

Fw: Reminder your health checkup booking is tomorrow

Gunupuru Sivasankar <GUNUPURU.SIVASANKAR@bankofbaroda.com>

Sat 27-01-2024 09:07

To: Siva Sankar <siva.gs.sankar@gmail.com>

Dear Sir/Madam

Needful is done.

Thanks and Regards,

Siva

DC OPS

From: Mediwheel <wellness@mediwheel.in>

Sent: 27 January 2024 04:16

To: Gunupuru Sivasankar <GUNUPURU.SIVASANKAR@bankofbaroda.com>

Cc: customercare@mediwheel.in <customercare@mediwheel.in>

Subject: Reminder your health checkup booking is tomorrow

You don't often get email from wellness@mediwheel.in. [Learn why this is important](#)

****सावधान:** यह मेल बैंक डोमेन के बाहर से आया है. अगर आप प्रेषक को नहीं जानते तो मेल में दी गर्य
****CAUTION:** THIS MAIL IS ORIGINATED FROM OUTSIDE OF THE BANK'S DOMAIN. DO N

Dear **MR. SIVASANKAR GUNUPURU,**

This is a gentle reminder that your health checkup is scheduled for tomorrow as per the below particular. Please visit the center at any time.

Please follow the following instructions. Please call us at 011-41195959 if you face any issues.

Booking Date : 23/01/2024

Health Check up Name: Mediwheel Full Body Health Annual Plus Check

Health Check Code : PKG10000377

Name of Diagnostic/Hospital : Apollo Clinic - Manikonda Hyderabad

Address of Diagnostic/Hospital- : D.No " 8-1-284/OU/439 & 440, O.U Colony, Shaikpet, Manikonda
: Road. Opp: Telangana Grameena Bank, Near Bheemas Hotel,
Manikonda - 500008

Appointment Date : 27/01/2024

Preferred Time : 9:00am

Package Name : Mediwheel Full Body Health Annual Plus Check

Tests included in this Package

- Bmi Check
- Pap Smear
- Ent Consultation
- Dietician Consultation
- Gynae Consultation
- Thyroid Profile
- ESR
- Blood Glucose (Fasting)
- General Physician Consultation
- TMT OR 2D ECHO
- Blood Glucose (Post Prandial)
- Chest X-ray
- ECG
- USG Whole Abdomen
- Eye Check-up consultation
- Urine Sugar Fasting
- Urine Sugar PP
- Dental Consultation
- Gynac Consultation
- Urine analysis
- CBC
- HbA1c
- Lipid Profile
- Kidney Profile
- Liver profile

Thanks,
Mediwheel Team

You have received this mail because your e-mail ID is registered with This is a system-generated e-mail **Arcofemi Healthcare Limited**, please don't reply to this message.


Please visit to our [Terms & Conditions](#) for more informaion. This email is recieved because you are register with us [Click here to unsubscribe](#).




बैंक ऑफ़ बड़ौदा
Bank of Baroda



नाम गुणपुरु सिवशंकर
Name Gunupuru Sivasankar
कर्मचारी कूट क्र.
E.C. No 118792


जारीकर्ता प्राधिकारी
Issuing Authority


धारक के हस्ताक्षर
Signature of Holder

The Apollo Clinic- Manikonda
PHYSICAL EXAMINATION FORM

DATE 27/1/24

UHID

Name Mrs. Gnaneshwari G Age 34 y/.

