

NAME: Mrs.LAYA BABY T

AGE: 36YRS/ F

DATE: 19/02/2024

CJPN :53368

**2D ECHO WITH COLOR DOPPLER**

Ao Diam : 2.9cm , LA Diam : 3.5cm,  
IVSd : 1.2cm , IVSs:1.2cm, LVIDd : 5.1cm, LVIDs: 3.0 cm LVPWd:1.2cm,  
LVPWS : 1.5cm , EF - 69% , FS - 39% , RVIDd - 1.1cm

**2DVALVES**

MITRAL VALVE -----: NORMAL  
TRICUSPID VALVE-----: NORMAL  
AORTIC VALVE-----: NORMAL  
PULMONARY VALVE-----: NORMAL

**CHAMBERS**

LEFT ATRIUM-----: NORMAL  
RIGHT ATRIUM-----: NORMAL  
LEFT VENTRICULAR-----: NORMAL  
RIGHT VENTRICULAR---:NORMAL

**DOPPLER**

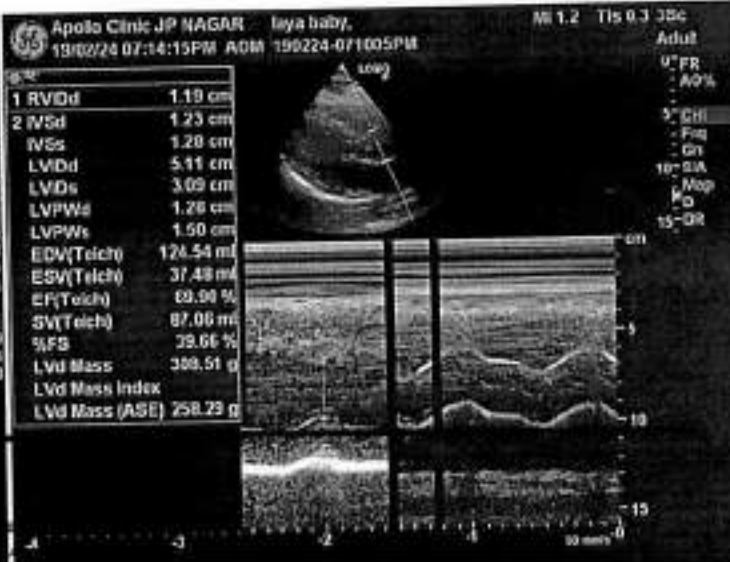
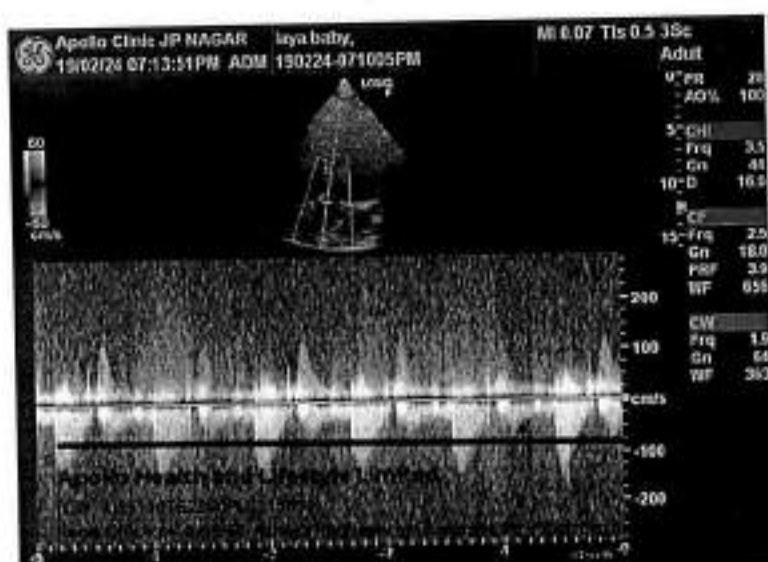
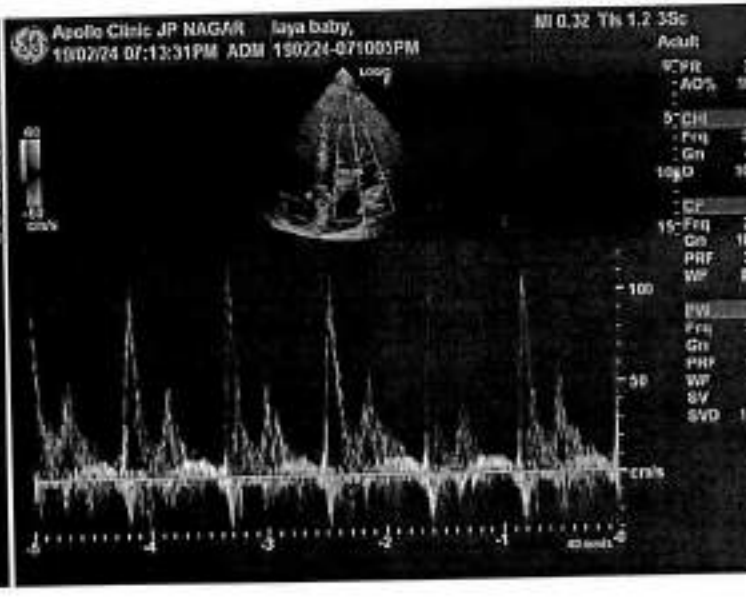
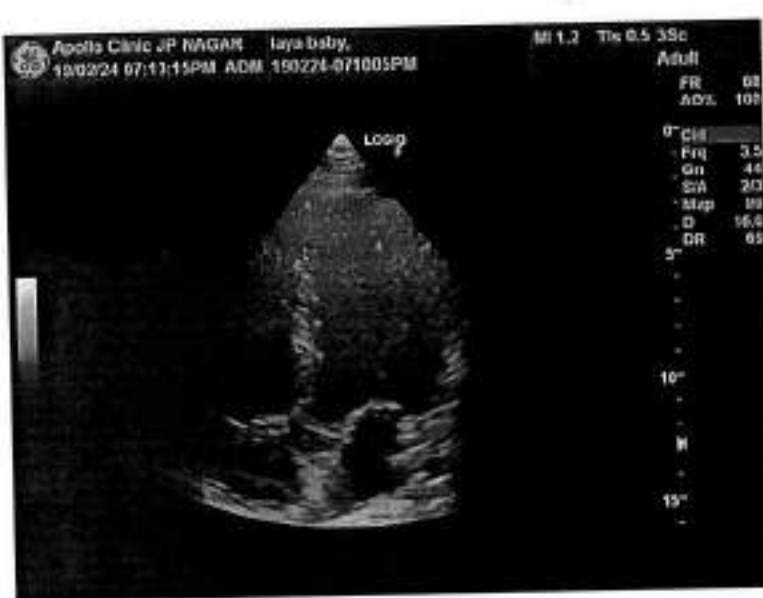
MV E Vel---- : 1.0m/s , MV A Vel : 0.5 m/s  
TRICUSPID VALVE : NORMAL  
PERICARDIUM-----: NORMAL  
CLOT/VEGETATION----- : NIL

