







| Patient Name | : Mrs.ARUNA M | Collected | : 08/Jul/2023 09:35AM |
|-----------------|-------------------|--------------|-------------------------------|
| Age/Gender | : 39 Y 6 M 0 D/F | Received | : 08/Jul/2023 06:17PM |
| UHID/MR No | : CUPP.0000080196 | Reported | : 08/Jul/2023 08:23PM |
| Visit ID | : CUPPOPV118953 | Status | : Final Report |
| Ref Doctor | : Dr.SELF | Sponsor Name | : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID | : 82277031292 | | |

DEPARTMENT OF HAEMATOLOGY

| ARCOFEMI - MEDIWHEEL - FULL BOD | Y ANNUAL PLUS CI | | ED - FEMALE - TMT - P | AN INDIA - FY2324 |
|---------------------------------|------------------|------|-----------------------|-------------------|
| Test Name | Result | Unit | Bio. Ref. Range | Method |

| HAEMOGLOBIN | 12.1 | g/dL | 12-15 | Spectrophotometer |
|--|---------|----------------------------|---------------|--------------------------------|
| PCV | 36.20 | % | 36-46 | Electronic pulse & Calculation |
| RBC COUNT | 4.16 | Million/cu.mm | 3.8-4.8 | Electrical Impedence |
| MCV | 86.9 | fL | 83-101 | Calculated |
| MCH | 29.1 | pg | 27-32 | Calculated |
| MCHC | 33.6 | g/dL | 31.5-34.5 | Calculated |
| R.D.W | 16.4 | % | 11.6-14 | Calculated |
| TOTAL LEUCOCYTE COUNT (TLC) | 7,110 | cells/cu.mm | 4000-10000 | Electrical Impedanc |
| DIFFERENTIAL LEUCOCYTIC COUNT (D |)LC) | | | |
| NEUTROPHILS | 57.2 | % | 40-80 | Electrical Impedanc |
| LYMPHOCYTES | 35.2 | % | 20-40 | Electrical Impedanc |
| EOSINOPHILS | 2 | % | 1-6 | Electrical Impedanc |
| MONOCYTES | 5.3 | % | 2-10 | Electrical Impedanc |
| BASOPHILS | 0.3 | % | <1-2 | Electrical Impedanc |
| ABSOLUTE LEUCOCYTE COUNT | | | | |
| NEUTROPHILS | 4066.92 | Cells/cu.mm | 2000-7000 | Electrical Impedanc |
| LYMPHOCYTES | 2502.72 | Cells/cu.mm | 1000-3000 | Electrical Impedanc |
| EOSINOPHILS | 142.2 | Cells/cu.mm | 20-500 | Electrical Impedanc |
| MONOCYTES | 376.83 | Cells/cu.mm | 200-1000 | Electrical Impedanc |
| BASOPHILS | 21.33 | Cells/cu.mm | 0-100 | Electrical Impedanc |
| PLATELET COUNT | 291000 | cells/cu.mm | 150000-410000 | Electrical impedenc |
| ERYTHROCYTE SEDIMENTATION RATE (ESR) | 17 | mm at the end of 1 hour | 0-20 | Modified Westergre |
| ERIPHERAL SMEAR | | | | |
| BC NORMOCYTIC NORMOCHROMIC /BC WITHIN NORMAL LIMITS LATELETS ARE ADEQUATE ON SMEAR O HEMOPARASITES SEEN | | | | |

IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE





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SIN No:BED230157825

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Address: H. No 6-48/3, Peerzadiguda Panchayat, Boduppal, R R District., Uppal, Hyderabad, Telangana, India - 500039









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| Visit ID | : CUPPOPV118953 | | Status | : Final Report | |
| Ref Doctor | : Dr.SELF | | Sponsor Name | : ARCOFEMI HEALTHCA | ARE LIMITED |
| Emp/Auth/TPA ID | : 82277031292 | | | | |
| DEPARTMENT OF HAEMATOLOGY | | | | | |
| ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - TMT - PAN INDIA - FY2324 | | | | | |
| Test Name Result | | | Unit | Bio. Ref. Range | Method |

| BLOOD GROUP ABO AND RH FACTOR, WHOLE BLO | OOD-EDTA |
|--|----------|
|--|----------|

| BLOOD GROUP TYPE | В | | Microplate technology | |
|------------------|----------|--|-----------------------|--|
| Rh TYPE | Positive | | Microplate technology | |

