EDTA	108	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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DEPARTMENT OF BIOCHEMISTRY

ARCOEEMI - MEDIWHEEL - EIILL RODY	/ HEALTH ANNUAL	DI LIS CHECK -	FEMALE - 2D ECHO - E	AN INDIA - EV2324		
AICOI LIVII - IVILDIVITILLE - I OLL BOD	ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324					
Test Name Result Unit Bio. Ref. Range Method						
1 oot Humo	Roount	0	Dioi iton italigo	motriou		

IPID PROFILE , SERUM				
TOTAL CHOLESTEROL	155	mg/dL	<200	CHE/CHO/POD
TRIGLYCERIDES	123	mg/dL	<150	
HDL CHOLESTEROL	47	mg/dL	>40	CHE/CHO/POD
NON-HDL CHOLESTEROL	108	mg/dL	<130	Calculated
LDL CHOLESTEROL	83.4	mg/dL	<100	Calculated
VLDL CHOLESTEROL	24.6	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.30	The state of the s	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
11 1 11	Optimal < 100 Near Optimal 100-129	130 - 159	160 - 189	≥ 190
HDL	≥ 60			
INON-HOLCHOLESTEROL	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





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: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY	HEALTH ANNUAL	PLUS CHECK -	FEMALE - 2D ECHO - F	PAN INDIA - FY2324
Test Name	Result	Unit	Bio. Ref. Range	Method

LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.20	mg/dL	0.1-1.2	Azobilirubin
BILIRUBIN CONJUGATED (DIRECT)	0.10	mg/dL	0.1-0.4	DIAZO DYE
BILIRUBIN (INDIRECT)	0.10	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	15	U/L	4-44	JSCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	15.0	U/L	8-38	JSCC
ALKALINE PHOSPHATASE	62.00	U/L	32-111	IFCC
PROTEIN, TOTAL	6.50	g/dL	6.7-8.3	BIURET
ALBUMIN	4.20	g/dL	3.8-5.0	BROMOCRESOL GREEN
GLOBULIN	2.30	g/dL	2.0-3.5	Calculated
A/G RATIO	1.83		0.9-2.0	Calculated

Page 8 of 13





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: 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

RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT), SERUM					
CREATININE	0.60	mg/dL	0.4-1.1	ENZYMATIC METHOD	
UREA	15.00	mg/dL	17-48	Urease	
BLOOD UREA NITROGEN	7.0	mg/dL	8.0 - 23.0	Calculated	
URIC ACID	4.90	mg/dL	4.0-7.0	URICASE	
CALCIUM	9.10	mg/dL	8.4-10.2	CPC	
PHOSPHORUS, INORGANIC	3.30	mg/dL	2.6-4.4	PNP-XOD	
SODIUM	138	mmol/L	135-145	Direct ISE	
POTASSIUM	4.4	mmol/L	3.5-5.1	Direct ISE	
CHLORIDE	101	mmol/L	98-107	Direct ISE	

Page 9 of 13



Regd Off:1-10-62/62 ,5th Floor, Ashoka RaghupathiChambers, Begumpet, Hyderabad, Telangana - 500016



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Status : Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY	Y HEALTH ANNUAL	PLUS CHECK -	FEMALE - 2D ECHO - F	PAN INDIA - FY2324
Test Name	Result	Unit	Bio. Ref. Range	Method

GAMMA GLUTAMYL TRANSPEPTIDASE	15.00	U/L	16-73	Glycylglycine Kinetic
(GGT), SERUM				method

Page 10 of 13



SIN No:SE04331130

Apollo Speciality Hospitals Private Limited

(Formely known as a Nova Speciality Hospitals Private Limited) CIN- U85100TG2009PTC099414

Regd Off: 1-10-62/62, 5th Floor, Ashoka RaghupathiChambers, Begumpet, Hyderabad, Telangana - 500016



: M/sPREETI KUMARI

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UHID/MR No

: STAR.0000049275

Visit ID Ref Doctor : STAROPV57987

Emp/Auth/TPA ID

: Dr.SELF : 119802

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: 25/Mar/2023 11:26AM

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: 25/Mar/2023 02:24PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY	Y HEALTH ANNUAL	PLUS CHECK -	FEMALE - 2D ECHO - F	PAN INDIA - FY2324
Test Name	Result	Unit	Bio. Ref. Range	Method

THYROID PROFILE (TOTAL T3, TOTAL T4, TSH), SERUM					
TRI-IODOTHYRONINE (T3, TOTAL)	0.87	ng/mL	0.67-1.81	ELFA	
THYROXINE (T4, TOTAL)	6.89	μg/dL	4.66-9.32	ELFA	
THYROID STIMULATING HORMONE (TSH)	2.310	μIU/mL	0.25-5.0	ELFA	

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:

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

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Visit ID Ref Doctor : STAROPV57987

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: Dr.SELF : 119802 Collected Received : 25/Mar/2023 09:30AM

: 27/Mar/2023 04:38PM

Reported

: 27/Mar/2023 04:42PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY	HEALTH ANNUAL	PLUS CHECK -	FEMALE - 2D ECHO - F	PAN INDIA - FY2324
Test Name	Result	Unit	Bio. Ref. Range	Method

COMPLETE URINE EXAMINATION ,	URINE			
PHYSICAL EXAMINATION				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	HAZY		CLEAR	Visual
рН	6.5		5-7.5	Bromothymol Blue
SP. GRAVITY	1.010		1.002-1.030	Dipstick
BIOCHEMICAL EXAMINATION				
URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE		NEGATIVE	GOD-POD
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	NITROPRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	EHRLICH
BLOOD	POSITIVE		NEGATIVE	Dipstick
NITRITE	NEGATIVE		NEGATIVE	Dipstick
LEUCOCYTE ESTERASE	POSITIVE		NEGATIVE	PYRROLE HYDROLYSIS
CENTRIFUGED SEDIMENT WET M	OUNT AND MICROSCOPY			
PUS CELLS	20-25	/hpf	0-5	Microscopy
EPITHELIAL CELLS	13-15	/hpf	<10	MICROSCOPY
RBC	3-5	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY
OTHERS	Few Bacteria seen.			MICROSCOPY