Height Cms

Weight Kgs

Chest Measurement (In) Cm (Out) Cm

Waist Cm Hip

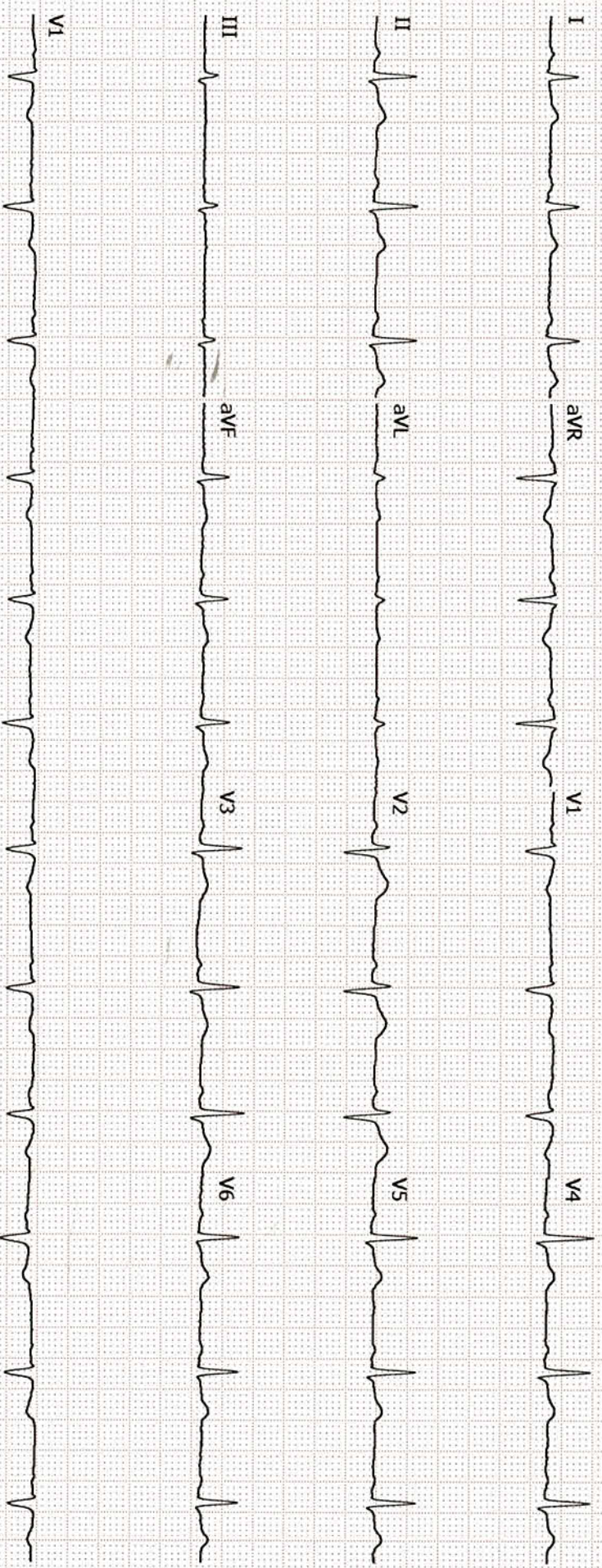
Pulse Bt + Min BMI

BP mm/Hg SPO2

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:

QRS : 90 ms
QT / QTcBaz : 390 / 427 ms
PR : 152 ms
P : 100 ms
RR / PP : 836 / 833 ms
P / QRS / T : 32 / 42 / 33 degrees
Normal sinus rhythm
Normal ECG

QML
[Signature]



CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

of Mrs. Gnaneswari Gynupuru on 29/01/24

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

	Tick
<ul style="list-style-type: none"> • Medically Fit 	<input checked="" type="checkbox"/>
<ul style="list-style-type: none"> • Fit with restrictions/recommendations <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"> • Currently Unfit. Review after _____ recommended 	
<ul style="list-style-type: none"> • Unfit 	

Dr. _____
 Medical Officer
 The Apollo _____ (Location)



This certificate is not meant for medico-legal purposes

Name <u>MRS. gnaneswari</u>	Date <u>2-7-11</u>
Age <u>34</u>	UHID No. <u>Cman 95174</u>
<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female	Ref. Physician
Ref. Diagnosis	

N.

DR. TRIPTI - DEB.

Echocardiogram Report

Echogenicity Poor Adequate Good

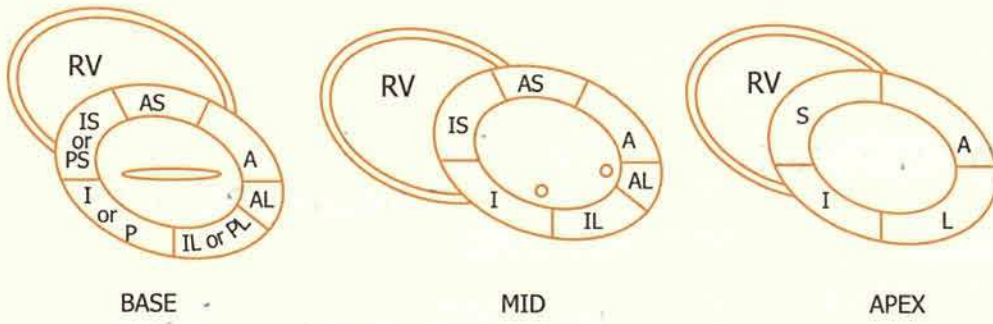
Ht. _____ Wt. _____ BSA _____

DIMENSIONS		NORMAL		DIMENSIONS		NORMAL	
Ao (ed)	<u>3.00</u> cm	(1.5cm / m2)		IVS (Ed)	<u>0.93</u> cm	(0.6 - 1.2 cm)	
LA (es)	<u>3.00</u> cm	(1.5cm / m2)		LVPW (Ed)	<u>1.03</u> cm	(0.6 - 1.1 cm)	
RVID (ed)	<u>2.4</u> cm	(0.9 cm / m2)		EF	<u>64</u> %	(0.62 - 0.85)	
LVID (ed)	<u>3.54</u> cm	(2.6 - 3.4 cm / m2)		% FD	<u>34</u> %	(2.8% - 42%)	
LVID (es)	<u>2.31</u>						

MORPHOLOGICAL DATA

Mitral Valve	AML <u>N</u>	Interatrial septum <u>Intact</u>
	PML <u>N</u>	Interventricular septum <u> </u>
Aortic Valve	<u>N</u>	Pulmonary artery <u>N</u>
Tricuspid valve	<u>N</u>	Aorta <u>N</u>
Pulmonary valve	<u>N</u>	Right atrium <u>N</u>
Right ventricle	<u>N</u>	Left atrium <u>N</u>

Left ventricle : LV WALL MOTION ANALYSIS



1. Normal
2. Hypokinesia
3. Akinesia
4. Dyskinesia
5. Aneurysmal

Pericardium

N.