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|---|-------------------|--------------|-------------------------------|--|
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| UHID/MR No | : CUPP.0000080196 | Reported | : 08/Jul/2023 07:32PM | |
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| DEPARTMENT OF BIOCHEMISTRY | | | | |
| ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - TMT - PAN INDIA - FY2324 | | | | |

Test Name Unit Result Bio. Ref. Range

Method

| GLUCOSE, FASTING , NAF PLASMA | 90 | mg/dL | 70-100 | GOD - POD |
|-------------------------------|----|-------|--------|-----------|
| | | | | |
| Comment: | | | | |

| As per American Diabetes Guidelines | | | | |
|-------------------------------------|----------------|--|--|--|
| Fasting Glucose Values in mg/d L | Interpretation | | | |
| <100 mg/dL | Normal | | | |
| 100-125 mg/dL | Prediabetes | | | |
| ≥126 mg/dL | Diabetes | | | |

| ~ | | | | |
|--------------------------------|----|-------|--------|------------|
| GLUCOSE, POST PRANDIAL (PP), 2 | 95 | mg/dL | 70-140 | HEXOKINASE |
| HOURS , NAF PLASMA | | 10 | | |

Comment:

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

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

Ref: Marks medical biochemistry and clinical approach

| HBA1C, GLYCATED HEMOGLOBIN , | 5.7 | % | HPLC |
|----------------------------------|-----|-------|------------|
| WHOLE BLOOD-EDTA | | | |
| ESTIMATED AVERAGE GLUCOSE (eAG), | 117 | mg/dL | Calculated |
| WHOLE BLOOD-EDTA | | - | |

Comment:

Reference Range as per American Diabetes Association (ADA):

| REFERENCE GROUP | HBA1C IN % | |
|-------------------------------|------------|--|
| NON DIABETIC ADULTS >18 YEARS | <5.7 | |

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ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - TMT - PAN INDIA - FY2324 Test Name Result Unit Bio. Ref. Range Method

| AT RISK (PREDIABETES) | 5.7-6.4 |
|--------------------------|------------|
| DIAGNOSING DIABETES | ≥ 6.5 |
| DIABETICS | |
| · EXCELLENT CONTROL | 6 – 7 |
| • FAIR TO GOOD CONTROL | 7 – 8 |
| · UNSATISFACTORY CONTROL | 8 - 10 |
| · POOR CONTROL | >10 |

Note: Dietary preparation or fasting is not required.

- 1. A1C test should be performed at least two times a year in patients who are meeting treatment goals (and who have stable glycemic control).
- 2. Lowering A1C to below or around 7% has been shown to reduce microvascular and neuropathic complications of type 1 and type 2 diabetes. When mean annual HbA1c is <1.1 times ULN (upper limit of normal), renal and retinal complications are rare, but complications occur in >70% of cases when HbA1c is >1.7 times ULN.
- 3. Falsely low HbA1c (below 4%) may be observed in patients with clinical conditions that shorten erythrocyte life span or decrease mean erythrocyte age. HbA1c may not accurately reflect glycemic control when clinical conditions that affect erythrocyte survival are present. Fructosamine may be used as an alternate measurement of glycemic control

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H. No 6-48/3.

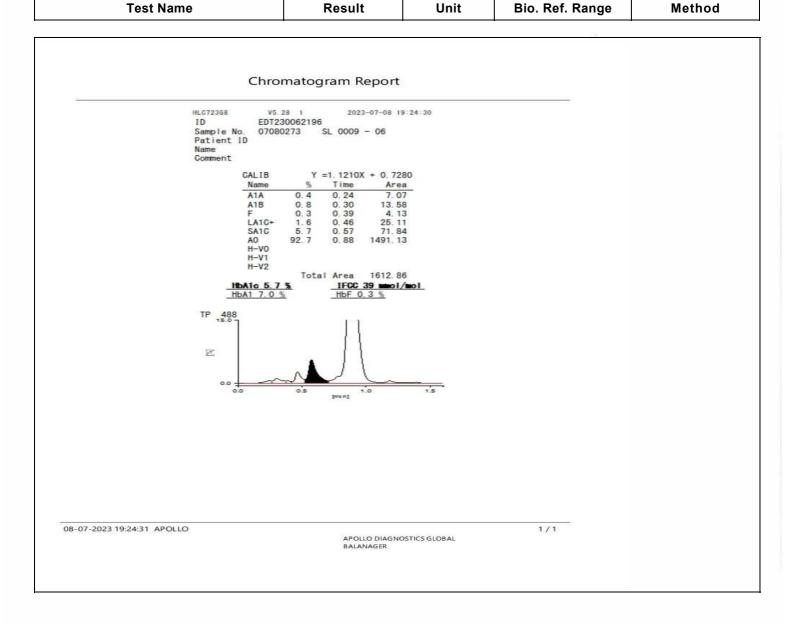








| DEPARTMENT OF BIOCHEMISTRY ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - TMT - PAN INDIA - FY2324 | | | |
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|---------------------------------|------------------|-------------|------------------------|-------------------|
| Test Name | Result | Unit | Bio. Ref. Range | Method |

