

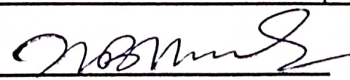
## CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

of ARCHANA JHA on 02/11/23

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

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

Dr.   
 Medical Officer  
**Apollo Clinic**  
 The Apollo Clinic, Mysore  
 # 23, 1st Floor,  
 Kalidasa Road, Mysore - 02  
 Ph: 0821-4006040/41

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

Date : 02-11-2023  
 MR NO : CMYS.0000058394  
 Name : Mrs. ARCHANA JHA  
 Age/ Gender : 45 Y / Female

Department : GENERAL  
 Doctor : *[Signature]* HB  
 Registration No : 67084  
 Qualification : MBBS MD

Consultation Timing: 08:35

Height : 159	Weight : 77.5	BMI :	Waist Circum :
Temp :	Pulse : 72/4	Resp : 20/4	B.P : 120/70

General Examination /  
 Allergies History

C/S  
 R/S  
 P/S | M

Clinical Diagnosis & Management Plan

1. Hypo thyroidism  
 2. Hypertension stage 1 B0 Hz  
 Regular Exercise  
 T- AZT D3 60k  
 once a week

Follow up date :

*[Signature]*  
 Doctor Signature  
**Apollo Clinic**  
 # 23, 1st Floor,  
 Kaldasa Road, Mysore - 02  
 Ph : 0821-4006040/41

Date : 02-11-2023  
 MR NO : CMYS.0000058394  
 Name : Mrs. ARCHANA JHA  
 Age/ Gender : 45 Y / Female

Department : GENERAL  
 Doctor :  
 Registration No :  
 Qualification :

Consultation Timing: 08:35

IBW - 62kgs.

Height: 159.	Weight: 77.5	BMI: 32.	Waist Circum:
Temp:	Pulse:	Resp:	B.P: 120/70

MI -> 20yrs. P/L - F7NL

General Examination /  
 Allergies History

Clinical Diagnosis & Management Plan

Hysterectomy done - 3yrs  
 (w/ Postopse)

PH -> NS.

FT - DM+

SLAM -> jaltu liver.

FBS / PPBS / HBA1C ↑

Adv:

FBS

PPBS

Unstimulated Hb 1/1.

Feb. 2024.

Follow up date :

O/E -> Breast -> NAD.

Adv: Regular walk / yoga.

low fat / low fat diet

avoid junk foods.

Adv: - CANSOFT CL vaginal cream  
 for LA.

- KANTOUD wash or hygiene

- TAB. FLORITA 0-1-0

- TAB. Bandy plus (10) 0-0-1

Dr. Baner  
 Doctor Signature  
**Apollo Clinic**  
 # 23, 1st Floor,  
 Kalidasa Road, Mysore - 02  
 Ph : 0821-4006040/41

Date : 02-11-2023  
 MR NO : CMYS.0000058394  
 Name : Mrs. ARCHANA JHA  
 Age/ Gender : 45 Y / Female

Department : GENERAL  
 Doctor :  
 Registration No : PV : *Praveen Kumar H.*  
 Qualification : *MBBS*

Consultation Timing: 08:35

Height : 159	Weight : 77.5	BMI :	Waist Circumf :
Temp :	Pulse :	Resp :	B.P : 120 / 70

General Examination /  
 Allergies History

Clinical Diagnosis & Management Plan

*Cause of minor kidney stones*

*ca- Early and sustained from  
 & early onset*

*ca- Early sop / intermittent pain*

Follow up date :

*Dr*  
**Apollo Clinic**  
 Doctor Signature, 1st Floor,  
 Kallidasa Road, Mysore - 02  
 Ph : 0821-4006040/41

Date : 02-11-2023  
 MR NO : CMYS.0000058394  
 Name : Mrs. ARCHANA JHA  
 Age/ Gender : 45 Y / Female

Department : GENERAL Dietetics  
 Doctor : Madhura . B.P

Registration No :  
 Qualification : M.Sc Nutrition & Dietetics  
 PhD\*

Consultation Timing: 08:35

IBW - 55kg

Height : 159	Weight : 77.5	BMI : 30 kg/m <sup>2</sup>	Waist Circum :
Temp :	Pulse :	Resp :	B.P : 120/70

General Examination /  
 Allergies History

FBS - 141  
 PPBS - 156  
 HBA1C - 6.0%  
 Non-HDL - 142  
 LDL - 115.51  
 ALT / SGPT - 95  
 AST / SGOT - 51  
 TSH - 10.3

Clinical Diagnosis & Management Plan

4<sup>th</sup> - Fatty liver, slp - TAH, kclo - Hypothyroidism  
 clo - Pre-diabetes (newly diagnosed)  
 => \* Advised low fat diabetic diet with complex carbohydrates and avoid simple sugars.  
 => \* Avoid taking dry- fruits on regularly (weekly once/twice can take)  
 => \* Avoid fruits like Mango, sapota, Jackfruits, custard apple & big banana.  
 => \* Avoid root vegetables like potato, sweet potato, Yams & Arbi.  
 => Avoid maida, sugar, too much of salt, baking soda & creams completely.

Follow up date :

Doctor Signature

Madhura . B.P

=> \* Avoid cruciferous vegetables like cabbage, cauliflower, Broccoli & seed like flax seeds.

21/11/2023  
**Apollo Clinic**  
 # 23, 1st Floor,  
 Kalidasa Road, Mysore - 02  
 Ph : 0821-4006040/41

Date : 02-11-2023  
MR NO : CMYS.0000058394

Department : GENERAL  
Doctor :

Name : Mrs. ARCHANA JHA

Registration No :

Age/ Gender : 45 Y / Female

Qualification :

Consultation Timing: 08:35

Height : 159.	Weight : 77.5	BMI :	Waist Circum :
Temp :	Pulse :	Resp :	B.P : 120/80

General Examination /  
Allergies History

Clinical Diagnosis & Management Plan

Distance VA

Right eye  
6/6 c glass

Left eye

6/6 c glass.

Near VA.

NG c glass

NG c glass -

Colour VA

Normal

Normal

Follow up date :

Doctor Signature  
**Apollo Clinic**  
# 23, 1st Floor,  
Kalidasa Road, Mysore - 02  
Ph : 0821-4006040/41

Date : 02-11-2023  
MR NO : CMYS.0000058394  
Name : Mrs. ARCHANA JHA  
Age/ Gender : 45 Y / Female

Department : GENERAL Dental  
Doctor : Dr. Jayathirre  
Registration No :  
Qualification :

Consultation Timing: 08:35

Height : 159	Weight : 77.5	BMI :	Waist Circum :
Temp :	Pulse :	Resp :	B.P : 120/70

General Examination /  
Allergies History

Clinical Diagnosis & Management Plan

O/E  
Limited mouth opening noted  
H/o Betel nut chewing now left  
since 2yrs.  
Ca + +, St-1  
Anti-oral prophylaxis  
to be  
Follow up done

Follow up date :

Jayathirre  
Dr. Jayathirre  
Anand Clinic  
# 23, 1st Floor,  
Kalidasa Road, Mysore - 02  
Ph : 0821-4006040/41

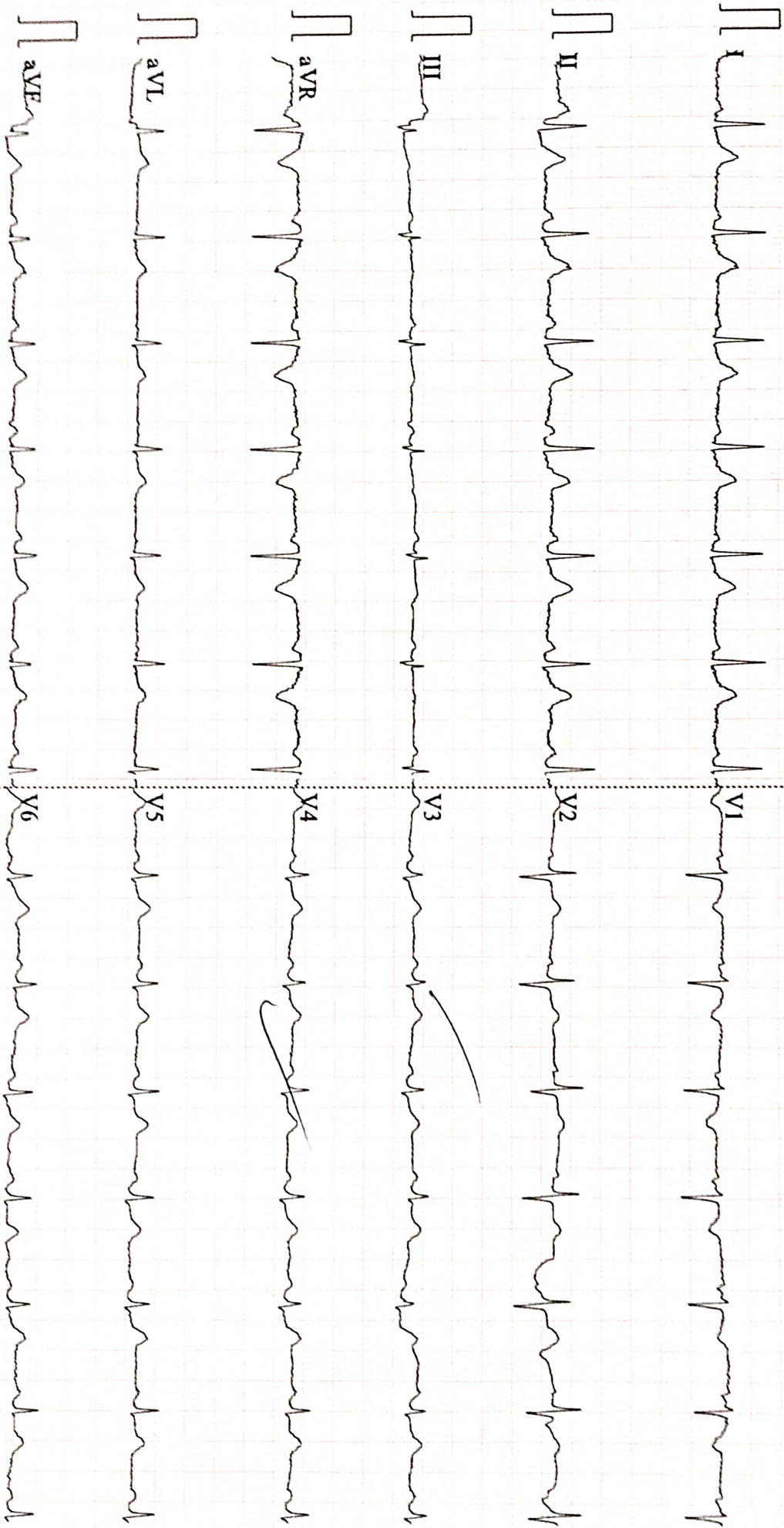
ID: 58394  
MRS ARCHANA JHA  
Female 45Years  
159cm 77kg 120/70 mmHg

02-11-2023 10:43:21 AM

Diagnosis Information:

Unconfirmed Report.

**Apollo Clinic**  
# 23, 1st Floor,  
Kallidasa Road, Mysore - 02  
Ph : 0821-4006040/41





Patient Name	: Mrs. ARCHANA JHA	Age	: 45 Y F
UHID	: CMYS.0000058394	OP Visit No	: CMYSOPV118907
Reported on	: 02-11-2023 17:20	Printed on	: 02-11-2023 17:20
Adm/Consult Doctor	:	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 .

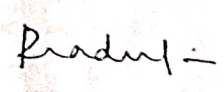
Both diaphragms are normal in position and contour .

Thoracic wall and soft tissues appear normal.

**IMPRESSION :NORMAL STUDY.**

Printed on:02-11-2023 17:20

---End of the Report---


  
**Dr. PRADEEP KUMAR C N**  
**MBBS DNB( RADIOLOGY)**  
Radiology

**Apollo Health and Lifestyle Limited**

ICMR UBS13DTG2000PLC115819  
Kings Office 1 1D 6D 62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016  
Ph. No. (040) 4934 7777 Fax No. 4904 7744 | Email: enquiry@apollohlt.com | www.apollohlt.com

**APOLLO CLINICS NETWORK KARNATAKA**  
Bangalore - Basavanahalli | Bellandur | Electronic City | Fraser Town | HSR Layout | Indra Nagar | JP Nagar | Kundalahalli |  
Koramangala | Narajapur Road | Mysore (VV Mohalla)  
Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

 **1860 500 7788**

Patient Name: Mrs Archana Jha	Date : 02.11.2023.	Referring Doctor: Dr .Self
Age / Sex: 45 Yrs/Female	UHID NO:58394	Location : OP
<b>ULTRASONOGRAPHY- ABDOMEN &amp; PELVIS</b>		

**LIVER:** It is increased in size and echotexture. No focal lesions seen. IHBR are not dilated. CBD and Portal vein are normal.

**GALL BLADDER:** It is well distended and normal. No calculi seen.

**SPLEEN:** It is normal in size, outline and echopattern. No e/o focal lesions.

**PANCREAS:** It is normal.

**RIGHT KIDNEY:** It measures 102x40 mm with parenchymal thickness of 13mm. It is normal in size, outline and echotexture. No e/o calculus or hydronephrosis seen.

**LEFT KIDNEY:** It measures 105x47 mm with parenchymal thickness of 14 mm. It is normal in size, outline and echotexture. No e/o calculus or hydronephrosis seen.

**URINARY BLADDER:** It is well distended. The UB wall is normal. No calculi seen.

**UTERUS:** Post operative status.

**Rt. OVARY:** It measures 20x21 mm. It is normal. No mass lesion seen.

**Lt. OVARY:** It measures 33x30 mm. It is normal. No mass lesion seen.

**RIF:** No evidence of focal collection or mass lesion seen. Appendix is not visualized.

**OTHERS:** No e/o free fluid in the abdomen. No e/o lymphadenopathy. No e/o gut wall thickening. No mass lesion seen in the abdomen.

**IMPRESSION:** FATTY LIVER.

*Pradeep*  
Dr. Pradeep Kumar C N, DNB  
Consultant Radiologist.

Apollo Health and Lifestyle Limited

CIN: U65110TG2000PLC115819  
Regd. Office: 1-10-60-02, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016  
Ph: No. 040 4904 7777 Fax No. 4904 7744 | Email ID: enquiry@apollohl.com | www.apollohl.com

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Koramangala | Sarajepalli Road | Mysore (VV Mohalla)  
Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

**1860 500 7788**

Patient's Name : Mrs. Archana Jha	Age & Sex; 49Yrs /Female
Date : 2.11.2023	UHID No: 58394

**2D ECHOCARDIOGRAPHY STUDY**

**Impression:**

- Normal chambers and valves
- No regional wall motion abnormality
- Normal left ventricular systolic function. EF 61%
- No clots. No pericardial effusion

**Findings**

Left Ventricle:	No RWMA
Right Ventricle	Normal
Left Atrium	Normal
Right Atrium	Normal
Aorta	Normal
Pulmonary Artery	Normal
IAS	Intact
IVS	Intact
Valves	Normal
Pericardium	Normal
Doppler	Normal

**Apollo Health and Lifestyle Limited**

REGD. OFFICE: 110/6/2, Ashoka Kaghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016  
 Ph: No. 044 4294 7777 Fax No. 4904 7744 | Email ID: enquiry@apollohl.com | www.apollohl.com

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 Koramangala | Sarajpet Road | Mysore: (VV Mohalla)

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

**1860 500 7788**

Patient's Name : Mrs. Archana Jha	Age & Sex; 49Yrs /Female
Date : 2.11.2023	UHID No: 58394

Measurements

AO : 2.6 cm  
LA : 2.8 cm

RV : 2.8 cm  
LVIDd : 4.76 cm  
LVIDs : 3.21 cm  
IVSd : 1.17 cm  
IVSs : 1.65 cm  
PWd : 1.17 cm  
PWs : 1.40 cm  
EF : 61.0 %  
FS : 32.0 %

Doppler

	MV		TV		AV		PV			
E	0.89	m/s	E ---	m/s	V max	1.46	m/s	V max	0.95	m/s
A:	0.79	m/s	A ---	m/s						
MR	Nil		TR	Nil	AR	Nil		PR	Nil	

**Dr. GURU PRASAD. B. V, MBBS, PGDCC**  
**CONSULTANT – NON-INVASIVE CARDIOLOGY**

Apollo Health and Lifestyle Limited

Hyd: 08510752000/02215819  
Bangalore: 112, 1st St, Ashoka Rajghatpathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016  
K: 0804242047/27 Fax No: 4904 7744 Email: enquiry@apollohi.com | www.apollohi.com

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Kannur: K. S. Narayan Road | Mysore: VV Mohalla

Online appointments: www.apolloclinics.com

TO BOOK AN APPOINTMENT

**1860 500 7788**

**Informed Consent/Declaration For Test Exclusion**

Patient Name: Mrs Archana Ha Age: 45 yrs.

UHID Number: 58394

Please tick and sign the relevant part

I certify that I will skip Pap Smear + Gene Mamo Test from my own.

No refund is provided for the above excluded test and i have been informed about the same.

Patient signature Archana Date 2/11/23

Witness signature: [Signature] Date: 2/11/23

**Apollo Clinic**  
# 23, 1st Floor,  
Kalidasa Road, Mysore - 02  
Ph : 0821-4006040/41

Patient Name : Mrs.ARCHANA JHA	Collected : 02/Nov/2023 08:40AM
Age/Gender : 45 Y 3 M 15 D/F	Received : 02/Nov/2023 10:17AM
UHID/MR No : CMYS.0000058394	Reported : 02/Nov/2023 01:39PM
Visit ID : CMYSOPV118907	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 960239607236	

**DEPARTMENT OF HAEMATOLOGY**

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

**PERIPHERAL SMEAR , WHOLE BLOOD EDTA**

--



SIN No:BED230268245

Patient Name : Mrs.ARCHANA JHA	Collected : 02/Nov/2023 08:40AM
Age/Gender : 45 Y 3 M 15 D/F	Received : 02/Nov/2023 10:17AM
UHID/MR No : CMYS.0000058394	Reported : 02/Nov/2023 02:14PM
Visit ID : CMYSOPV118907	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 960239607236	

**DEPARTMENT OF HAEMATOLOGY**

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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**HEMOGRAM , WHOLE BLOOD EDTA**

<b>HAEMOGLOBIN</b>	13.7	g/dL	12-15	Spectrophotometer
PCV	43.70	%	36-46	Electronic pulse & Calculation
RBC COUNT	<b>4.83</b>	Million/cu.mm	3.8-4.8	Electrical Impedence
MCV	90	fL	83-101	Calculated
MCH	28.4	pg	27-32	Calculated
MCHC	<b>31.4</b>	g/dL	31.5-34.5	Calculated
R.D.W	14	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	6,800	cells/cu.mm	4000-10000	Electrical Impedence

**DIFFERENTIAL LEUCOCYTIC COUNT (DLC)**

NEUTROPHILS	43.6	%	40-80	Electrical Impedence
LYMPHOCYTES	<b>47.6</b>	%	20-40	Electrical Impedence
EOSINOPHILS	2.3	%	1-6	Electrical Impedence
MONOCYTES	5.9	%	2-10	Electrical Impedence
BASOPHILS	0.6	%	<1-2	Electrical Impedence

**ABSOLUTE LEUCOCYTE COUNT**

NEUTROPHILS	2964.8	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	<b>3236.8</b>	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	156.4	Cells/cu.mm	20-500	Calculated
MONOCYTES	401.2	Cells/cu.mm	200-1000	Calculated
BASOPHILS	40.8	Cells/cu.mm	0-100	Calculated

**PLATELET COUNT**

PLATELET COUNT	225000	cells/cu.mm	150000-410000	Electrical impedence
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**ERYTHROCYTE SEDIMENTATION RATE (ESR)**

ERYTHROCYTE SEDIMENTATION RATE (ESR)	12	mm at the end of 1 hour	0-20	Modified Westergren
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**PERIPHERAL SMEAR**

**R.B.C:** Majority are normocytic normochromic.  
**W.B.C:** Are normal in number,morphology and increased lymphocytes.

**Platelets:** Adequate and are seen in singles and clumps.

**Hemoparasites:** Not seen.

**IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE WITH LYMPHOCYTOSIS.**

Patient Name : Mrs.ARCHANA JHA	Collected : 02/Nov/2023 08:40AM
Age/Gender : 45 Y 3 M 15 D/F	Received : 02/Nov/2023 10:17AM
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**DEPARTMENT OF HAEMATOLOGY**

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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SIN No:BED230268245





Patient Name : Mrs.ARCHANA JHA	Collected : 02/Nov/2023 08:40AM
Age/Gender : 45 Y 3 M 15 D/F	Received : 02/Nov/2023 10:17AM
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**DEPARTMENT OF HAEMATOLOGY**

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

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

**BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA**

BLOOD GROUP TYPE	B			Forward & Reverse Grouping with Slide/Tube Aggluti
Rh TYPE	POSITIVE			Forward & Reverse Grouping with Slide/Tube Agglutination



SIN No:BED230268245

Patient Name : Mrs.ARCHANA JHA	Collected : 02/Nov/2023 08:40AM
Age/Gender : 45 Y 3 M 15 D/F	Received : 02/Nov/2023 12:53PM
UHID/MR No : CMYS.0000058394	Reported : 02/Nov/2023 01:38PM
Visit ID : CMYSOPV118907	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 960239607236	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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GLUCOSE, FASTING , NAF PLASMA	141	mg/dl	74-106	GOD, POD
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**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.

GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	156	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 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.

HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD EDTA	6.0	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD EDTA	126	mg/dL		Calculated

**Comment:**

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

Patient Name : Mrs.ARCHANA JHA	Collected : 02/Nov/2023 08:40AM
Age/Gender : 45 Y 3 M 15 D/F	Received : 02/Nov/2023 12:53PM
UHID/MR No : CMYS.0000058394	Reported : 02/Nov/2023 01:38PM
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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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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.
- 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
  - A: HbF >25%
  - B: Homozygous Hemoglobinopathy.
 (Hb Electrophoresis is recommended method for detection of Hemoglobinopathy)



SIN No:PLF02048898,PLP1383657,EDT230099727

Patient Name : Mrs.ARCHANA JHA	Collected : 02/Nov/2023 08:40AM
Age/Gender : 45 Y 3 M 15 D/F	Received : 02/Nov/2023 10:17AM
UHID/MR No : CMYS.0000058394	Reported : 02/Nov/2023 02:25PM
Visit ID : CMYSOPV118907	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 960239607236	

DEPARTMENT OF BIOCHEMISTRY

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

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

LIPID PROFILE , SERUM

TOTAL CHOLESTEROL	199	mg/dl	0-200	CHOD
TRIGLYCERIDES	131	mg/dl	0-150	GPO, Trinder
HDL CHOLESTEROL	57	mg/dL	>40	CHE/CHO/POD
NON-HDL CHOLESTEROL	142	mg/dL	<130	Calculated
LDL CHOLESTEROL	115.51	mg/dL	<100	Calculated
VLDL CHOLESTEROL	26.2	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.47		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.



SIN No:SE04528321

Patient Name : Mrs.ARCHANA JHA	Collected : 02/Nov/2023 08:40AM
Age/Gender : 45 Y 3 M 15 D/F	Received : 02/Nov/2023 10:17AM
UHID/MR No : CMYS.0000058394	Reported : 02/Nov/2023 05:43PM
Visit ID : CMYSOPV118907	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 960239607236	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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LIVER FUNCTION TEST (LFT) , SERUM

BILIRUBIN, TOTAL	0.69	mg/dl	0-1.2	NBD
BILIRUBIN CONJUGATED (DIRECT)	0.16	mg/dl	0-0.2	Diazotized sulfanilic acid
BILIRUBIN (INDIRECT)	0.53	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	<b>95</b>	U/l	0-45	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	<b>51.0</b>	U/l	0-31	IFCC
ALKALINE PHOSPHATASE	<b>106.00</b>	U/l	42-98	IFCC (AMP buffer)
PROTEIN, TOTAL	7.50	g/dl	6.4-8.3	Biuret
ALBUMIN	4.45	g/dl	3.5-5.2	Bromcresol Green
GLOBULIN	3.05	g/dL	2.0-3.5	Calculated
A/G RATIO	1.46		0.9-2.0	Calculated

NOTE : Suggested repeat for confirmation. Kindly provide clinical history.

**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.

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Age/Gender	: 45 Y 3 M 15 D/F	Received	: 02/Nov/2023 10:17AM
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Visit ID	: CMYSOPV118907	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
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**DEPARTMENT OF BIOCHEMISTRY**

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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• Correlation with PT (Prothrombin Time) helps.



SIN No:SE04528321

Patient Name : Mrs.ARCHANA JHA	Collected : 02/Nov/2023 08:40AM
Age/Gender : 45 Y 3 M 15 D/F	Received : 02/Nov/2023 10:17AM
UHID/MR No : CMYS.0000058394	Reported : 02/Nov/2023 04:20PM
Visit ID : CMYSOPV118907	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 960239607236	

**DEPARTMENT OF BIOCHEMISTRY**

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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**RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM**

CREATININE	0.77	mg/dL	0.5-1.04	Creatinine amidohydrolase
UREA	29.20	mg/dl	13-43	Urease, UV
BLOOD UREA NITROGEN	13.6	mg/dL	8.0 - 23.0	Calculated
URIC ACID	6.20	mg/dL	2.5-6.2	Uricase
CALCIUM	10.07	mg/dl	8.6-10.3	Arsenazo III
PHOSPHORUS, INORGANIC	<b>4.51</b>	mg/dl	2.7-4.5	Molybdate
SODIUM	143	mmol/L	135-145	Direct ISE
POTASSIUM	4.8	mmol/L	3.5-5.1	Direct ISE
CHLORIDE	100	mmol/L	98 - 107	Direct ISE



Patient Name : Mrs.ARCHANA JHA	Collected : 02/Nov/2023 08:40AM
Age/Gender : 45 Y 3 M 15 D/F	Received : 02/Nov/2023 10:17AM
UHID/MR No : CMYS.0000058394	Reported : 02/Nov/2023 03:25PM
Visit ID : CMYSOPV118907	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 960239607236	

**DEPARTMENT OF BIOCHEMISTRY**

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

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM</b>	<b>56.00</b>	U/L	12-43	Glycylglycine Nitoranalide



SIN No:SE04528321



Patient Name : Mrs.ARCHANA JHA	Collected : 02/Nov/2023 08:40AM
Age/Gender : 45 Y 3 M 15 D/F	Received : 02/Nov/2023 10:17AM
UHID/MR No : CMYS.0000058394	Reported : 02/Nov/2023 01:04PM
Visit ID : CMYSOPV118907	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 960239607236	

DEPARTMENT OF IMMUNOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM

TRI-IODOTHYRONINE (T3, TOTAL)	1.35	ng/mL	0.64-1.52	CMIA
THYROXINE (T4, TOTAL)	8.57	µg/dL	4.87-11.72	CMIA
THYROID STIMULATING HORMONE (TSH)	<b>10.320</b>	µIU/mL	0.35-4.94	CMIA

Result is rechecked. Kindly correlate clinically

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

Patient Name	: Mrs.ARCHANA JHA	Collected	: 02/Nov/2023 08:40AM
Age/Gender	: 45 Y 3 M 15 D/F	Received	: 02/Nov/2023 10:17AM
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Visit ID	: CMYSOPV118907	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 960239607236		

**DEPARTMENT OF IMMUNOLOGY**

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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SIN No:SPL23155258

**APOLLO CLINICS NETWORK**

Patient Name : Mrs.ARCHANA JHA	Collected : 02/Nov/2023 08:40AM
Age/Gender : 45 Y 3 M 15 D/F	Received : 02/Nov/2023 12:21PM
UHID/MR No : CMYS.0000058394	Reported : 02/Nov/2023 01:25PM
Visit ID : CMYSOPV118907	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 960239607236	

DEPARTMENT OF CLINICAL PATHOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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COMPLETE URINE EXAMINATION (CUE) , URINE

PHYSICAL EXAMINATION

COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pH	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	NEGATIVE		NEGATIVE	Dipstick
NITRITE	NEGATIVE		NEGATIVE	Dipstick
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	PYRROLE HYDROLYSIS

CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY

PUS CELLS	3 - 4	/hpf	0-5	Microscopy
EPITHELIAL CELLS	4 - 5	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY



SIN No:UR2212078

Patient Name : Mrs.ARCHANA JHA	Collected : 02/Nov/2023 08:40AM
Age/Gender : 45 Y 3 M 15 D/F	Received : 02/Nov/2023 12:21PM
UHID/MR No : CMYS.0000058394	Reported : 02/Nov/2023 01:25PM
Visit ID : CMYSOPV118907	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 960239607236	

**DEPARTMENT OF CLINICAL PATHOLOGY**

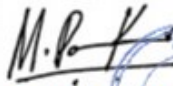
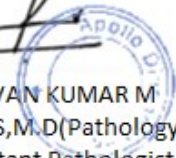
**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY2324**

Test Name	Result	Unit	Bio. Ref. Range	Method
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URINE GLUCOSE(POST PRANDIAL)	NEGATIVE		NEGATIVE	Dipstick
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URINE GLUCOSE(FASTING)	NEGATIVE		NEGATIVE	Dipstick
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\*\*\* End Of Report \*\*\*

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



SIN No:UPP015715,UF009716