Doppler studies

pJV 0.63
 A JV = 0.67
 A2 0.38
 E = 0.68

} Normal colour
 Doppler

Normal Diastolic
 Compliance

Impression

Normal Echo Study

Done by

Checked by

Signature
 Consultant - Cardiology

The Apollo Clinic- Manikonda
PHYSICAL EXAMINATION FORM

DATE 27/1/24

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Name Mrs. Gnaneshwari G Age 34 Y /

Height Cms

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Waist Cm Hip

Pulse Bt + Min BMI

BP mm/Hg SPO2

34 Years
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Technician:
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Attending Ph:

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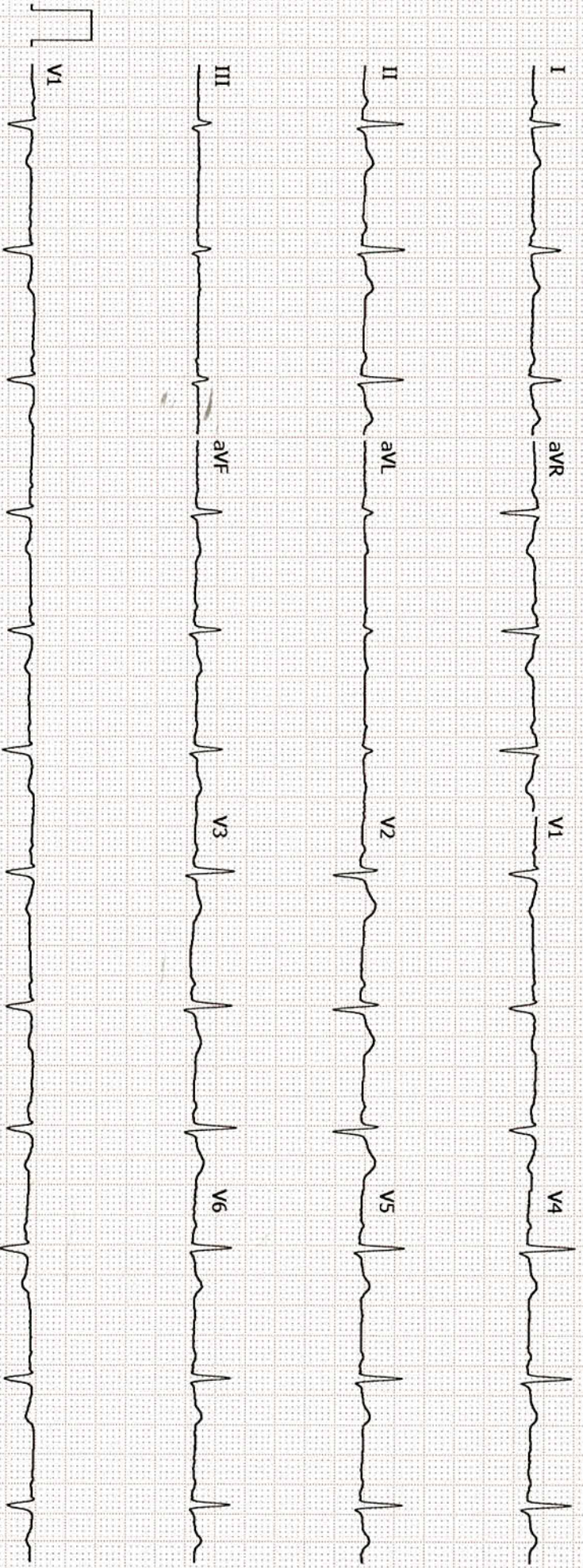
Normal sinus rhythm
Normal ECG

Location:
Order Number:
Visit:
Indication:
Medication 1:
Medication 2:
Medication 3:

Room:

72 bpm
--- / --- mmHg

QML
[Signature]