Page 12 of 13



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: M/sPREETI KUMARI

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Collected

: 27/Mar/2023 04:36PM

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: 28/Mar/2023 04:22PM

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: 29/Mar/2023 05:52PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF CYTOLOGY

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

BC PA	P TEST- PAPSURE , LBC FLUID	*
	CYTOLOGY NO.	6017/23
Ι	SPECIMEN	
a	SPECIMEN ADEQUACY	ADEQUATE
b	SPECIMEN TYPE	LIQUID-BASED PREPARATION (LBC)
	SPECIMEN NATURE/SOURCE	CERVICAL SMEAR
c	ENDOCERVICAL-TRANSFORMATION ZONE	PRESENT WITH ENDOCERVICAL CELLS
d	COMMENTS	SATISFACTORY FOR EVALUATION
II	MICROSCOPY	Superficial and intermediate squamous epithelial cells with benign morphology.
		Negative for intraepithelial lesion/malignancy.
Ш	RESULT	
a	EPITHEIAL CELL	
	SQUAMOUS CELL ABNORMALITIES	NOT SEEN
	GLANDULAR CELL ABNORMALITIES	NOT SEEN
b	ORGANISM	NIL
IV	INTERPRETATION	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

DR. APEKSHA MADAN MBBS, DPB PATHOLOGY

DR. K. RAMA KRISHNA REDDY M.B.B.S, M.D CONSULTANT PATHOLOGIST

*** End Of Report ***

Dr. Sandip Kumar Banerjee M.B.B.S, M.D(PATHOLOGY), D.P.B

Consultant Pathologist

Page 13 of 13

SIN No:CS061836

Apollo Speciality Hospitals Private Limited

Apollo Health & Lifestyle Ltd, Global Reference Laboratory, Hyderabad

(Formely known as a Nova Speciality Hospitals Private Limited)

CIN- U85100TG2009PTC099414

Regd Off:1-10-62/62,5th Floor, Ashoka RaghupathiChambers, Begumpet, Hyderabad, Telangana - 500016



APOLLO SPECTRA HOSPITALS

Famous Cine Lads, 156, Pt. M.M. Malviya Road, Tardeo, Mumbai- 400 034.Ph. No.: 022 4332 4500 www.apollospectra.com

Date: 25/3/23

Age: 30 F

Name: free Kuroali

Present Complaints:

No

Present Medications:

No

Personal History:

Diet: Veg/Mixed

Alcohol: No

Bowel:

Physical Activities:

Active/Moderate/Sedentary

Allergy: No Soorte Alky Past Medical History: No

Family History: No.

Physical Examination findings

Pulse: Homin

MUNIBA

No Pallor/icterus/cyanosis/clubbing/edema

RS:(W)

CVS:(2

P/Abdo:

CNS: W

Musculoskeletal: (w)

Investigations: Normal Reports

Advice:
fit for job.

Dr. Chhaya Vaja

Solars/30days

Physician & Cardiologist M. D. (MUM)

Unmarried/Married

Bladder: (w)

Sleep: Normal/Disturbed/Snoring

Tobacco: Chews/Smokes No

Menstrual History:

APOLLO SPECIALTY HOSPITALS PRIVATE LIMITED

(Formerly known as Nova Specialty Hospitals Private Limited) CIN: U85100KA2009PTC049961





: M/sPREETI KUMARI

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: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

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

PERIPHERAL SMEAR, WHOLE BLOOD-EDTA

Methodology: Microscopic RBC: Normocytic normochromic

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

Platelets : Adequate in Number Parasites : No Haemoparasites seen

IMPRESSION : Normocytic normochromic blood picture Note/Comment : Please Correlate clinically

Page 1 of 11







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Test Name	Result	Unit	Bio. Ref. Range	Method

HAEMOGLOBIN	11.4	g/dL	12-15	Spectrophotometer
PCV	35.50	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.05	Million/cu.mm	3.8-4.8	Electrical Impedence
MCV	88	fL	83-101	Calculated
MCH	28.2	pg	27-32	Calculated
MCHC	32.1	g/dL	31.5-34.5	Calculated
R.D.W	14.4	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	4,900	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (I	DLC)		=	
NEUTROPHILS	49	%	40-80	Electrical Impedance
LYMPHOCYTES	44	%	20-40	Electrical Impedance
EOSINOPHILS	02	%	1-6	Electrical Impedance
MONOCYTES	05	%	2-10	Electrical Impedance
BASOPHILS	00	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT		1		
NEUTROPHILS	2401	Cells/cu.mm	2000-7000	Electrical Impedance
LYMPHOCYTES	2156	Cells/cu.mm	1000-3000	Electrical Impedance
EOSINOPHILS	98	Cells/cu.mm	20-500	Electrical Impedance
MONOCYTES	245	Cells/cu.mm	200-1000	Electrical Impedance
PLATELET COUNT	329000	cells/cu.mm	150000-410000	Electrical impedence
ERYTHROCYTE SEDIMENTATION RATE (ESR)	15	mm at the end of 1 hour	0-20	Modified Westergren

Methodology: Microscopic RBC: Normocytic normochromic

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

Platelets: Adequate in Number Parasites: No Haemoparasites seen

IMPRESSION: Normocytic normochromic blood picture

Note/Comment: Please Correlate clinically

Page 2 of 11

SIN No:BED230075733





Method

○ U C IPàtient Name

: M/sPREETI KUMARI

Age/Gender

: 30 Y 10 M 4 D/F

UHID/MR No

: STAR.0000049275

Visit ID Ref Doctor : STAROPV57987

Emp/Auth/TPA ID

: Dr.SELF : 119802

Test Name

Collected

: 25/Mar/2023 09:30AM

Received

: 25/Mar/2023 11:44AM

Reported Status

: 25/Mar/2023 02:48PM

Sponsor Name

Unit

: Final Report : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HARMATOLOGY
DEPARTMENT OF HAEMATOLOGY
ADOCETII MEDINING
ARCOPEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - DAN INDIA - EV2224
ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324

Bio. Ref. Range

LOOD GROUP ABO AND RH FACT	OR , WHOLE BLOOD-EDTA	
BLOOD GROUP TYPE	0	Forward & Reverse Grouping with Slide/Tube Aggluti
Rh TYPE	POSITIVE	Forward & Reverse Grouping with Slide/Tube Agglutination

Result

Page 3 of 11

SIN No:BED230075733



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Patient Name

: M/sPREETI KUMARI

Age/Gender

: 30 Y 10 M 4 D/F

UHID/MR No Visit ID

: STAR.0000049275

Ref Doctor

: STAROPV57987

Emp/Auth/TPA ID

: Dr.SELF : 119802

Collected

: 25/Mar/2023 09:30AM

Received Reported

: 25/Mar/2023 11:46AM : 25/Mar/2023 11:47AM

Status

: Final Report

: ARCOFEMI HEALTHCARE LIMITED Sponsor Name

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

87

mg/dL

70-100

GOD - POD

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		

Page 4 of 11

SIN No:PLF01949686





: M/sPREETI KUMARI

Age/Gender

: 30 Y 10 M 4 D/F

UHID/MR No

: STAR.0000049275

Visit ID

: STAROPV57987

Ref Doctor Emp/Auth/TPA ID : Dr.SELF : 119802

Collected

: 25/Mar/2023 02:56PM

Received Reported

: 25/Mar/2023 03:57PM : 25/Mar/2023 05:11PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BOD	Y HEALTH ANNUAL	PLUS CHECK	- FEMALE - 2D ECHO - P	AN INDIA - FY2324
Test Name	Result	Unit	Bio. Ref. Range	Method

GLUCOSE, POST PRANDIAL (PP), 2 HOURS , NAF PLASMA	84	mg/dL	70-140	GOD - POD	
--	----	-------	--------	-----------	--

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

Page 5 of 11



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: M/sPREETI KUMARI

Age/Gender UHID/MR No

: 30 Y 10 M 4 D/F

Visit ID

: STAR.0000049275

Ref Doctor

: STAROPV57987 : Dr.SELF

Emp/Auth/TPA ID

: 119802

Collected

: 25/Mar/2023 09:30AM

Received

: 25/Mar/2023 04:06PM : 25/Mar/2023 05:35PM

Reported Status

: Final Report

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: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BOD	Y HEALTH ANNUAL	PLUS CHECK	- FEMALE - 2D ECHO - PA	AN INDIA - FY2324
Test Name	Result	Unit	Bio. Ref. Range	Method

HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD-EDTA	5.4	%	HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD-EDTA	108	mg/dL	Calculated

Comment:

Reference Range as per American Diabetes Association (ADA):

REFERENCE GROUP	HBA1C IN %
NON DIABETIC ADULTS > 18 YEARS	<u></u> ≤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

Page 6 of 11

SIN No:EDT230031138





: M/sPREETI KUMARI

Age/Gender UHID/MR No

: 30 Y 10 M 4 D/F

Visit ID

: STAR.0000049275 : STAROPV57987

Ref Doctor

: Dr.SELF

Emp/Auth/TPA ID

: 119802

Collected

: 25/Mar/2023 09:30AM

Received

: 25/Mar/2023 11:32AM

Reported Status

: 25/Mar/2023 04:14PM

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL B	ODY HEALTH ANNUAL	PLUS CHECK	- FEMALE - 2D ECHO - PA	AN INDIA - FY2324
Test Name	Result	Unit	Bio. Ref. Range	Method

TOTAL CHOLESTEROL	155	mg/dL	<200	CHE/CHO/POD
TRIGLYCERIDES	123	mg/dL	<150	GHE/GHO/I OB
HDL CHOLESTEROL	47	mg/dL	>40	CHE/CHO/POD
NON-HDL CHOLESTEROL	108	mg/dL	<130	Calculated
LDL CHOLESTEROL	83.4	mg/dL	<100	Calculated
VLDL CHOLESTEROL	24.6	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.30	LTV**	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 11



Apollo DIAGNOSTICS

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Patient Name

: M/sPREETI KUMARI

Age/Gender UHID/MR No : 30 Y 10 M 4 D/F

Visit ID

: STAR.0000049275

Ref Doctor

: STAROPV57987

Emp/Auth/TPA ID

: Dr.SELF : 119802 Collected

: 25/Mar/2023 09:30AM

Received Reported : 25/Mar/2023 11:32AM : 25/Mar/2023 04:32PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

١		The state of the s			
	ARCOFEMI - MEDIWHEEL - FULL BOD'	Y HEALTH ANNUAL	PLUS CHECK -	FEMALE - 2D ECHO - PA	AN INDIA - FY2324
	Test Name	Result	Unit	Bio. Ref. Range	Method