LIPID PROFILE, SERUM

| TOTAL CHOLESTEROL | 278 | mg/dL | <200 | CHO-POD |
|---------------------|-------|-------|--------|-------------------------------|
| TRIGLYCERIDES | 141 | mg/dL | <150 | GPO-POD |
| HDL CHOLESTEROL | 57 | mg/dL | 40-60 | Enzymatic Immunoinhibition |
| NON-HDL CHOLESTEROL | 221 | mg/dL | <130 | Calculated |
| LDL CHOLESTEROL | 192.8 | mg/dL | <100 | Calculated |
| VLDL CHOLESTEROL | 28.2 | mg/dL | <30 | Calculated |
| CHOL / HDL RATIO | 4.88 | | 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 | \geq 240 | |
| TRIGLYCERIDES | <150 | 150 - 199 | 200 - 499 | \geq 500 |
| LDL | Optimal < 100 Near Optimal 100-129 | 130 - 159 | 160 - 189 | ≥ 190 |
| HDL | ≥ 60 | | | |
| NON-HDL CHOLESTEROL | Optimal <130; Above Optimal 130-159 | 160-189 | 190-219 | >220 |

Measurements in the same patient can show physiological and analytical variations. NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.



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| LIVER FUNCTION TEST (LFT), SERUM | | | | |
|--|-------|-------|---------|-----------------------|
| BILIRUBIN, TOTAL | 0.45 | mg/dL | 0.3–1.2 | DPD |
| BILIRUBIN CONJUGATED (DIRECT) | 0.07 | mg/dL | <0.2 | DPD |
| BILIRUBIN (INDIRECT) | 0.38 | mg/dL | 0.0-1.1 | Dual Wavelength |
| ALANINE AMINOTRANSFERASE (ALT/SGPT) | 19 | U/L | <35 | IFCC |
| ASPARTATE AMINOTRANSFERASE (AST/SGOT) | 23.0 | U/L | <35 | IFCC |
| ALKALINE PHOSPHATASE | 56.00 | U/L | 30-120 | IFCC |
| PROTEIN, TOTAL | 7.52 | g/dL | 6.6-8.3 | Biuret |
| ALBUMIN | 4.62 | g/dL | 3.5-5.2 | BROMO CRESOL GREEN |
| GLOBULIN | 2.90 | g/dL | 2.0-3.5 | Calculated |
| A/G RATIO | 1.59 | | 0.9-2.0 | Calculated |

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| RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT), SERUM | | | | | | |
|---|-------|--------|-------------|-----------------------------|--|--|
| CREATININE | 0.81 | mg/dL | 0.66 - 1.09 | Modified Jaffe, Kinetic | | |
| UREA | 26.20 | mg/dL | 17-43 | GLDH, Kinetic Assay | | |
| BLOOD UREA NITROGEN | 12.2 | mg/dL | 8.0 - 23.0 | Calculated | | |
| URIC ACID | 5.34 | mg/dL | 2.6-6.0 | Uricase PAP | | |
| CALCIUM | 10.24 | mg/dL | 8.8-10.6 | Arsenazo III | | |
| PHOSPHORUS, INORGANIC | 3.96 | mg/dL | 2.5-4.5 | Phosphomolybdate Complex | | |
| SODIUM | 138 | mmol/L | 136–146 | ISE (Indirect) | | |
| POTASSIUM | 4.4 | mmol/L | 3.5–5.1 | ISE (Indirect) | | |
| CHLORIDE | 103 | mmol/L | 101–109 | ISE (Indirect) | | |

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Method

| Patient Name | : Mrs.ARUNA M | Collected | : 08/Jul/2023 09:35AM | |
|---|-------------------|--------------|-------------------------------|--|
| Age/Gender | : 39 Y 6 M 0 D/F | Received | : 08/Jul/2023 06:47PM | |
| UHID/MR No | : CUPP.0000080196 | Reported | : 08/Jul/2023 07:41PM | |
| Visit ID | : CUPPOPV118953 | Status | : Final Report | |
| