

## Physical Medical Examination Format

NAME:- Navya Reddy . Kona	DATE:- 27/1/24
DESIGNATION:-	AGE:- 27y / F
EMP CODE:-	UNIT/DEPARTMENT:-
BLOOD GROUP:-	MARTIAL STATUS:-MARRIED/UNMARRIED

### MEDICAL EXAMINATION

Complaints (if any)	Thyroid +
Personal /family history	Mother DMt, Father HPA <sup>t</sup>
Past Medical /Surgical	ACS
Sensitivity/Allergy (if any)	NO
Habits	NO
Occupational History	NO

Height:- 166	Weight:- 105	BMI 38.1	Pulse 86
Temp:- 98.6	SPO2 99.1	Resp:- 18	B.P 110/80

Remarks

Treatment Recommended (if any):

I Hereby Certify that I have examined Mr/Ms. Navya Reddy for pre-employment /periodical medical examination, I have found / not found any disease, illness, contagious illness

I Certify That Employee Is Medically.....

Fit

Unfit

  
Signature Of Employee

Signature & Seal Of Medical Examiner With

Registration No:-.....

Patient Name	: Mr. NAVYA REDDY KONA	Age	: 27 Y M
UHID	: CVIS.0000123202	OP Visit No	: CVISOPV120699
Reported on	: 27-01-2024 16:07	Printed on	: 27-01-2024 16:08
Adm/Consult Doctor	:	Ref Doctor	: SELF

## DEPARTMENT OF RADIOLOGY

### ULTRASOUND - WHOLE ABDOMEN

**Liver** : 15.7cm. Mild increased in size and echotexture. No focal lesion is seen. PV and CBD normal.No dilatation of the intrahepatic biliary radicals.

**Gall bladder** :Echogenic sludge in the lumen of gall bladder.

**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.

Right kidney : 11.5 x 4.2 cm

Left kidney : 9.3 x 4.9 cm

**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 and echo pattern.It measures 8.7 x 4.6 x 4.6 cm. Endometrial echo-complex appears normal and measures 6 mm.No intra/extra uterine gestational sac seen.

**Both ovaries** appear normal in size, shape and echotexture.

No evidence of any adnexal pathology noted.

Right ovary : 29 x 19 mm.

Left ovary : 26 x 21 mm.

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There is no evidence of ascites/ pleural effusion seen.

**IMPRESSION:-**

- \*MILD HEPATOMEGALY WITH FATTY CHANGES.
- \*ECHOGENIC SLUDGE IN THE LUMEN OF GALL BLADDER.

**For clinico-lab correlation / follow - up / further work up.  
This is only a screening test.**

Printed on:27-01-2024 16:07

---End of the Report---

**Dr. KARROTU SUDHA**  
**MD RADIOLOGY**  
Radiology

Name: Mr. NAVYA REDDY KONA  
 Age/Gender: 27 Y/M  
 Address: VSKP  
 Location: VISAKHAPATNAM, ANDHRA PRADESH  
 Doctor:  
 Department: LABORATORY  
 Rate Plan: VISHAKAPATNAM\_06042023  
 Sponsor: ARCOFEMI HEALTHCARE LIMITED

MR No: CVIS.0000123202  
 Visit ID: CVISOPV120699  
 Visit Date: 27-01-2024 08:37  
 Discharge Date:  
 Referred By: SELF

**Vitals:**

Date	Pulse (Beats/min)	B.P (mmHg)	Resp (Rate/min)	Temp (F)	Height (cms)	Weight (Kgs)	Body Fat Percentage (%)	Visceral Fat Level (%)	Body Age (Years)	BMI	Waist Circum (cms)	Hip (cms)	Waist (cms)	Waist & Hip Ratio	User
27-01-2024 13:39	105 Beats/min	110/80 mmHg	18 Rate/min	98.6 F	166 cms	Kgs	%	%	Years	0	cms	cms	cms		AHLL07730

ID: 123202

K Nayya reddy

Female 27Ycars

Req. No. :

27-01-2024 11:37:50

HR : 86 bpm

P : 98 ms

PR : 130 ms

QRS : 84 ms

QT/QTcBz : 350/419 ms

P/QRS/T : 63/21/35 °

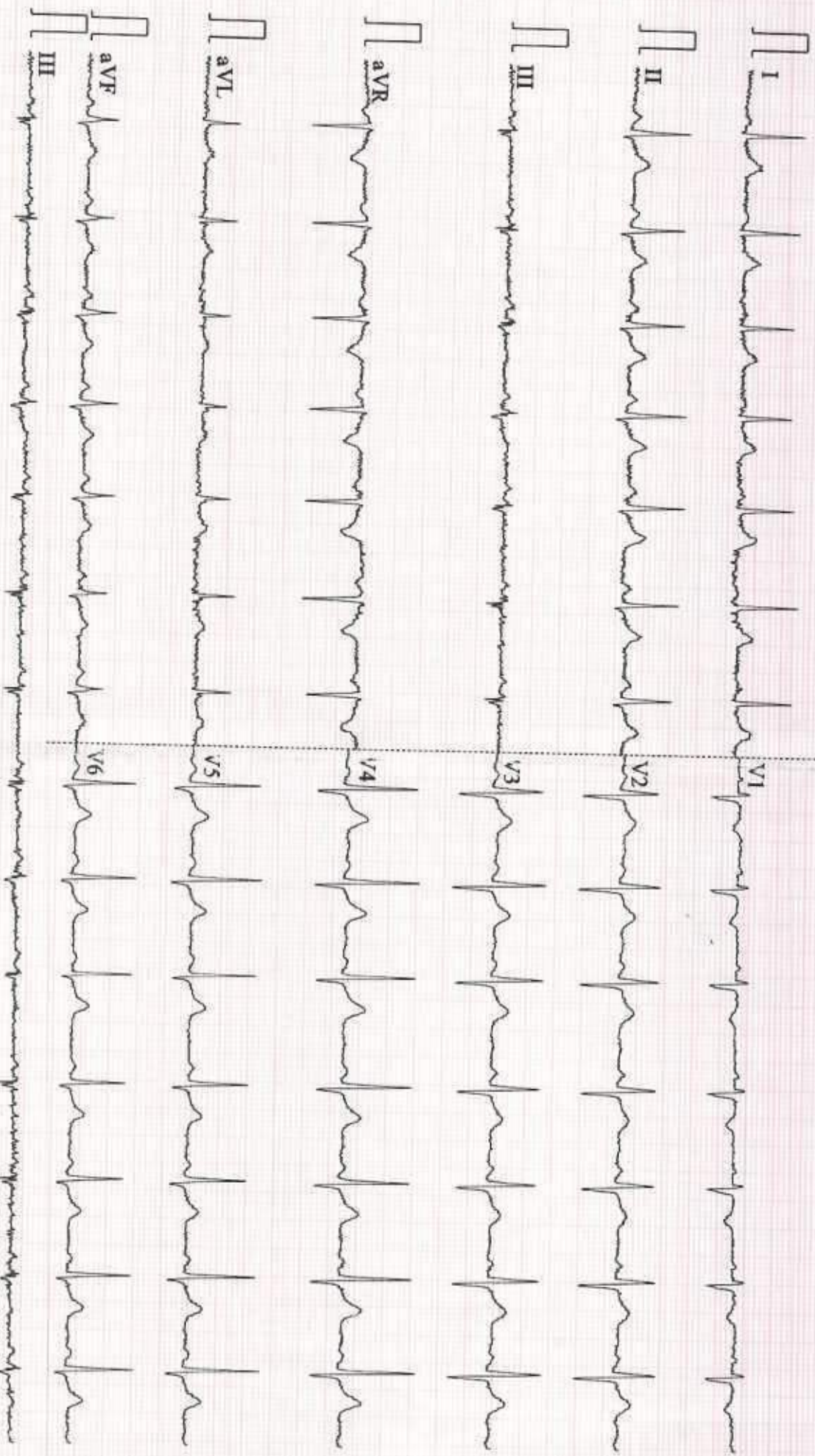
RV5/SV1 : 1.150/0.471 mV

Diagnosis Information:

Sinus rhythm

Normal ECG

Report Confirmed by:



Patient Name	: Mr. NAVYA REDDY KONA	Age	: 27 Y/M
UHID	: CVIS.0000123202	OP Visit No	: CVISOPV120699
Reported By:	: Dr. SHASHANKA CHUNDURI	Conducted Date	: 27-01-2024 15:39
Referred By	: SELF		

### ECG REPORT

#### Observation :-

1. Normal Sinus Rhythm.
2. Heart rate is 86 beats per minutes.
3. No pathological Q wave or S-T,T changes seen.
4. Normal P,Q,R,S,T waves and axis.
5. No evidence of chamber, hypertrophy or enlargement seen.

#### Impression:

NORMAL RESTING ECG.

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

Dr. SHASHANKA CHUNDURI

Patient Name	: Mr. NAVYA REDDY KONA	Age	: 27 Y/M
UHID	: CVIS.0000123202	OP Visit No	: CVISOPV120699
Conducted By:	: Dr. SHASHANKA CHUNDURI	Conducted Date	: 27-01-2024 17:40
Referred By	: SELF		

**2D-ECHO WITH COLOUR DOPPLER**

Dimensions:

Ao (cd)	2.5 CM
LA (cs)	3.0 CM
LVID (ed)	3.9 CM
LVID (es)	2.9 CM
IVS (Ed)	1.0 CM
LVPW (Ed)	1.0 CM
EF	64.00%
%FD	33.00%

MITRAL VALVE :	NORMAL
AML	NORMAL
PML	NORMAL
AORTIC VALVE	NORMAL
TRICUSPID VALVE	NORMAL
RIGHT VENTRICLE	NORMAL
INTER ATRIAL SEPTUM	NORMAL
INTER VENTRICULAR SEPTUM	NORMAL
AORTA	NORMAL
RIGHT ATRIUM	NORMAL
LEFT ATRIUM	NORMAL
Pulmonary Valve	NORMAL
PERICARDIUM	NORMAL
LEFT VENTRICLE:	

NO REGIONAL WALL MOTION ABNORMALITY

NORMAL LEFT VENTRICULAR SYSTOLIC FUNCTION

COLOUR AND DOPPLER STUDIES:

PF:0.7 m/sec.  
MF:E>A,  
AF:0.8 m/sec.

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Vizag (Seethamma Peta)

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

 **1860 500 7788**

IMPRESSION :  
NORMAL CARDIAC SIZE.  
NO RWMA.  
GOOD LV SYSTOLIC FUNCTION.  
NO PERICARDIAL EFFUSION.  
LVEF:64%

Dr. SHASHANKA  
CHUNDURI



Patient Name : Mr.NAVYA REDDY KONA  
Age/Gender : 27 Y 6 M 0 D/M  
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Visit ID : CVISOPV120699  
Ref Doctor : Dr.SELF  
Emp/Auth/TPA ID : 542154

Collected : 27/Jan/2024 08:54AM  
Received : 27/Jan/2024 01:42PM  
Reported : 27/Jan/2024 02:45PM  
Status : Final Report  
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

## DEPARTMENT OF HAEMATOLOGY

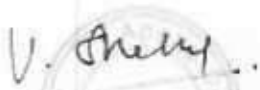
### PERIPHERAL SMEAR , WHOLE BLOOD EDTA

Red cells showed Microcytic hypochromic morphology. Moderate anisocytosis poikilocytosis present, no fragmented red cells seen , no NRBC . No polychromatophilia, No target cells seen . No intracellular hemo-parasite seen.

TLC within normal limits , No toxic granules, no shift to the left in nuclear index. Lymphocytes normal in morphology. No atypical leukocytes seen.

Platelets are in adequate numbers

Microcytic hypochromic anemia.



DR. V. SNEHAL  
M.D (PATH)  
Consultant Pathologist



SIN No: BED240019431

**Apollo Health and Lifestyle Limited** Health and Lifestyle Ltd/Vizag Lab : Vizag-530017

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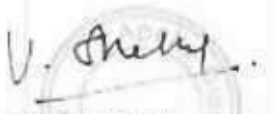
**DEPARTMENT OF HAEMATOLOGY**

**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>	10.2 ✓	g/dL	13-17	Spectrophotometer
<b>PCV</b>	32.80	%	40-50	Electronic pulse & Calculation
<b>RBC COUNT</b>	4.89	Million/cu.mm	4.5-5.5	Electrical Impedance
<b>MCV</b>	67 ✓	fL	83-101	Calculated
<b>MCH</b>	20.9	pg	27-32	Calculated
<b>MCHC</b>	31.1	g/dL	31.5-34.5	Calculated
<b>R.D.W</b>	15.7	%	11.6-14	Calculated
<b>TOTAL LEUCOCYTE COUNT (TLC)</b>	8,500	cells/cu.mm	4000-10000	Electrical Impedance
<b>DIFFERENTIAL LEUCOCYTIC COUNT (DLC)</b>				
<b>NEUTROPHILS</b>	52.8	%	40-80	Electrical Impedance
<b>LYMPHOCYTES</b>	37.5	%	20-40	Electrical Impedance
<b>EOSINOPHILS</b>	3.9	%	1-6	Electrical Impedance
<b>MONOCYTES</b>	5.8	%	2-10	Electrical Impedance
<b>BASOPHILS</b>	0	%	<1-2	Electrical Impedance
<b>ABSOLUTE LEUCOCYTE COUNT</b>				
<b>NEUTROPHILS</b>	4488	Cells/cu.mm	2000-7000	Calculated
<b>LYMPHOCYTES</b>	3187.5	Cells/cu.mm	1000-3000	Calculated
<b>EOSINOPHILS</b>	331.5	Cells/cu.mm	20-500	Calculated
<b>MONOCYTES</b>	493	Cells/cu.mm	200-1000	Calculated
<b>PLATELET COUNT</b>	324000	cells/cu.mm	150000-410000	Electrical impedance
<b>ERYTHROCYTE SEDIMENTATION RATE (ESR)</b>	30	mm at the end of 1 hour	0-15	Modified Westergren
<b>PERIPHERAL SMEAR</b>				

Red cells showed Microcytic hypochromic morphology. Moderate anisocytosis poikilocytosis present, no fragmented red cells seen, no NRBC. No polychromatophilia, No target cells seen. No intracellular hemo-parasite seen.

TLC within normal limits, No toxic granules, no shift to the left in nuclear index. Lymphocytes normal in morphology. No atypical



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Vizag (Seethamma Peta)

Online appointments: www.apolloclinic.com

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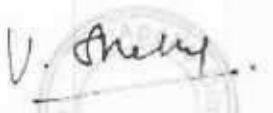
**DEPARTMENT OF HAEMATOLOGY**

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

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Platelets are in adequate numbers

Microcytic hypochromic anemia.



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M.D (PATH)  
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**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	A			Forward & Reverse Grouping with Slide/Tube Aggluti Forward & Reverse Grouping with Slide/Tube Agglutination
Rh TYPE	NEGATIVE			

*V. Snehal*  
DR. V. SNEHAL  
M.D (PATH)  
Consultant Pathologist



SIN No. BFD240010431

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TO BOOK AN APPOINTMENT

 **1860 500 7788**

MC-2373

Patient Name : Mr.NAVYA REDDY KONA	Collected : 27/Jan/2024 08:54AM
Age/Gender : 27 Y 6 M 0 D/M	Received : 27/Jan/2024 01:42PM
UHID/MR No : CVIS.0000123202	Reported : 27/Jan/2024 02:47PM
Visit ID : CVISOPV120699	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 542154	

**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	113	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.

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA</b>				
HBA1C, GLYCATED HEMOGLOBIN	6.7	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	146	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.

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DR. V. SNEHAL  
M.D (PATH)  
Consultant Pathologist



SIN No. EDT240008225

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MC-2373

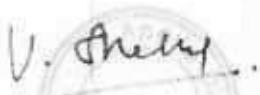
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**DEPARTMENT OF BIOCHEMISTRY**

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

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.
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. V. SNEHAL  
M.D (PATH)  
Consultant Pathologist



SIN No: EDT240008225

This test has been performed at Apollo Health and Lifestyle Ltd/Vizag Lab : Vizag-530017

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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	255	mg/dL	0-200	CHOD-PAP
TRIGLYCERIDES	337	mg/dL	0-149	Enzymatic
HDL CHOLESTEROL	48	mg/dL	>40	CHE/CHO/POD
NON-HDL CHOLESTEROL	207	mg/dL	<130	Calculated
LDL CHOLESTEROL	139.39	mg/dL	<100	Calculated
VLDL CHOLESTEROL	67.31	mg/dL	<30	Calculated
CHOL / HDL RATIO	5.31		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.

*V. Sneh*  
DR. V. SNEHAL  
M.D (PATH)  
Consultant Pathologist



SIN No. SE04610489

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TO BOOK AN APPOINTMENT

**1860 500 7788**

Patient Name	: Mr.NAVYA REDDY KONA	Collected	: 27/Jan/2024 08:54AM
Age/Gender	: 27 Y 6 M 0 D/M	Received	: 27/Jan/2024 12:10PM
UHID/MR No	: CVIS.0000123202	Reported	: 27/Jan/2024 01:15PM
Visit ID	: CVISOPV120699	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 542154		

**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	0.60	mg/dL	0.20-1.20	Colorimetric
BILIRUBIN CONJUGATED (DIRECT)	0.15	mg/dL	0.0-0.20	Diazotized 2,4? Dichloroaniline
BILIRUBIN (INDIRECT)	0.45	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	29.52	U/L	0-45	IFCC Modified method without PLP
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	28.3	U/L	0-31	IFCC
ALKALINE PHOSPHATASE	54.30	U/L	53-128	IFCC
PROTEIN, TOTAL	8.62	g/dL	6.4-8.3	Biuret METHOD
ALBUMIN	4.34	g/dL	3.5-5.2	Bromocresol Green
GLOBULIN	4.28	g/dL	2.0-3.5	Calculated
A/G RATIO	1.01		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:**

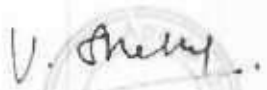
- AST - Elevated levels can be seen. However, it is not specific to liver and can be raised in cardiac and skeletal injuries.
- ALT - Elevated levels indicate hepatocellular damage. It is considered to be most specific lab test for hepatocellular injury. Values also correlate well with increasing BMI.
- 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. V. SNEHAL  
M.D (PATH)  
Consultant Pathologist



SIN No:SE04610489

This test has been performed at Apollo Health and Lifestyle Ltd/Vizag Lab : Vizag-530017

Apollo Health and Lifestyle Limited  
(CIN - U85110TG2000PLC046089) Regd. Office: 7-1-617/A, 7<sup>th</sup> Floor, Imperial Towers, Ameerpet, Hyderabad-500016, Telangana. | Email ID: enquiry@apollohl.com

APOLLO CLINICS NETWORK TELANGANA & AP

Hyderabad (AS Rao Nagar | Chanda Nagar | Jubilee Hills | Kondapur | Manikonda | Nallakunta | Nizampet | Uppal )

Vizag (Seethamma Peta)

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

 **1860 500 7788**

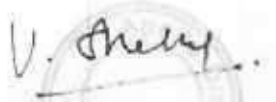


Patient Name : Mr.NAVYA REDDY KONA  
Age/Gender : 27 Y 6 M 0 D/M  
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**DEPARTMENT OF BIOCHEMISTRY**

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

  
DR. V. SNEHAL  
M.D (PATH)  
Consultant Pathologist



SIN No. SE04610489

**Apollo Health and Lifestyle Limited** Health and Lifestyle Ltd/Vizag Lab : Vizag-530017

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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	0.71	mg/dL	0.7-1.2	Jaffe
UREA	19.08	mg/dL	19-44	Urease with GLDH
BLOOD UREA NITROGEN	8.9	mg/dL	8.0 - 23.0	Calculated
URIC ACID	5.24	mg/dL	3.5-7.2	URICASE/PEROXIDASE
CALCIUM	9.81	mg/dL	8.6-10.3	Arsenazo-III
PHOSPHORUS, INORGANIC	3.42	mg/dL	2.7-4.5	PHOSPHOMOLYBDATE
SODIUM	139	mmol/L	135-145	Direct ISE
POTASSIUM	4.6	mmol/L	3.5-5.1	Direct ISE
CHLORIDE	100	mmol/L	98 - 107	Direct ISE

*V. Snehal*

DR. V. SNEHAL  
M.D (PATH)  
Consultant Pathologist



SIN No. SE04610489

**Apollo Health and Lifestyle Limited** Health and Lifestyle Ltd/Vizag Lab : Vizag-530017


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APOLLO CLINICS NETWORK TELANGANA & AP

Hyderabad (AS Rao Nagar | Chanda Nagar | Jubilee Hills | Kondapur | Manikonda | Nallakunta | Nizampet | Uppal)  
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TO BOOK AN APPOINTMENT

 **1860 500 7788**

Patient Name : Mr.NAVYA REDDY KONA  
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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	17.70	U/L	0-55	IFCC



*V. Snehal*

DR. V. SNEHAL  
 M.D (PATH)  
 Consultant Pathologist

~~SIN No. SE04610489~~

**Apollo Health and Lifestyle Limited** Health and Lifestyle Ltd/Vizag Lab : Vizag-530017  
 (CIN - UB5110TG2000PLC046089) Regd. Office: 7-1-617/A, 7<sup>th</sup> Floor, Imperial Towers, Ameerpet, Hyderabad-500016, Telangana. | Email ID: enquiry@apollohl.com

APOLLO CLINICS NETWORK TELANGANA & AP  
 Hyderabad (AS Rao Nagar | Chanda Nagar | Jubilee Hills | Kondapur | Manikonda | Nallakunta | Nizampet | Uppal )  
 Vizag (Seethamma Peta)  
 Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

 **1860 500 7788**

Patient Name : Mr.NAVYA REDDY KONA  
Age/Gender : 27 Y 6 M 0 D/M  
UHID/MR No : CVIS.0000123202  
Visit ID : CVISOPV120699  
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Emp/Auth/TPA ID : 542154

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Reported : 27/Jan/2024 01:30PM  
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)	1.58	ng/ml	0.69-2.15	CLIA
THYROXINE (T4, TOTAL)	68.40	ng/ml	52-127	CLIA
THYROID STIMULATING HORMONE (TSH)	3.670	µIU/mL	0.3-4.5	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



*V. Snehal*  
DR. V. SNEHAL  
M.D (PATH)  
Consultant Pathologist

SIN No: SPL 24012735

**Apollo Health and Lifestyle Limited** Health and Lifestyle Ltd/Vizag Lab : Vizag-530017

(CIN - U85110TG2000PLC046089) Regd. Office: 7-1-617/A, 7<sup>th</sup> Floor, Imperial Towers, Ameerpet, Hyderabad-500016, Telangana. | Email ID: enquiry@apollohl.com

APOLLO CLINICS NETWORK TELANGANA & AP

Hyderabad (AS Rao Nagar | Chanda Nagar | Jubilee Hills | Kondapur | Manikonda | Nallakunta | Nizampet | Uppal)  
Vizag (Seethamma Peta)

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

 **1860 500 7788**

MC-2373

Patient Name : Mr.NAVYA REDDY KONA  
Age/Gender : 27 Y 6 M 0 D/M  
UHID/MR No : CVIS.0000123202  
Visit ID : CVISOPV120699  
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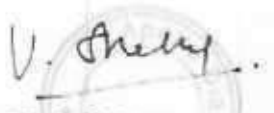
**DEPARTMENT OF IMMUNOLOGY**

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

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

Result/s to Follow:

GLUCOSE (FASTING) - URINE, COMPLETE URINE EXAMINATION (CUE), GLUCOSE (POST PRANDIAL) - URINE, LBC PAP TEST (PAPSURE),  
GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL)

  
DR. V. SNEHAL  
M.D (PATH)  
Consultant Pathologist



SIN No: SPL24012735

**Apollo Health and Lifestyle Limited** Health and Lifestyle Ltd/Vizag Lab : Vizag-530017

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TO BOOK AN APPOINTMENT

 **1860 500 7788**

**Dr NAMRATHA ARISETTY**  
M.B.B.S, D,G,O  
**Consultant Obstetrician & Gynecologist**  
Reg No: -55899

Patient Name: - Navya      Age/Sex: - 27yrs      Date: - 27/1/24

R/L

O/E - P.C.L.  
M/S/MS - NAD.  
P/A - Wof

Pap smear - not willing

LMP 10/1/24  
PMH -  
Reg / 35-40 / 4-5 dy

Neck - NO LPP  
Breast - no lump  
No Thy or Rx  
No significant Post op July  
hst -

P.

Tab Alo-Z - 100

A/

BANK OF BARODA

Name: **MRS. K. NAVYA REDDY**

Gender: **F** Age: **27** Years  
Test Done Date: **27/1/24**

**OPHTHALMOLOGY SCREENING REPORT**

VISION:

DISTANCE

6/6

6/6 of

NEAR VISION

N6

26

COLOUR VISION

WNL

ANT. SEGMENT:

Conjunctiva :

— *clear* —

Cornea :

— *clear* —

Pupil :

— *R/H 11* —

FUNDUS :

IMPRESSION :

*WNL*

*H. Iyer*

Signature

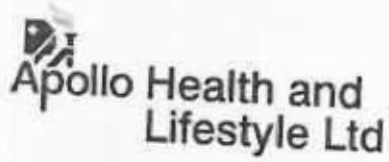
Your appointment is confirmed

noreply@apolloclinics.info <noreply@apolloclinics.info>

Fri 1/26/2024 1:36 PM

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

Cc: Vizag Apolloclinic <vizag@apolloclinic.com>; Ramakumar Vegi <ramakumar.v@apolloclinic.com>; Syamsunder M <syamsunder.m@apollohl.com>



Dear NAVYA REDDY KONA ,

Greetings from Apollo Clinics,

Your corporate health check appointment is confirmed at **VIZAG clinic** on **2024-01-27** at **08:15-08:30**.

Payment Mode	
Corporate Name	ARCOFEMI HEALTHCARE LIMITED
Agreement Name	[ARCOFEMI MEDIWHEEL FEMALE AHC CREDIT PAN INDIA OP AGREEMENT]
Package Name	[ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324]

"Kindly carry with you relevant documents such as HR issued authorization letter and or appointment confirmation mail and or valid government ID proof and or company ID card and or voucher as per our agreement with your company or sponsor."

**Note: Video recording or taking photos inside the clinic premises or during camps is not allowed and would attract legal consequences.**

**Note: Also once appointment is booked, based on availability of doctors at clinics tests will happen, any pending test will happen based on doctor availability and clinics will be updating the same to customers.**

**Instructions to be followed for a health check:**

1. Please ensure you are on complete fasting for 10-To-12-Hours prior to check.
2. During fasting time do not take any kind of alcohol, cigarettes, tobacco or any other liquids (except Water) in the morning. If any medications taken, pls inform our staff before health check.



3. Please bring all your medical prescriptions and previous health medical records with you.
4. Kindly inform our staff, if you have a history of diabetes and cardiac problems.

**For Women:**

1. Pregnant women or those suspecting are advised not to undergo any X-Ray test.
2. It is advisable not to undergo any health check during menstrual cycle.

**For further assistance, please call us on our Help Line #: 1860 500 7788.**

**Clinic Address: 50-81-1/2, PLOT 5, SHEETHAMMAPETA, VISAKHAPATNAM.**

**Contact No: (0891) 258 5511 - 2.**

P.S: Health Check-Up may take 4 - 5hrs for completion on week days & 5 - 6hrs on Saturdays, kindly plan accordingly, Doctor Consultation will be completed after all the Reports are ready.

Warm Regards,  
Apollo Clinic



భారత ప్రభుత్వం  
GOVERNMENT OF INDIA

పద్మ రెడ్డి  
NAVYA Reddy



స్వీట్ హెండ్లూర్ / Year of Birth: 1998  
స్త్రీ / Female

3297 5862 1668



ఆధార్ - సామాన్యని హాక్కు



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 spouse of our employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS OF HEALTH CHECK UP BENEFICIARY	
NAME	NAVYA REDDY KONA
DATE OF BIRTH	22-08-1996
PROPOSED DATE OF HEALTH CHECKUP FOR EMPLOYEE SPOUSE	27-01-2024
BOOKING REFERENCE NO.	23M106522100086230S
SPOUSE DETAILS	
EMPLOYEE NAME	MR. MARADA SANKARA REDDI
EMPLOYEE EC NO.	106522
EMPLOYEE DESIGNATION	BRANCH HEAD
EMPLOYEE PLACE OF WORK	VIZIANAGARAM,KOTHA AGRAHARAM
EMPLOYEE BIRTHDATE	28-06-1987

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 **25-01-2024** till **31-03-2024**. The list of medical tests to be conducted is provided in the annexure to this letter. Please note that the said health checkup is a **cashless facility** as per our tie up arrangement. We request you to attend to the health checkup requirement of our employee's spouse 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))



**UNFIT EXPLANATION**

Date: 27/1/24  
Patient Name: K. Naya Reddy  
UHID: 123202  
Corporate Name: Aurofem

The above-mentioned client unfit given due to A dense blood test.

As per physician advice it was hold not given FIT, once client met with Physician, we will update closure remarks.

Regards,

Apollo clinic,

Vizag

Ph:0891-2585511/12.