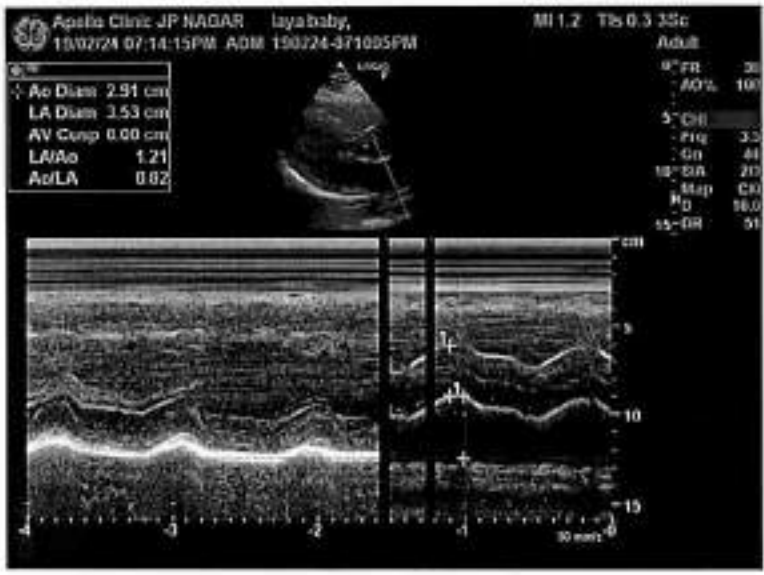
**IMPRESSION**

NORMAL VALVES AND CHAMBERS  
NORMAL LV SYSTOLIC FUNCTION  
NO CLOT /VEGETATION/EFFUSION/PAH  
NO REGIONAL WALL MOTION ABNORMALITIES