BILIRUBIN, TOTAL	0.20	mg/dL	0.1-1.2	Azobilirubin
BILIRUBIN CONJUGATED (DIRECT)	0.10	mg/dL	0.1-0.4	DIAZO DYE
BILIRUBIN (INDIRECT)	0.10	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	15	U/L	4-44	JSCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	15.0	U/L	8-38	JSCC
ALKALINE PHOSPHATASE	62.00	U/L	32-111	IFCC
PROTEIN, TOTAL	6.50	g/dL	6.7-8.3	BIURET
ALBUMIN	4.20	g/dL	3.8-5.0	BROMOCRESOL GREEN
GLOBULIN	2.30	g/dL	2.0-3.5	Calculated
A/G RATIO	1.83		0.9-2.0	Calculated

Page 8 of 11





Apollo
DIAGNOSTICS

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ouc ⊩Patient Name

: M/sPREETI KUMARI

Age/Gender UHID/MR No : 30 Y 10 M 4 D/F

Visit ID

: STAR.0000049275 : STAROPV57987

Ref Doctor

: Dr.SELF

Emp/Auth/TPA ID

: 119802

Collected

: 25/Mar/2023 09:30AM

Received Reported

: 25/Mar/2023 11:32AM : 25/Mar/2023 04:32PM

Status

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Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL B	ODY HEALTH ANNUAL	PLUS CHECK	- FEMALE - 2D ECHO - P	AN INDIA - FY2324
Test Name	Result	Unit	Bio. Ref. Range	Method

CREATININE	0.60	mg/dL	0.4-1.1	ENZYMATIC METHOD
UREA	15.00	mg/dL	17-48	Urease
BLOOD UREA NITROGEN	7.0	mg/dL	8.0 - 23.0	Calculated
URIC ACID	4.90	mg/dL	4.0-7.0	URICASE
CALCIUM	9.10	mg/dL	8.4-10.2	CPC
PHOSPHORUS, INORGANIC	3.30	mg/dL	2.6-4.4	PNP-XOD
SODIUM	138	mmol/L	135-145	Direct ISE
POTASSIUM	4.4	mmol/L	3.5-5.1	Direct ISE
CHLORIDE	101	mmol/L	98-107	Direct ISE

Page 9 of 11







: M/sPREETI KUMARI

Age/Gender UHID/MR No : 30 Y 10 M 4 D/F

: STAR.0000049275

Visit ID Ref Doctor : STAROPV57987 : Dr.SELF

Emp/Auth/TPA ID

: 119802

Collected

: 25/Mar/2023 09:30AM

Received Reported

: 25/Mar/2023 11:32AM : 25/Mar/2023 04:32PM

Status

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Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

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

- Tool Hame	Result	Ollic	Bio. Ref. Range	Method

GAMMA GLUTAMYL TRANSPEPTIDASE (GGT), SERUM	15.00	U/L	16-73	Glycylglycine Kinetic method
				IIIOUIOG

Page 10 of 11







: M/sPREETI KUMARI

Age/Gender

: 30 Y 10 M 4 D/F

UHID/MR No

: STAR.0000049275

Visit ID Ref Doctor

: STAROPV57987

Emp/Auth/TPA ID

: Dr.SELF : 119802

Collected

: 25/Mar/2023 09:30AM

Received

: 25/Mar/2023 11:26AM

Reported Status

: 25/Mar/2023 02:24PM

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FULL B	ODY HEALTH ANNUAL	PLUS CHECK	- FEMALE - 2D ECHO - PA	AN INDIA - FY2324
Test Name	Result	Unit	Bio. Ref. Range	Method

THYROID PROFILE (TOTAL T3, TOTAL T4,	TSH) , SERUM				
TRI-IODOTHYRONINE (T3, TOTAL)	0.87	ng/mL	0.67-1.81	ELFA	
THYROXINE (T4, TOTAL)	6.89	μg/dL	4.66-9.32	ELFA	
THYROID STIMULATING HORMONE (TSH)	2.310	μIU/mL	0.25-5.0	ELFA	

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:

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				

*** End Of Report ***

Result/s to Follow:

COMPLETE URINE EXAMINATION

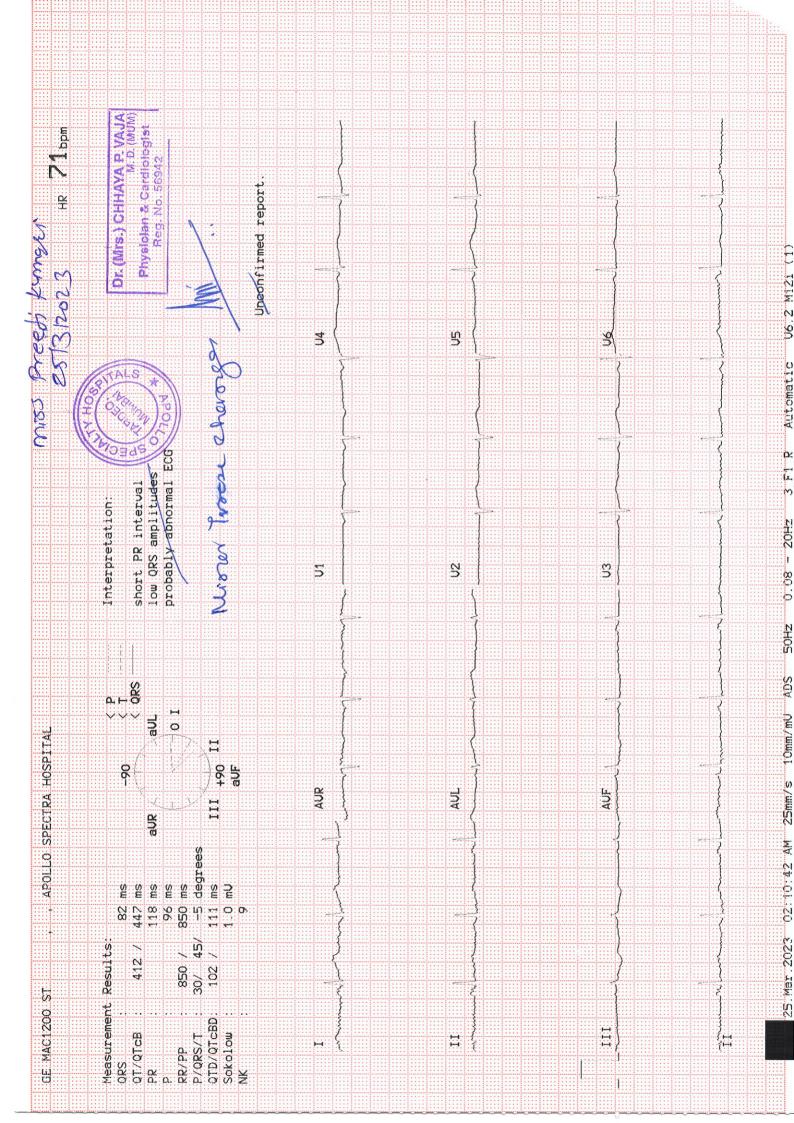
DR. APEKSHA MADAN MBBS, DPB PATHOLOGY

Dr. Sandip Kumar Banerjee M.B.B.S, M.D(PATHOLOGY), D.P.B

Consultant Pathologist

Page 11 of 11

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Reported on

Adm/Consult Doctor

UHID

APOLLO SPECTRA HOSPITALS

Famous Cine Labs, 156, Pt. M.M. Malviya Road, Tardeo, Mumbai- 400 034.Ph. No.: 022 4332 4500 www.apollospectra.com

: 30 Y F

OP Visit No

: STAROPV57987

Printed on

Age

: 25-03-2023 11:10

Ref Doctor

: SELF

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Both lung fields and hila are normal.

No obvious active pleuro-parenchymal lesion seen.

Both costophrenic and cardiophrenic angles are clear.

: M/s Preeti Kumari

: STAR.0000049275

: 25-03-2023 11:10

Both diaphragms are normal in position and contour.

Thoracic wall and soft tissues appear normal.

CONCLUSION:

No obvious abnormality seen.

Printed on:25-03-2023 11:10

---End of the Report---

Dr. VINOD SHETTYRadiology



APOLLO SPECTRA HOSPITALS

Famous Cine Labs, 156, Pt. M.M. Malviya Road, Tardeo, Mumbai- 400 034.Ph. No.: 022 4332 4500

www.apollospectra.com

Name : Ms.Preeti Kumari

Age : 30 Year(s)

Date: 25/03/2023

1

Sex : Female Visit Type : OPD

ECHO Cardiography

Comments:

Normal cardiac dimensions.

Structurally normal valves.

No evidence of LVH.

Intact IAS/IVS.

No evidence of regional wall motion abnormality.

Normal LV systolic function (LVEF 60%).

No diastolic dysfunction.

Normal RV systolic function.

No intracardiac clots / vegetation/ pericardial effusion.

No evidence of pulmonary hypertension.PASP=35mmHg.

11.

IVC 17mm collapsing with respiration.

Final Impression:

NORMAL 2DECHOCARDIOGRAPHY REPORT.

DR.CHHAYA P.VAJA. M. D.(MUM) NONINVASIVE CARDIOLOGIST

APOLLO SPECIALTY HOSPITALS PRIVATE LIMITED

(Formerly known as Nova Specialty Hospitals Private Limited) CIN: U85100KA2009PTC049961



Name

Age

APOLLO SPECTRA HOSPITALS

Famous Cine Labs, 156, Pt. M.M. Malviya Road, Tardeo, Mumbai- 400 034.Ph. No.: 022 4332 4500

www.apollospectra.com

Date

: 25/03/2023

Sex

: Female

Visit Type : OPD

Dimension:

: Ms.Preeti Kumari

: 30 Year(s)

EF Slope

110mm/sec

EPSS

04mm

LA

20mm

AO

25mm

LVID (d)

35mm

LVID(s)

20mm

IVS (d)

11mm

LVPW (d)

11mm

LVEF

60% (visual)

DR.CHHAYA P.VAJA. M. D.(MUM) NONINVASIVE CARDIOLOGIST

APOLLO SPECIALTY HOSPITALS PRIVATE LIMITED

(Formerly known as Nova Specialty Hospitals Private Limited) CIN: U85100KA2009PTC049961



Specialists in Surgery
Patient Name: MS. PREETI KUMARI
Ref. By: HEALTH CHECKUP

APOLLO SPECTRA HOSPITALS

Famous Cine Labs, 156, Pt. M.M. Malviya Road, Tardeo, Mumbai- 400 034.Ph. No.: 022 4332 4500 www.apollospectra.com

> Date: 25-03-2023 Age: 30 years

SONOGRAPHY OF ABDOMEN AND PELVIS

LIVER:

The liver is normal in size, shape & echotexture. No focal mass lesion is seen. The intrahepatic biliary tree & venous radicles appear normal. The portal vein and CBD appear normal.

GALL:

The gall bladder is normal in size with a normal wall thickness and there are no calculi seen in it.

BLADDER

PANCREAS: The pancreas is normal in size and echotexture. No focal mass lesion is seen.

SPLEEN:

The spleen is normal in size and echotexture without any focal mass lesion.

The splenic vein appears normal.

KIDNEYS:

The **RIGHT KIDNEY** measures 10.9 x 4.4 cms and the **LEFT KIDNEY** measures 11.0 x 4.2 cms in size. Both kidneys are normal in shape and echotexture. There is no evidence of hydronephrosis or calculi seen on either side.

The para-aortic & iliac fossa regions appear normal. There is no free fluid or any lymphadenopathy seen in the abdomen.

URINARY BLADDER: 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 normal in thickness.

UTERUS:

The uterus is anteverted & it appears normal in size, shape and echotexture.

It measures $7.6 \times 4.1 \times 3.5 \text{ cms}$.

Normal myometrial & endometrial echoes are seen.

Endometrial thickness is 9.4 mms.

No focal mass lesion is noted within the uterus.

OVARIES:

Both ovaries reveal normal size, shape and echopattern.

Right ovary measures 2.9 x 1.9 cms. Left ovary measures 2.7 x 2.1 cms There is no free fluid seen in cul de.

IMPRESSION: Normal Ultrasound examination of the Abdomen and Pelvis.

31

de i

Report with compliments.

DR.VINOD V.SHETTY

MD, D.M.R.D.

CONSULTANT SONOLOGIST.

APOLLO SPECIALTY HOSPITALS PRIVATE LIMITED

(Formerly known as Nova Specialty Hospitals Private Limited)
CIN: U85100KA2009PTC049961

Registered Office: #7-1-617/A,615 & 616, Imperial Towers,7th Floor, Opp. Ameerpet Metro Station, Ameerpet, Hyderabad, Telangana, Pin-500038.



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Mrs Preeti Kuman

304rs

25/03/23

No gyrnaec Complaints Pt was on Pronis H

Hlo PCOD.

MIH - 5-6d - Reg 30d - Mod

LMP-22/03/23

Pl4 - (1) Breast Ca in 15 yrs ago.

PlH- Mother- Breast Ca.

Pt in periods use hot done.

- Sono mamography i/v/o



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Name: Pretti Kumar Age: 30/F

for ENT Health Check up Offers no complaints

O/E- B/LTM intact, mobile
Nax > removed

Nose - SPA Septim central
Septim central
Airblast Ignel both sides

Throat - NAD

D-ENT-NAD

MAJ. (DR.) SHRUTI SKILL SHARIFA M.S. (ENT) PGD CHALL FO DAILS MMC. 2019096177

(Formerly known as Nova Specialty Hospitals Private Limited) CIN: U85100KA2009PTC049961

EYE REPORT

	M c/	Kreeron.
Name:	Poredi	Nules

28/03/2023 Date:

Age /Sex:	30 year LF
Age / Sex:	1800

Ref No.:

_		
Com	niain	
00111		

Examination

Ao occiden alo
Nos M/v SS/NA
Un < 6/6P

Near lu X No

Spectacle Rx

		Righ	t Eye					
	Vision	Sphere	Cyl.	Axis	Vision	Sphere	Cyl.	Axis
Distance			·					
Read			v	2				

Re	m	a	rk	(8"

Down luf wn As Kw

Medications:

Trade Name	Frequency	Duration
-		
		-

Follow up:

Render &

Consultant:

Apollo Spectra Hospitals

Famous Cine Labs, 156, Pt. M. M. Malviya Road, Tardeo, Mumbai - 400 034. Tel.: 022 4332 4500 · www.apollospectra.com





VEGETABLE EXCHANGE LIST:

A	В	C
Low Kcal(Consume Liberally)	40 kcal (Less amts)	100 kcal (Restrict)
All Dark green leafy vegetables	Carrot, Onion, Beetroot	Potato, Raw banana
All Gourd Vegetables like Dudhi, turi,	Gawar	Sweet potato
Padwal, White Pumpkin etc,	Papdi	Yam
Other veg's: Bhindi, Karela, French	Jackfruit (raw)	Tapioca
beans, Cauliflower, zucchini, capcicum, Tomato, Cucumber, tindli, kantolaetc	Mushroom	Colocasia
	Green Plantain	Sabudana

FRUIT SERVING SIZE:

Fruits allowed	Serving	Fruits restricted	Serving
Amla	4-5 no.	Grapes	10-12no.
Jambu	10 no.	Banana (small), Chickoo	l no.
Apple, Guava, Sweet lime, Orange, Pear, Peach, Kiwi	1 no.	Mango	2 slice
Plum	2 no.	Litchi, Jackfruit	3-4 no.
Pomegranate	½ no.	Seetaphal	½ no.
Watermelon, Musk melon	1 thin boat slice	Fruit Juice	NO
Pineapple, Papaya	2 thin boat slice	Sugarcane Juice	NO
Raspberries, Strawberries	150gm	Coconut water	NO
Fresh Figs	1 big/ 2 small		

Ms.JINAL PATEL

Msc In clinical nutrition and dietetics

Sr.Executive dietitian

E: 9jinalpatel@gmail.com; diet.trd@apollospectra.com

Cont: 9920698105,022-4332 4525



Presti

Date: 27/3/2022

h 19001-

k 2001-

della consult.

Dr. Rinal Modi 8.D.S. (Mumbai) Dental Surgeon Reg. No. : A-28591

Email: doctorrinal@gmail.com M: 8779256365 / 9892290876

Alliance Dental Care Limited

GSTIN: 36AAECA1118N1ZR

Corporate & Regd. Office: #7-1-617/A, 615 & 616, Imperial Towers, 7th Floor, Opp to: Ameerpet Metro Station, Ameerpet, Hyderabad 500038, Telangana.

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Preeds Kumas

ID

Age 30 Height

Gender

155cm

Female

Date

25. 3. 2023

10:08:53 Time

APOLLO SPECTRA HOSPITAL

5.9kg

Normal

Rp-100180mmfts

Lean Mass

6. 1 kg

Normal

Body Composition

	Unde		1	lorm	al			Ove	: r		UNIT:%	Normal Range
40	55	70	85	100	115	130	145 68.	160 1 kg	175	190	205	42. 9 ~ 58. 0
60	70	80	90	100	110 22.	120 1 kg	130	140	150	160	170	19. 0 ~ 23. 2
20	40	60	80	100	160	220	280	³⁴⁰ 27.	7 kg	460	520	10. 1 ~ 16. 1
29.	9 kg (25. 7	~ 3]	. 4)						40). 7 kg	(32. 8~41. 9)
7.	9 kg (6. 9 <i>-</i>	~ 8. 4	1)		Mii	nera	ı !*		2.	87 kg	(2. 38~2. 91)
	29.	40 55 60 70 20 40 29. 9 kg (60 70 80 20 40 60 29. 9 kg (25. 7	40 55 70 85 60 70 80 90 20 40 60 80 29. 9 kg (25. 7~31	60 70 80 90 100	40 55 70 85 100 115 60 70 80 90 100 110 22. 20 40 60 80 100 160 29. 9 kg (25. 7~31. 4)	40 55 70 85 100 115 130 60 70 80 90 100 110 120 22. 1 kg 20 40 60 80 100 160 220 29. 9 kg (25. 7~31. 4)	40 55 70 85 100 115 130 145 68. 4 60 70 80 90 100 110 120 130 22. 1 kg 20 40 60 80 100 160 220 280 29. 9 kg (25. 7~31. 4) F.F.M. Fat Free Mass	40 55 70 85 100 115 130 145 160 68. 4 kg 60 70 80 90 100 110 120 130 140 22. 1 kg 20 40 60 80 100 160 220 280 340 27. 29. 9 kg (25. 7~31. 4) Fat Free Mass	40 55 70 85 100 115 130 145 160 175 68. 4 kg 60 70 80 90 100 110 120 130 140 150 22. 1 kg 20 40 60 80 100 160 220 280 340 400 27. 7 kg 29. 9 kg (25. 7~31. 4) Fat Free Mass	40 55 70 85 100 115 130 145 160 175 190 68.4 kg 60 70 80 90 100 110 120 130 140 150 160 22.1 kg 20 40 60 80 100 160 220 280 340 400 460 27.7 kg 29.9 kg (25.7~31.4) F.F.M. Fat Free Mass 40 40 40 40 40 40 40	40 55 70 85 100 115 130 145 160 175 190 205 60 70 80 90 100 110 120 130 140 150 160 170 22 1 kg 20 40 60 80 100 160 220 280 340 400 460 520 27 7 kg 29 9 kg (25 7 ~ 31 4) Fat Free Mass 40 7 kg

* Mineral is estimated.

Segmental Lean Evaluation 2.0kg 2. 1kg Normal Normal Trunk 18. 4kg Left Normal

Segmen	ntal Fat	PBF Fat Mass Evaluation	
49. 7%		48, 3%	
2. 1 kg		2. 1 kg	
Over	Trunk 41. 6%	Over	70
# F	13. 9kg		g
	Over		_
39, 7%		39. 2%	
4. 1 kg		4, 2kg	
Over		Over	

* Segmantal Fat is estimated.

Obesity Diagnosis

Obesity D	iagnos	IS	Nutritional Evaluation			
		Value	Normal Range	Protein Mormal	□ Deficient	
DAAI				Mineral ⊠Normal	☐ Deficient	
B M I Body Mass Index	(kg/m²)	28. 5	18. $5 \sim 25.0$	Fat □ Normal	□ Deficient	▼ Excessive
				Weight Management	t	
PBF .	(%)	40. 4	18.0~28.0	Weight □ Normal	□ Under	☑ Over
Percent Body Fat		10. 1		SMM ☑Normal	□ Under	☐ Strong
WILD.				Fat □ Normal	□ Under	☑ Over
WHR Waist-Hip Ratio		0.90	$0.75 \sim 0.85$ Obesity Diagnosis			
				B M I □ Normal	☐ Under ☐ Extremely	 Over ∕ Over
BMR Basal Metabolic Rate	(kcal)	1250	1394 ~ 1621	PBF □Normal	☐ Under	☑ Over
				WHR □Normal	□ Under	✓ Over

Muscle-Fat Control

Muscle Control	0. 0 kg	Fat Control	- 15.5	kg Fitness Score	66
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Impedance

LA TR 20kHz 347. 2 356. 9 24. 9 240. 3 253. 3 100kHz 315. 3 328. 1 21. 8 216. 9 228. 1

Exercise Planner Plan your weekly exercises from the followings and estimate your weight loss from those activities.

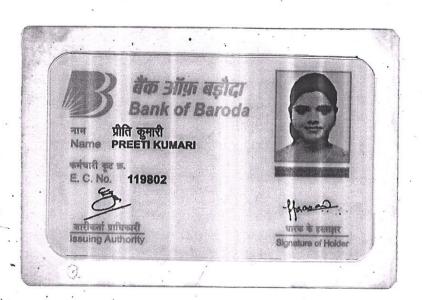
Energy	expendi	ture of e	ach activ	ity(base	weight:	68. 4 kg	/ Durati	on: 30m	in./ unit:	kcal)	
Å	Walking	130	Jogging		Bicycle		Swim	2	Mountain Climbing	2/	Aerobic
A	137	P	239	CO	205	2	239	4	223	7	239
1 Cio	Table tennis	4:	Tennis	-3·	Football	•	Oriental Fencing	d'	Gate ball	4	Badminton
V	155	八。	205	1.	239	人	342	1.7	130	A	155
2	Racket ball	2	Tae- kwon-do	. 3	Squash	2 Pir	Basketball	(2)	Rope jumping	1	Golf
A	342		342	97	342	X	205	N	239		120
1	Push-ups development of upper body	2	Sit-ups abdominal muscle training	9	Weight training backache prevention	K	Dumbbell exercise muscle strength	_	Elastic band muscle strength	١١	Squats maintenance of lower body muscle

How to do

- 1. Choose practicable and preferable activities from the left.
- 2. Choose exercises that you are going to do for 7 days.
- 3. Calculate the total energy expenditure for a week.
- 4. Estimate expected total weight loss for a month using the formula shown below.
- Recommended calorie intake per day

kcal

^{*} Use your results as reference when consulting with your physician or fitness trainer.





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 MS. KUMARI PREETI				
NAME					
EC NO.	119802				
DESIGNATION	JOINT MANAGER				
PLACE OF WORK	MUMBAI,LALBAUG				
BIRTHDATE	21-05-1992				
PROPOSED DATE OF HEALTH CHECKUP	25-03-2023				
BOOKING REFERENCE NO.	22M119802100049154E				

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 15-03-2023 till 31-03-2023 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 (Arcofemi Healthcare Limited))



SUGGESTIVE LIST OF MEDICAL TESTS

FOR MALE	FOR FEMALE					
CBC	CBC					
ESR	ESR					
Blood Group & RH Factor	Blood Group & RH Factor					
Blood and Urine Sugar Fasting	Blood and Urine Sugar Fasting					
Blood and Urine Sugar PP	Blood and Urine Sugar PP					
Stool Routine	Stool Routine					
Lipid Profile	Lipid Profile					
Total Cholesterol	Total Cholesterol					
HDL	HDL					
LDL	LDL					
VLDL	VLDL					
Triglycerides	Triglycerides					
HDL / LDL ratio	HDL / LDL ratio					
Liver Profile	Liver Profile					
AST	AST					
ALT	ALT					
GGT	GGT					
Bilirubin (total, direct, indirect)	Bilirubin (total, direct, indirect)					
ALP	ALP					
Proteins (T, Albumin, Globulin)	Proteins (T, Albumin, Globulin)					
Kidney Profile	Kidney Profile					
Serum creatinine	Serum creatinine					
Blood Urea Nitrogen	Blood Urea Nitrogen					
Uric Acid	Uric Acid					
HBA1C	HBA1C					
Routine urine analysis	Routine urine analysis					
USG Whole Abdomen	USG Whole Abdomen					
General Tests	General Tests					
X Ray Chest	X Ray Chest					
ECG	ECG ECG					
2D/3D ECHO / TMT	2D/3D ECHO / TMT					
Stress Test	Thyroid Profile (T3, T4, TSH)					
PSA Male (above 40 years)	Mammography (above 40 years)					
Territale (above to years)	and Pap Smear (above 30 years).					
Thyroid Profile (T3, T4, TSH)	Dental Check-up consultation					
Dental Check-up consultation	Physician Consultation					
Physician Consultation	Eye Check-up consultation					
Eye Check-up consultation	Skin/ENT consultation					
Skin/ENT consultation	Gynaec Consultation					
Jilli/LIVI Obligation						



Patient Name : 30 Y/F : M/s Preeti Kumari Age/Gender

OP Visit No UHID/MR No. : STAR.0000049275 : STAROPV57987 Sample Collected on : 25-03-2023 15:32 Reported on

LRN# : RAD1959001 **Specimen**

Ref Doctor : SELF Emp/Auth/TPA ID : 119802

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

LIVER: The liver is normal in size, shape & echotexture. No focal mass lesion is seen. The

intrahepatic biliary tree & venous radicles appear normal. The portal vein and CBD

appear normal.

GALL: The gall bladder is normal in size with a normal wall thickness and there are no **BLADDER** calculi seen in it.

PANCREAS: The pancreas is normal in size and echotexture. No focal mass lesion is seen.

The spleen is normal in size and echotexture without any focal mass lesion. SPLEEN:

The splenic vein appears normal.

KIDNEYS: The RIGHT KIDNEY measures 10.9 x 4.4 cms and the LEFT KIDNEY measures

11.0 x 4.2 cms in size. Both kidneys are normal in shape and echotexture. There is

no evidence of hydronephrosis or calculi seen on either side.

The para-aortic & iliac fossa regions appear normal. There is no free fluid or any

lymphadenopathy seen in the abdomen.

The urinary bladder distends well and is normal in **URINARY** shape and contour No intrinsic

lesion or calculus is seen in it. The bladder wall is normal in thickness. **BLADDER:**

UTERUS: The uterus is anteverted & it appears normal in size, shape and echotexture.

It measures 7.6 x 4.1 x 3.5 cms.

Normal myometrial & endometrial echoes are seen.

Endometrial thickness is 9.4 mms.

No focal mass lesion is noted within the uterus.

OVARIES: Both ovaries reveal normal size, shape and echopattern.

> Right ovary measures 2.9 x 1.9 cms. Left ovary measures 2.7 x 2.1 cms

There is no free fluid seen in cul de.

Normal Ultrasound examination of the Abdomen and Pelvis.



Patient Name : M/s Preeti Kumari Age/Gender : 30 Y/F

Dr. VINOD SHETTY

Radiology



Patient Name : M/s Preeti Kumari Age/Gender : 30 Y/F

UHID/MR No. : STAR.0000049275 **OP Visit No** : STAROPV57987 Sample Collected on : 25-03-2023 11:10 Reported on

LRN# : RAD1959001 Specimen

Ref Doctor : SELF Emp/Auth/TPA ID : 119802

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Both lung fields and hila are normal.

No obvious active pleuro-parenchymal lesion seen.

Both costophrenic and cardiophrenic angles are clear.

Both diaphragms are normal in position and contour.

Thoracic wall and soft tissues appear normal.

CONCLUSION:

No obvious abnormality seen.

Dr. VINOD SHETTY

Radiology