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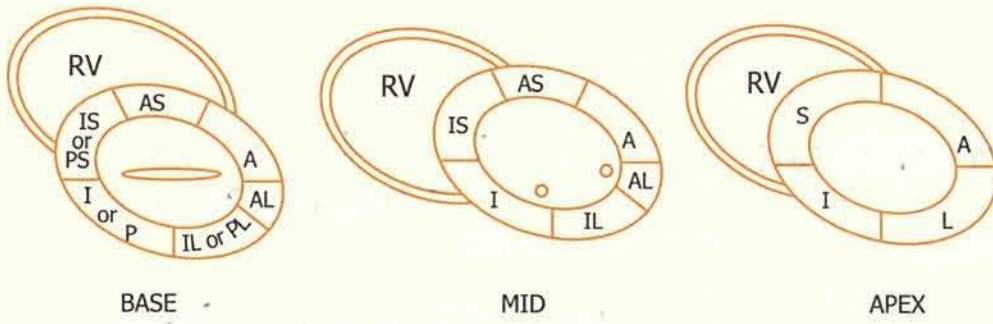
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Left ventricle : LV WALL MOTION ANALYSIS



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} Normal colour
 Doppler

Normal Diastolic
 Compliance

Impression

Normal Echo Study

Done by

Checked by

Signature
 Consultant - Cardiology

Patient Name	: Mrs. Gnaneswari Gunupuru	Age/Gender	: 34 Y/F
UHID/MR No.	: CMAN.0000095174	OP Visit No	: CMANOPV192743
Sample Collected on	:	Reported on	: 27-01-2024 20:17
LRN#	: RAD2218366	Specimen	:
Ref Doctor	: SELF		
Emp/Auth/TPA ID	: bobS6285/118972		

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Cardia is normal .

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. MD RAHEEMUDDIN QURESHI
Radiology

Patient Name	: Mrs. Gnaneswari Gunupuru	Age/Gender	: 34 Y/F
UHID/MR No.	: CMAN.0000095174	OP Visit No	: CMANOPV192743
Sample Collected on	:	Reported on	: 27-01-2024 17:47
LRN#	: RAD2218366	Specimen	:
Ref Doctor	: SELF		
Emp/Auth/TPA ID	: bobS6285/118972		

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

Liver appears normal in size and echotexture. No focal lesion is seen. PV and CBD normal. No dilatation of the intrahepatic biliary radicals.

Gall bladder is well distended. No evidence of calculus. Wall thickness appears normal. No evidence of periGB collection. No evidence of focal lesion is seen.

Spleen appears normal. No focal lesion seen. Splenic vein appears normal.

Pancreas appears normal in echopattern. No focal/mass lesion/calcification. No evidence of peripancreatic free fluid or collection. Pancreatic duct appears normal.

Both the kidneys appear normal in size, shape and echopattern. Cortical thickness and CM differentiation are maintained. No calculus / hydronephrosis seen on either side.

Urinary Bladder is well distended and appears normal. No evidence of any wall thickening or abnormality. No evidence of any intrinsic or extrinsic bladder abnormality detected.

Uterus appears normal in size. It shows normal shape & echo pattern. Endometrial echo-complex appears normal and measures 4 mm. No intra/extra uterine gestational sac seen.

Both ovaries appear normal in size, shape and echotexture.

No evidence of any adnexal pathology noted.

IMPRESSION:-

No significant abnormality detected.

Suggest – clinical correlation.

(The sonography findings should always be considered in correlation with the clinical and other investigation finding where applicable.) It is only a professional opinion, Not valid for medico legal purpose.



Patient Name : Mrs. Gnaneswari Gunupuru

Age/Gender : 34 Y/F


Dr. MOHD ABDUL RAWOOF
MBBS,DNB(RADIO DIAGNOSIS)
Radiology

Patient Name : Mrs.GNANESWARI GUNUPURU	Collected : 27/Jan/2024 11:03AM
Age/Gender : 34 Y 6 M 14 D/F	Received : 27/Jan/2024 04:41PM
UHID/MR No : CMAN.0000095174	Reported : 27/Jan/2024 06:10PM
Visit ID : CMANOPV192743	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobS6285/118972	

DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Status	Unit	Bio. Ref. Range	Method
HEMOGRAM , WHOLE BLOOD EDTA					
HAEMOGLOBIN	8.2	L	g/dL	13-17	Spectrophotometer
PCV	25.40	L	%	40-50	PULSE HEIGHT AVERAGE
RBC COUNT	4.08	L	Million/cu.mm	3.8-4.8	Electrical Impedence
MCV	62.1	L	fL	83-101	Calculated
MCH	20.1	L	pg	27-32	Calculated
MCHC	32.4	L	g/dL	31.5-34.5	Calculated
R.D.W	21.2	H	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	5,290	L	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)					
NEUTROPHILS	50.9	L	%	40-80	Electrical Impedance
LYMPHOCYTES	41.3	H	%	20-40	Electrical Impedance
EOSINOPHILS	1.7	L	%	1-6	Electrical Impedance
MONOCYTES	5.3	L	%	2-10	Electrical Impedance
BASOPHILS	0.8	L	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT					
NEUTROPHILS	2692.61	L	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2184.77	L	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	89.93	L	Cells/cu.mm	20-500	Calculated
MONOCYTES	280.37	L	Cells/cu.mm	200-1000	Calculated
BASOPHILS	42.32	L	Cells/cu.mm	0-100	Calculated
PLATELET COUNT	345000	L	cells/cu.mm	150000-410000	IMPEDENCE/MICROSCOPY
ERYTHROCYTE SEDIMENTATION RATE (ESR)	20	L	mm at the end of 1 hour	0-20	MODIFIED WESTERGRENS
PERIPHERAL SMEAR		L			
RBC- MICROCYTIC HYPOCHROMIC.					
WBC RELATIVE LYMPHOCYTOSIS					


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

Page 1 of 19
CAP
 ACCREDITED
 COLLEGE of AMERICAN PATHOLOGISTS



SIN No:BED240020155

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

Patient Name : Mrs.GNANESWARI GUNUPURU
Age/Gender : 34 Y 6 M 14 D/F
UHID/MR No : CMAN.0000095174
Visit ID : CMANOPV192743
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : bobS6285/118972

Collected : 27/Jan/2024 11:03AM
Received : 27/Jan/2024 04:41PM
Reported : 27/Jan/2024 06:10PM
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

PLATELETS ARE ADEQUATE ON SMEAR
NO HEMOPARASITES SEEN



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

SIN No:BED240020155

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

Page 2 of 19
CAP
ACCREDITED
COLLEGE of AMERICAN PATHOLOGISTS



Patient Name : Mrs.GNANESWARI GUNUPURU	Collected : 27/Jan/2024 11:03AM
Age/Gender : 34 Y 6 M 14 D/F	Received : 27/Jan/2024 04:41PM
UHID/MR No : CMAN.0000095174	Reported : 27/Jan/2024 08:04PM
Visit ID : CMANOPV192743	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobS6285/118972	

DEPARTMENT OF HAEMATOLOGY

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

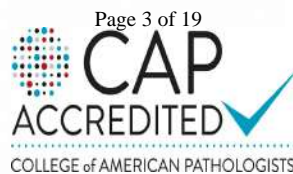
Test Name	Result	Status	Unit	Bio. Ref. Range	Method
BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA					
BLOOD GROUP TYPE	B	N			Microplate technology
Rh TYPE	Positive	N			Microplate technology



Dr.SRINIVAS N.S.NORI
M.B.B.S,M.D(Pathology)
CONSULTANT PATHOLOGY

SIN No:BED240020155

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



Patient Name : Mrs.GNANESWARI GUNUPURU	Collected : 27/Jan/2024 11:03AM
Age/Gender : 34 Y 6 M 14 D/F	Received : 27/Jan/2024 05:05PM
UHID/MR No : CMAN.0000095174	Reported : 27/Jan/2024 06:14PM
Visit ID : CMANOPV192743	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobS6285/118972	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Status	Unit	Bio. Ref. Range	Method
GLUCOSE, FASTING , NAF PLASMA	85	L	mg/dL	70-100	GOD - POD

Comment:

As per American Diabetes Guidelines, 2023

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

Note:

- The diagnosis of Diabetes requires a fasting plasma glucose of $>$ or $=$ 126 mg/dL and/or a random / 2 hr post glucose value of $>$ or $=$ 200 mg/dL on at least 2 occasions.
- Very high glucose levels ($>$ 450 mg/dL in adults) may result in Diabetic Ketoacidosis & is considered critical.



Dr.E.Maruthi Prasad
Msc, PhD(Biochemistry)
Consultant Biochemist

SIN No:PLF02095712

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



Patient Name : Mrs.GNANESWARI GUNUPURU	Collected : 27/Jan/2024 11:03AM
Age/Gender : 34 Y 6 M 14 D/F	Received : 27/Jan/2024 04:58PM
UHID/MR No : CMAN.0000095174	Reported : 27/Jan/2024 06:05PM
Visit ID : CMANOPV192743	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobS6285/118972	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Status	Unit	Bio. Ref. Range	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS, SODIUM FLUORIDE PLASMA (2 HR)	87	L	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	Status	Unit	Bio. Ref. Range	Method
HBA1C (GLYCATED HEMOGLOBIN), WHOLE BLOOD EDTA					
HBA1C, GLYCATED HEMOGLOBIN	5.5	L	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	111	N	mg/dL		Calculated

Comment:

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

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

Note: Dietary preparation or fasting is not required.

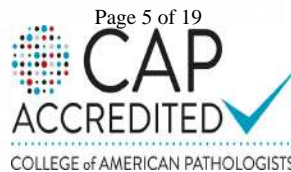
- HbA1C is recommended by American Diabetes Association for Diagnosing Diabetes and monitoring Glycemic Control by American Diabetes Association guidelines 2023.
- Trends in HbA1C values is a better indicator of Glycemic control than a single test.



Dr. RAJESH BATTINA
PhD.(Biochemistry)
Consultant Biochemist

SIN No:EDT240008667

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



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DEPARTMENT OF BIOCHEMISTRY

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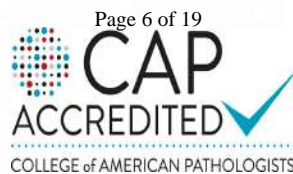
- Low HbA1C in Non-Diabetic patients are associated with Anemia (Iron Deficiency/Hemolytic), Liver Disorders, Chronic Kidney Disease. Clinical Correlation is advised in interpretation of low Values.
- Falsely low HbA1c (below 4%) may be observed in patients with clinical conditions that shorten erythrocyte life span or decrease mean erythrocyte age. HbA1c may not accurately reflect glycemic control when clinical conditions that affect erythrocyte survival are present.
- In cases of Interference of Hemoglobin variants in HbA1C, alternative methods (Fructosamine) estimation is recommended for Glycemic Control
 - HbF >25%
 - Homozygous Hemoglobinopathy.
(Hb Electrophoresis is recommended method for detection of Hemoglobinopathy)



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DEPARTMENT OF BIOCHEMISTRY

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

Chromatogram Report

1 V5.28.1 2024-01-27 17:42:21

ID EDT240008667

Sample No. 01270199 SL 0001 - 02

Patient ID

Name

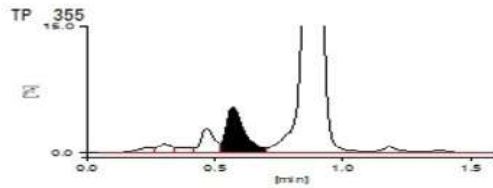
Comment

GALIB Name	%	Time	Area
A1A	0.5	0.25	5.28
A1B	0.6	0.30	6.52
F	0.4	0.39	4.91
LA1C+	1.7	0.47	18.66
SA1C	5.5	0.57	48.11
A0	92.9	0.87	1027.87
H-V0			
H-V1			
H-V2			

Total Area 1111.35

HbA1c 5.5 % **IFCC 36 mmol/mol**

HbA1 6.6 % HbF 0.4 %



27-01-2024 17:42:22 APOLLO

APOLLO DIAGNOSTICS GLOBAL
BALNAGAR

1 / 1



Dr. RAJESH BATTINA
PhD.(Biochemistry)
Consultant Biochemist

SIN No:EDT240008667

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

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Patient Name : Mrs.GNANESWARI GUNUPURU
Age/Gender : 34 Y 6 M 14 D/F
UHID/MR No : CMAN.0000095174
Visit ID : CMANOPV192743
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : bobS6285/118972

Collected : 27/Jan/2024 11:03AM
Received : 27/Jan/2024 04:58PM
Reported : 27/Jan/2024 06:05PM
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



Dr. RAJESH BATTINA
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Consultant Biochemist

SIN No:EDT240008667

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Patient Name : Mrs.GNANESWARI GUNUPURU	Collected : 27/Jan/2024 11:03AM
Age/Gender : 34 Y 6 M 14 D/F	Received : 27/Jan/2024 04:59PM
UHID/MR No : CMAN.0000095174	Reported : 27/Jan/2024 06:09PM
Visit ID : CMANOPV192743	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobS6285/118972	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Status	Unit	Bio. Ref. Range	Method
LIPID PROFILE , SERUM					
TOTAL CHOLESTEROL	174	L	mg/dL	<200	CHO-POD
TRIGLYCERIDES	94	L	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	56	L	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	118	L	mg/dL	<130	Calculated
LDL CHOLESTEROL	99.2	L	mg/dL	<100	Calculated
VLDL CHOLESTEROL	18.8	L	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.11	L		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 on different days can show physiological and analytical variations.
- NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.
- Primary prevention algorithm now includes absolute risk estimation and lower LDL Cholesterol target levels to determine eligibility of drug therapy.
- 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.
- 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.
- VLDL, LDL Cholesterol Non HDL Cholesterol, CHOL/HDL RATIO, LDL/HDL RATIO are calculated parameters when Triglycerides are below 350mg/dl. When Triglycerides are more than 350 mg/dl LDL cholesterol is a direct measurement.



Dr. RAJESH BATTINA
PhD.(Biochemistry)
Consultant Biochemist

SIN No:SE04611248

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



Patient Name : Mrs.GNANESWARI GUNUPURU	Collected : 27/Jan/2024 11:03AM
Age/Gender : 34 Y 6 M 14 D/F	Received : 27/Jan/2024 04:59PM
UHID/MR No : CMAN.0000095174	Reported : 27/Jan/2024 06:09PM
Visit ID : CMANOPV192743	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobS6285/118972	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Status	Unit	Bio. Ref. Range	Method
LIVER FUNCTION TEST (LFT) , SERUM					
BILIRUBIN, TOTAL	0.50	L	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.09	L	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.41	L	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	8	L	U/L	<35	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	17.0	L	U/L	<35	IFCC
ALKALINE PHOSPHATASE	79.00	L	U/L	30-120	IFCC
PROTEIN, TOTAL	6.98	L	g/dL	6.6-8.3	Biuret
ALBUMIN	4.08	L	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.90	L	g/dL	2.0-3.5	Calculated
A/G RATIO	1.41	L		0.9-2.0	Calculated

Comment:

LFT results reflect different aspects of the health of the liver, i.e., hepatocyte integrity (AST & ALT), synthesis and secretion of bile (Bilirubin, ALP), cholestasis (ALP, GGT), protein synthesis (Albumin)

Common patterns seen:

1. Hepatocellular Injury:

- AST – Elevated levels can be seen. However, it is not specific to liver and can be raised in cardiac and skeletal injuries.
- ALT – Elevated levels indicate hepatocellular damage. It is considered to be most specific lab test for hepatocellular injury. Values also correlate well with increasing BMI.
- Disproportionate increase in AST, ALT compared with ALP. • Bilirubin may be elevated.
- AST: ALT (ratio) – In case of hepatocellular injury AST: ALT > 1 In Alcoholic Liver Disease AST: ALT usually >2. This ratio is also seen to be increased in NAFLD, Wilson's diseases, Cirrhosis, but the increase is usually not >2.

2. Cholestatic Pattern:

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

3. Synthetic function impairment:

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



Dr. RAJESH BATTINA
PhD.(Biochemistry)
Consultant Biochemist

SIN No:SE04611248

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



Patient Name : Mrs.GNANESWARI GUNUPURU
Age/Gender : 34 Y 6 M 14 D/F
UHID/MR No : CMAN.000095174
Visit ID : CMANOPV192743
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : bobS6285/118972

Collected : 27/Jan/2024 11:03AM
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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



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Consultant Biochemist

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Patient Name : Mrs.GNANESWARI GUNUPURU	Collected : 27/Jan/2024 11:03AM
Age/Gender : 34 Y 6 M 14 D/F	Received : 27/Jan/2024 04:59PM
UHID/MR No : CMAN.0000095174	Reported : 27/Jan/2024 06:09PM
Visit ID : CMANOPV192743	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobS6285/118972	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Status	Unit	Bio. Ref. Range	Method
RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM					
CREATININE	0.52	L	mg/dL	0.66 - 1.09	Modified Jaffe, Kinetic
UREA	13.50	L	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	6.3	L	mg/dL	8.0 - 23.0	Calculated
URIC ACID	3.32	L	mg/dL	2.6-6.0	Uricase PAP
CALCIUM	8.97	L	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	3.64	L	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	134	L	mmol/L	136-146	ISE (Indirect)
POTASSIUM	4.1	L	mmol/L	3.5-5.1	ISE (Indirect)
CHLORIDE	102	L	mmol/L	101-109	ISE (Indirect)



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Patient Name : Mrs.GNANESWARI GUNUPURU	Collected : 27/Jan/2024 11:03AM
Age/Gender : 34 Y 6 M 14 D/F	Received : 27/Jan/2024 04:59PM
UHID/MR No : CMAN.0000095174	Reported : 27/Jan/2024 05:48PM
Visit ID : CMANOPV192743	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobS6285/118972	

DEPARTMENT OF BIOCHEMISTRY

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

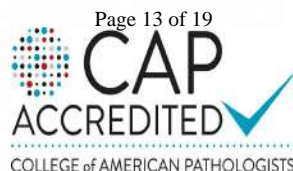
Test Name	Result	Status	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	14.00	L	U/L	<38	IFCC



Dr.E.Maruthi Prasad
Msc, PhD(Biochemistry)
Consultant Biochemist

SIN No:SE04611248

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



Patient Name : Mrs.GNANESWARI GUNUPURU	Collected : 27/Jan/2024 11:03AM
Age/Gender : 34 Y 6 M 14 D/F	Received : 27/Jan/2024 05:00PM
UHID/MR No : CMAN.0000095174	Reported : 27/Jan/2024 06:04PM
Visit ID : CMANOPV192743	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobS6285/118972	

DEPARTMENT OF IMMUNOLOGY

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

Test Name	Result	Status	Unit	Bio. Ref. Range	Method
THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM					
TRI-iodothyronine (T3, TOTAL)	0.94	L	ng/mL	0.87-1.78	CLIA
THYROXINE (T4, TOTAL)	8.77	L	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	1.069	L	µIU/mL	0.38-5.33	CLIA

Comment:

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

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

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



Dr. RAJESH BATTINA
PhD.(Biochemistry)
Consultant Biochemist

SIN No:SPL24013328

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Patient Name	: Mrs.GNANESWARI GUNUPURU	Collected	: 27/Jan/2024 11:03AM
Age/Gender	: 34 Y 6 M 14 D/F	Received	: 27/Jan/2024 05:00PM
UHID/MR No	: CMAN.0000095174	Reported	: 27/Jan/2024 06:04PM
Visit ID	: CMANOPV192743	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: bobS6285/118972		

DEPARTMENT OF IMMUNOLOGY

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



Dr. RAJESH BATTINA
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SIN No:SPL24013328

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Patient Name : Mrs.GNANESWARI GUNUPURU	Collected : 27/Jan/2024 11:03AM
Age/Gender : 34 Y 6 M 14 D/F	Received : 27/Jan/2024 04:53PM
UHID/MR No : CMAN.0000095174	Reported : 27/Jan/2024 06:09PM
Visit ID : CMANOPV192743	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobS6285/118972	

DEPARTMENT OF CLINICAL PATHOLOGY

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

Test Name	Result	Status	Unit	Bio. Ref. Range	Method
COMPLETE URINE EXAMINATION (CUE) , URINE					
PHYSICAL EXAMINATION					
COLOUR	PALE YELLOW	N		PALE YELLOW	Visual
TRANSPARENCY	CLEAR	N		CLEAR	Visual
pH	5.5	L		5-7.5	Bromothymol Blue
SP. GRAVITY	1.025	L		1.002-1.030	Bromothymol Blue
BIOCHEMICAL EXAMINATION					
URINE PROTEIN	NEGATIVE	N		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE	N		NEGATIVE	GOD - POD
URINE BILIRUBIN	NEGATIVE	N		NEGATIVE	AZO COUPLING
URINE KETONES (RANDOM)	NEGATIVE	N		NEGATIVE	SODIUM NITRO PRUSSIDE
UROBILINOGEN	NORMAL	N		NORMAL	EHRlich
BLOOD	NEGATIVE	N		NEGATIVE	Peroxidase
NITRITE	NEGATIVE	N		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE	N		NEGATIVE	PYRROLE HYDROLYSIS
CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY					
PUS CELLS	2-3	L	/hpf	0-5	Microscopy
EPITHELIAL CELLS	2-3	N	/hpf	<10	MICROSCOPY
RBC	NIL	N	/hpf	0-2	MICROSCOPY
CASTS	NIL	L		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT	N		ABSENT	MICROSCOPY


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

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SIN No:UR2269709

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

Patient Name	: Mrs.GNANESWARI GUNUPURU	Collected	: 27/Jan/2024 01:45PM
Age/Gender	: 34 Y 6 M 14 D/F	Received	: 27/Jan/2024 04:53PM
UHID/MR No	: CMAN.0000095174	Reported	: 27/Jan/2024 07:06PM
Visit ID	: CMANOPV192743	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: bobS6285/118972		

DEPARTMENT OF CLINICAL PATHOLOGY

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

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

Dr. Srinivas N.S. Nori
Dr.SRINIVAS N.S.NORI
M.B.B.S,M.D(Pathology)
CONSULTANT PATHOLOGY

SIN No:UPP016369

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



Patient Name	: Mrs.GNANESWARI GUNUPURU	Collected	: 27/Jan/2024 11:03AM
Age/Gender	: 34 Y 6 M 14 D/F	Received	: 27/Jan/2024 04:53PM
UHID/MR No	: CMAN.0000095174	Reported	: 27/Jan/2024 05:53PM
Visit ID	: CMANOPV192743	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: bobS6285/118972		

DEPARTMENT OF CLINICAL PATHOLOGY

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

Test Name	Result	Status	Unit	Bio. Ref. Range	Method
URINE GLUCOSE(FASTING)	NEGATIVE	N		NEGATIVE	Dipstick



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



SIN No:UF010391

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

Patient Name : Mrs.GNANESWARI GUNUPURU	Collected : 27/Jan/2024 01:45PM
Age/Gender : 34 Y 6 M 14 D/F	Received : 27/Jan/2024 04:38PM
UHID/MR No : CMAN.0000095174	Reported : 29/Jan/2024 06:39PM
Visit ID : CMANOPV192743	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobS6285/118972	

DEPARTMENT OF CYTOLOGY

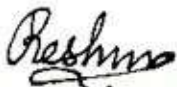
LBC PAP TEST (PAPSURE) , CERVICAL SAMPLE

	CYTOLOGY NO.	1612/24
I	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.
III	RESULT	
a	EPITHELIAL 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

*** End Of Report ***

Result/s to Follow:
PERIPHERAL SMEAR



Dr. Reshma Stanly
M.B.B.S, DNB(Pathology)
Consultant Pathologist

SIN No: CS073524

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

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