**DR. SHILPA JAYAPRAKASH, MD,DM**  
**CONSULTANT CARDIOLOGIST**





Name : Mrs. LAYA BABY T

Age: 36 Y

UHID:CELE,0000053368

Sex: F



Address : E CITY

OP Number:CJPNOPV188571

 Plan : ARCOFEMI MEDIWHEEL FEMALE AHC CREDIT PAN  
 INDIA OP AGREEMENT

Bill No :CJPN-OCR-69304

Date : 19.02.2024 08:16

Sno	Service Type/ServiceName	Department
1	ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324	
<input checked="" type="checkbox"/>	URINE GLUCOSE(FASTING)	
<input checked="" type="checkbox"/>	GAMMA GLUTAMYL TRANSFERASE (GGT)	
<input checked="" type="checkbox"/>	HbA1c, GLYCATED HEMOGLOBIN	
4	2 D ECHO	
<input checked="" type="checkbox"/>	LIVER FUNCTION TEST (LFT)	
6	X-RAY CHEST PA	
<input checked="" type="checkbox"/>	GLUCOSE, FASTING	
<input checked="" type="checkbox"/>	HEMOGRAM - PERIPHERAL SMEAR	
9	MENT CONSULTATION	
10	FITNESS BY GENERAL PHYSICIAN	
<input checked="" type="checkbox"/>	GYNAECOLOGY CONSULTATION R-11	
12	DIET CONSULTATION	
<input checked="" type="checkbox"/>	COMPLETE URINE EXAMINATION	
<input checked="" type="checkbox"/>	URINE GLUCOSE(POST PRANDIAL)	
<input checked="" type="checkbox"/>	PERIPHERAL SMEAR	
<input checked="" type="checkbox"/>	ECG	
<input checked="" type="checkbox"/>	BLOOD GROUP ABO AND RH FACTOR	
<input checked="" type="checkbox"/>	LIPID PROFILE	
<input checked="" type="checkbox"/>	BODY MASS INDEX (BMI)	
<input checked="" type="checkbox"/>	LBC PAP TEST- PAPSURE R-11	
<input checked="" type="checkbox"/>	OPHTHAL BY GENERAL PHYSICIAN R-3	
<input checked="" type="checkbox"/>	RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)	
23	ULTRASOUND - WHOLE ABDOMEN	
<input checked="" type="checkbox"/>	THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)	
<input checked="" type="checkbox"/>	DENTAL CONSULTATION R-22	
<input checked="" type="checkbox"/>	GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL) 10-50 AM	

Dental-22

Ophthal-03

Physio-04

Diet-16

wt - 75.2 kg

HF - 164 cms.

BP - 146/98 mm/Hg

waist - 89 cms

HFP - 108 lvs

PR - 89/mb-

Ms. Laya Baly 36yrs

MS - 114m P2L2

19/2/24

• H/o vaginal - white discharge on c-off -  
later to

PIV: → M → MS  
→ S → Foa segment repair

FUI: → Anterior epiphora - 3 months since.  
→ Anterior chest - Breast cancer

OIE

LC vein -  
epiphora

P IAS DLT

PI5: Gx - Healthy  
VA - Thick white discharge @

PIV: upper body  
3/4 lower part  
NI

Wsp: first week  
of lab

MHC: 3 days irregular  
28/24 ↓ and  
NO pain

OIH: P2L2  
Bum (mild)  
Wsp 60-70%

Adm

• Breast self  
examination -  
monthly.

• in 2 reports

Dr. Anita Jalappa  
MBBS (DGO) DNB  
Fellowship in Gynaecological Endoscopy (GOG)  
Consultant Gynaecologist & Obstetrician  
Uteruscare program, Bangalore  
KMC TO OVS Fertility Institute

Name - Laya Baby T

Age - 36yrs F

Date - 12/02/24

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

General Examination / Allergies History

Clinical Diagnosis & Management Plan

C/O - Routine

Eye checkup

H/O PUP - using

glasses

H/O Eye Sx - No

UHVH

6/36 NC

6/36 NC

T glass VH

6/6 NC

6/6 NC

Colours vision is normal in BE

continue the same glasses

PUP

RE = -2.50/-0.75 x 140°

LE = -2.50/0.50 x 65°

Follow up date:

after 6 months

Doctor Signature

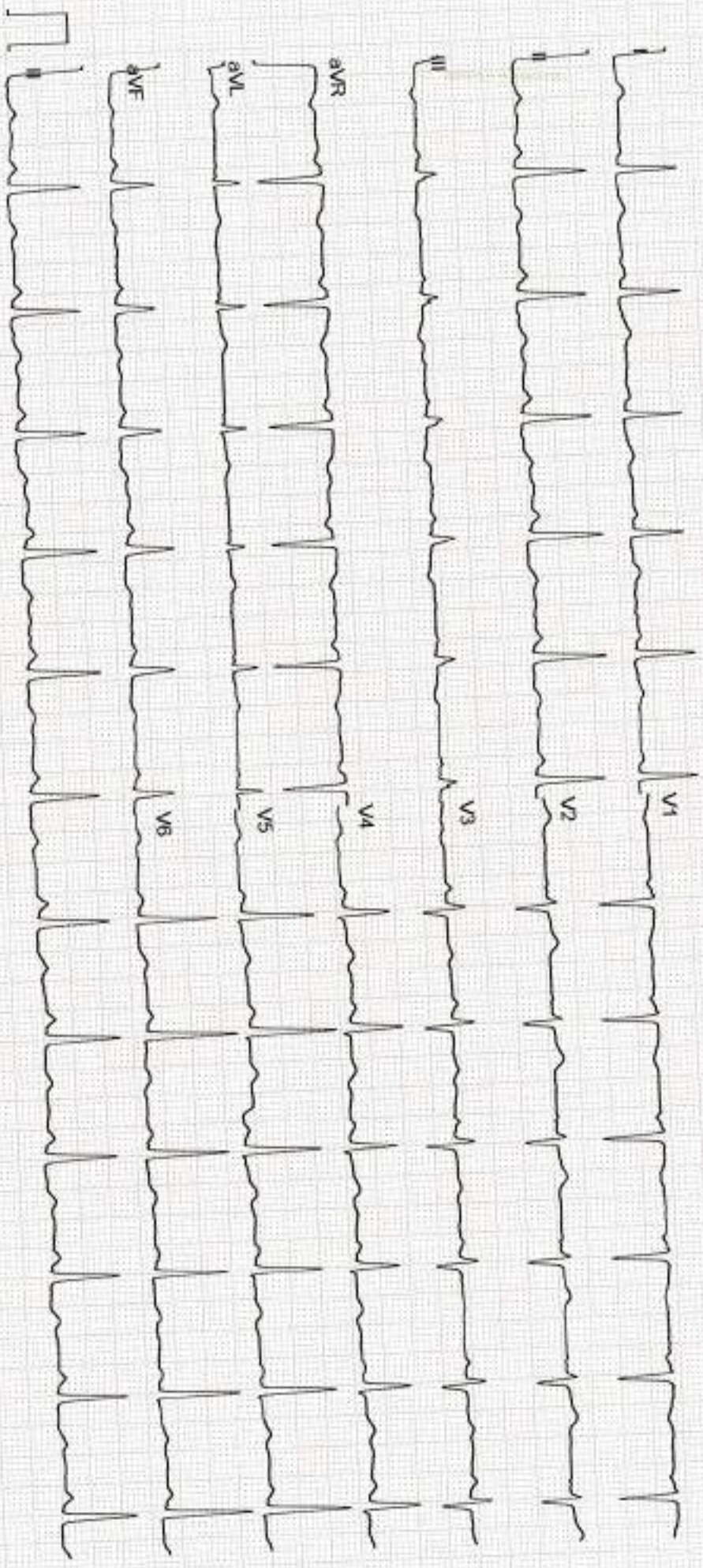
Mrs Jaya Baby I  
ID: cele.53368

36 Years 184 cm Female  
75.2 kg

19.02.2024 9:55:31  
Apollo Clinic  
J.P. Nagar  
Bangalore

QRS 84 ms  
QT/QTcBaz 404 / 448 ms  
PR 136 ms  
P 106 ms  
RR/pp 808 / 810 ms  
P/ORS/T 49 / 40 / 10 degrees

Normal sinus rhythm  
Normal ECG



GE MAC2000 1.1 12SL™ V241

25 mm/s 10 mm/mV

ADS 0.56-20 Hz 50 Hz 2x5x6 25\_R1

Unconfirmed



<b>Patient Name</b>	: Mrs. LAYA BABY T	<b>Age/Gender</b>	: 36 Y/F
<b>UHID/MR No.</b>	: CELE.0000053368	<b>OP Visit No</b>	: CJPNOPV188571
<b>Sample Collected on</b>	:	<b>Reported on</b>	: 19-02-2024 17:31
<b>LRN#</b>	: RAD2240896	<b>Specimen</b>	:
<b>Ref Doctor</b>	: SELF		
<b>Emp/Auth/TPA ID</b>	: 919066596246		

**DEPARTMENT OF RADIOLOGY**

**ULTRASOUND - WHOLE ABDOMEN**

**LIVER** : Normal in size(13.3cm) and echotexture. No focal lesion seen.  
No intra hepatic biliary / venous radicular dilation.  
CBD and Main Portal vein appear normal.

**GALL BLADDER** : Partially distended. Normal in internal contents. Wall Thickness is normal.

**SPLEEN** : Normal in size(9.0cm) and echotexture. No focal lesion was seen.

**PANCREAS** : Normal to the visualized extent.

**KIDNEYS** : Both kidneys are normal in size, shape and outlines Cortico medullary delineation is normal. No Hydronephrosis / No calculi.

Right kidney measures: 9.3 x 4.3cm.

Left kidney measures : 10.5 x 4.0cm.

**URINARY BLADDER** : Well distended. Normal in internal contents. Wall thickness is normal.

**UTERUS** : Normal in size and echotexture. It measures : 8.8 x 4.3 x 4.6cm. Uniform myometrial echoes are normal. Endometrial thickness measuring- 8.0mm.

No focal lesion was noted.

**OVARIES** : Both ovaries are normal in size, shape and echotexture.

Right ovary measures : 2.2 x 2.7cm.

Left ovary measures : 1.7 x 2.7cm.

No free fluid is seen in the peritoneum. No lymphadenopathy.



**Patient Name** : Mrs. LAYA BABY T

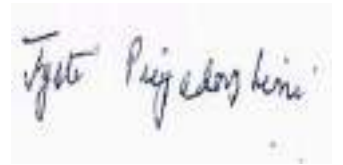
**Age/Gender** : 36 Y/F

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## **IMPRESSION : NORMAL STUDY.**

Please Note :No preparation done before scanning.

(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.



**Dr. JYOTI PRIYADARSHINI**  
MBBS, MD

Patient Name : Mrs.LAYA BABY T	Collected : 19/Feb/2024 08:24AM
Age/Gender : 36 Y 9 M 21 D/F	Received : 19/Feb/2024 12:37PM
UHID/MR No : CELE.0000053368	Reported : 19/Feb/2024 02:22PM
Visit ID : CJPNOPV188571	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 919066596246	

**DEPARTMENT OF HAEMATOLOGY**

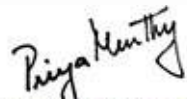
**ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324**

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>HEMOGRAM , WHOLE BLOOD EDTA</b>				
<b>HAEMOGLOBIN</b>	12.8	g/dL	12-15	Spectrophotometer
PCV	37.80	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.42	Million/cu.mm	3.8-4.8	Electrical Impedance
MCV	85.6	fL	83-101	Calculated
MCH	29	pg	27-32	Calculated
MCHC	33.9	g/dL	31.5-34.5	Calculated
R.D.W	<b>14.2</b>	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	6,460	cells/cu.mm	4000-10000	Electrical Impedance
<b>DIFFERENTIAL LEUCOCYTIC COUNT (DLC)</b>				
NEUTROPHILS	58.4	%	40-80	Electrical Impedance
LYMPHOCYTES	30.2	%	20-40	Electrical Impedance
EOSINOPHILS	4.3	%	1-6	Electrical Impedance
MONOCYTES	6.5	%	2-10	Electrical Impedance
BASOPHILS	0.6	%	<1-2	Electrical Impedance
<b>ABSOLUTE LEUCOCYTE COUNT</b>				
NEUTROPHILS	3772.64	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	1950.92	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	277.78	Cells/cu.mm	20-500	Calculated
MONOCYTES	419.9	Cells/cu.mm	200-1000	Calculated
BASOPHILS	38.76	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	1.93		0.78- 3.53	Calculated
<b>PLATELET COUNT</b>	396000	cells/cu.mm	150000-410000	Electrical impedance
<b>ERYTHROCYTE SEDIMENTATION RATE (ESR)</b>	<b>42</b>	mm at the end of 1 hour	0-20	Modified Westgren method
<b>PERIPHERAL SMEAR</b>				

RBCs: are normocytic normochromic



Dr. Shobha Emmanuel  
M.B.B.S., M.D (Pathology)  
Consultant Pathologist



Dr. Priya Murthy  
M.B.B.S., M.D (Pathology)  
Consultant Pathologist



SIN No: BED240042436

This test has been performed at Apollo Health & Lifestyle Ltd, RRL BANGALORE Laboratory

THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFESTYLE LIMITED- RRL BANGALORE

**Apollo Health and Lifestyle Limited** | CIN - U85110TG2000PLC115811  
 Regd. Office: 1-10-62/63, Anshika Raghupathi Chambers, 9th Floor, Secunderabad, Hyderabad, Telangana - 500 018 |  
[www.apollohli.com](http://www.apollohli.com) | Email ID: [enquiry@apollohli.com](mailto:enquiry@apollohli.com), Ph No: 043-4884 7777, Fax No: 4884 7744

APOLLO CLINICS NETWORK

Telangana: Hyderabad | U.S. Rao Nagar | Charada Nagar | Kondapur | Nallakunta | Nizampet | Marikonda | Uppal | Andhra Pradesh: Vizag | Seethamma Peta | Karnataka: Bangalore | Basavanagudi | Bellandur | Electronics City | Hebbal | HSR Layout | Indira Nagar | JP Nagar | Kandrahal | Koramangala | Sarjapur Road | Mysore | TN: Chennai | Anna Nagar | Kotturupalli | Moolappai | T. Nagar | Vaidyanathan | Kerala: Kottayam | Maharashtra: Pune | Aurangabad | Nigdi | Poonhill | Vinay Nagar | Madhya Pradesh: Ghazipur | Indore | Gujarat: Ahmedabad | Odisha: Bhubaneswar | Karnataka: Mysore | Court Road | Haryana: Panipat | Railway Station Road

Address:  
33/3/16/122, Dodda Lakshmi Village, Woodland Main Road,  
Newlands Nagar, Electronic City, Bangalore,  
Kavathur - 560038

**1860 500 7788**  
www.apolloclinic.com

Patient Name : Mrs.LAYA BABY T  
Age/Gender : 36 Y 9 M 21 D/F  
UHID/MR No : CELE.0000053368  
Visit ID : CJPNOPV188571  
Ref Doctor : Dr.SELF  
Emp/Auth/TPA ID : 919066596246

Collected : 19/Feb/2024 08:24AM  
Received : 19/Feb/2024 12:37PM  
Reported : 19/Feb/2024 02:22PM  
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

WBCs: are normal in total number with normal distribution and morphology.

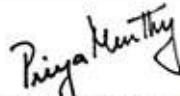
PLATELETS: appear adequate in number.

HEMOPARASITES: negative

**IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE**



Dr. Shobha Emmanuel  
M.B.B.S, M.D (Pathology)  
Consultant Pathologist



Dr. Priya Murthy  
M.B.B.S, M.D (Pathology)  
Consultant Pathologist



SIN No: BED240042436

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www.apollohli.com | Email ID: enquiry@apollohli.com, Ph No: 040-4884 7777, Fax No: 4884 7744

APOLLO CLINICS NETWORK

Telangana: Hyderabad | U.S. Rao Nagar | Charada Nagar | Kondapur | Nallakunta | Nizampet | Marikonda | Uppal | Andhra Pradesh: Vijay | Seshamma Petal | Karnataka: Bangalore | Basavanagudi | Bellandur | Electronic City | Hebbal | HSR Layout | Indira Nagar | JP Nagar | Kandrajohalli | Koramangala | Sarjapur Road | Mysore | W. Mallur | Tamil Nadu: Chennai | Anna Nagar | Kotturupalli | Moolappai | T. Nagar | Vileparakkam | Velachery | Maharashtra: Pune | Aurang | Nigdi | Pashchim | Viman Nagar | Mumbai | Uttar Pradesh: Ghaziabad | Indirapuram | Gujarat: Ahmedabad | Satellite | Punjab: Amritsar | Court Road | Haryana: Panipat | Railway Station Road

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32/316/123, Doddaballapur Village, Woodlath Main Road,  
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Karnataka - 560038

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www.apolloclinic.com

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Age/Gender : 36 Y 9 M 21 D/F	Received : 19/Feb/2024 12:37PM
UHID/MR No : CELE.0000053368	Reported : 19/Feb/2024 03:13PM
Visit ID : CJPNOPV188571	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 919066596246	

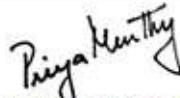
**DEPARTMENT OF HAEMATOLOGY**

**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			Microplate Hemagglutination
Rh TYPE	Positive			Microplate Hemagglutination



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 Karnataka - 560038

 **1860 500 7788**  
[www.apolloclinic.com](http://www.apolloclinic.com)

Patient Name : Mrs.LAYA BABY T	Collected : 19/Feb/2024 08:24AM
Age/Gender : 36 Y 9 M 21 D/F	Received : 19/Feb/2024 01:46PM
UHID/MR No : CELE.0000053368	Reported : 19/Feb/2024 05:32PM
Visit ID : CJPNOPV188571	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 919066596246	

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	93	mg/dL	70-100	HEXOKINASE

Comment:

As per American Diabetes Guidelines, 2023

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

Note:

- The diagnosis of Diabetes requires a fasting plasma glucose of > 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
GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	94	mg/dL	70-140	HEXOKINASE

Comment:

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

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

Test Name	Result	Unit	Bio. Ref. Range	Method
HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA				
HBA1C, GLYCATED HEMOGLOBIN	6.0	%		HPLC




DR.SHIVARAJA SHETTY  
M.B.B.S,M.D(Biochemistry)  
CONSULTANT BIOCHEMIST

SIN No:EDT240018756

This test has been performed at Apollo Health & Lifestyle Ltd, RRL BANGALORE Laboratory

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Emp/Auth/TPA ID : 919066596246	

**DEPARTMENT OF BIOCHEMISTRY**

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

ESTIMATED AVERAGE GLUCOSE (eAG)	126	mg/dL	Calculated
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**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.
- 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)




**DR.SHIVARAJA SHETTY**  
M.B.B.S.,M.D(Biochemistry)  
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Emp/Auth/TPA ID : 919066596246	

**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	<b>231</b>	mg/dL	<200	CHO-POD
TRIGLYCERIDES	<b>151</b>	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	59	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	<b>172</b>	mg/dL	<130	Calculated
LDL CHOLESTEROL	<b>141.9</b>	mg/dL	<100	Calculated
VLDL CHOLESTEROL	<b>30.2</b>	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.92		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 400 mg/dL. When Triglycerides are more than 400 mg/dL LDL cholesterol is a direct measurement.



**DR.SHIVARAJA SHETTY**  
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SIN No:SE04633992

This test has been performed at Apollo Health & Lifestyle Ltd, RRL BANGALORE Laboratory

THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFESTYLE LIMITED- RRL BANGALORE



Patient Name : Mrs.LAYA BABY T	Collected : 19/Feb/2024 08:24AM
Age/Gender : 36 Y 9 M 21 D/F	Received : 19/Feb/2024 12:58PM
UHID/MR No : CELE.0000053368	Reported : 19/Feb/2024 02:16PM
Visit ID : CJPNOPV188571	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 919066596246	

**DEPARTMENT OF BIOCHEMISTRY**

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



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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>LIVER FUNCTION TEST (LFT) , SERUM</b>				
BILIRUBIN, TOTAL	0.59	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.10	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.49	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	13	U/L	<35	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	15.0	U/L	<35	IFCC
ALKALINE PHOSPHATASE	55.00	U/L	30-120	IFCC
PROTEIN, TOTAL	7.46	g/dL	6.6-8.3	Biuret
ALBUMIN	4.05	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.41	g/dL	2.0-3.5	Calculated
A/G RATIO	1.19		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 > 1In 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.




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Emp/Auth/TPA ID : 919066596246	

**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	0.69	mg/dL	0.51-0.95	Jaffe's, Method
UREA	22.50	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	10.5	mg/dL	8.0 - 23.0	Calculated
URIC ACID	5.13	mg/dL	2.6-6.0	Uricase PAP
CALCIUM	9.90	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	4.08	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	137	mmol/L	136-146	ISE (Indirect)
POTASSIUM	4.7	mmol/L	3.5-5.1	ISE (Indirect)
CHLORIDE	104	mmol/L	101-109	ISE (Indirect)



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**DEPARTMENT OF BIOCHEMISTRY**

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

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>GAMMA GLUTAMYL TRANSEPTIDASE (GGT) , SERUM</b>	13.00	U/L	<38	IFCC




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Patient Name : Mrs.LAYA BABY T	Collected : 19/Feb/2024 08:24AM
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Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 919066596246	

**DEPARTMENT OF IMMUNOLOGY**

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

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM</b>				
TRI-iodothyronine (T3, TOTAL)	0.87	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	7.73	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	2.053	µIU/mL	0.34-5.60	CLIA

**Comment:**

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

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

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




**DR.SHIVARAJA SHETTY**  
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Patient Name : Mrs.LAYA BABY T	Collected : 19/Feb/2024 08:24AM
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Visit ID : CJPNOPV188571	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 919066596246	

**DEPARTMENT OF IMMUNOLOGY**

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




**DR.SHIVARAJA SHETTY**  
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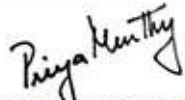
**DEPARTMENT OF CLINICAL PATHOLOGY**

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

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>COMPLETE URINE EXAMINATION (CUE) , URINE</b>				
<b>PHYSICAL EXAMINATION</b>				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pH	<b>8.0</b>		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	1.010		1.002-1.030	Bromothymol Blue
<b>BIOCHEMICAL EXAMINATION</b>				
URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE		NEGATIVE	GLUCOSE OXIDASE
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING REACTION
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	SODIUM NITRO PRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	MODIFIED EHRlich REACTION
BLOOD	NEGATIVE		NEGATIVE	Peroxidase
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	LEUCOCYTE ESTERASE
<b>CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY</b>				
PUS CELLS	1-2	/hpf	0-5	Microscopy
EPITHELIAL CELLS	2-3	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY



Dr. Shobha Emmanuel  
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SIN No: UR2286067

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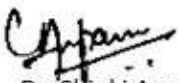
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Patient Name : Mrs.LAYA BABY T	Collected : 19/Feb/2024 10:46AM
Age/Gender : 36 Y 9 M 21 D/F	Received : 19/Feb/2024 04:51PM
UHID/MR No : CELE.0000053368	Reported : 19/Feb/2024 05:34PM
Visit ID : CJPNOPV188571	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 919066596246	

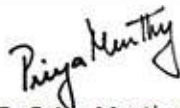
**DEPARTMENT OF CLINICAL PATHOLOGY**

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

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



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Consultant Pathologist



Dr. Priya Murthy  
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Consultant Pathologist



SIN No:UPP016610

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Patient Name : Mrs.LAYA BABY T	Collected : 19/Feb/2024 08:24AM
Age/Gender : 36 Y 9 M 21 D/F	Received : 19/Feb/2024 01:27PM
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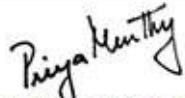
**DEPARTMENT OF CLINICAL PATHOLOGY**

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

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



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SIN No: UF010615

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Address:  
 32/316/123, Doddaballapur Village, Woodside Main Road,  
 Newlands Nagar, Electronic City, Bangalore,  
 Karnataka - 560038

 **1860 500 7788**  
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Patient Name : Mrs.LAYA BABY T	Collected : 19/Feb/2024 12:21PM
Age/Gender : 36 Y 9 M 21 D/F	Received : 20/Feb/2024 01:16PM
UHID/MR No : CELE.0000053368	Reported : 21/Feb/2024 06:01PM
Visit ID : CJPNOPV188571	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 919066596246	

**DEPARTMENT OF CYTOLOGY**

**LBC PAP TEST (PAPSURE) , CERVICAL BRUSH SAMPLE**

	<b>CYTOLOGY NO.</b>	3508/24
<b>I</b>	<b>SPECIMEN</b>	
<b>a</b>	SPECIMEN ADEQUACY	ADEQUATE
<b>b</b>	<b>SPECIMEN TYPE</b>	LIQUID-BASED PREPARATION (LBC)
	SPECIMEN NATURE/SOURCE	CERVICAL SMEAR
<b>c</b>	ENDOCERVICAL-TRANSFORMATION ZONE	ABSENT
<b>d</b>	COMMENTS	SATISFACTORY FOR EVALUATION
<b>II</b>	<b>MICROSCOPY</b>	Superficial and intermediate squamous epithelial cells with benign morphology.  Inflammatory cells, predominantly neutrophils.  Negative for intraepithelial lesion/ malignancy
<b>III</b>	<b>RESULT</b>	
<b>a</b>	<b>EPITHEIAL CELL</b>	
	SQUAMOUS CELL ABNORMALITIES	NOT SEEN
	GLANDULAR CELL ABNORMALITIES	NOT SEEN
<b>b</b>	<b>ORGANISM</b>	NIL
<b>IV</b>	<b>INTERPRETATION</b>	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.A. Kalyan Rao  
M.B.B.S., M.D(Pathology)  
Consultant Pathologist



SIN No:CS074719

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

THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFESTYLE LIMITED- GRL BANGALORE

**Apollo Health and Lifestyle Limited** | CIN - U85110TG2000PLC115811  
Regd. Office: 1-10-62/63, Arshika Raghupathi Chambers, 9th Floor, Begumpet, Hyderabad, Telangana - 500 016 |  
www.apollohli.com | Email ID: enquiry@apollohli.com, Ph No: 040-4884 7777, Fax No: 4884 7744

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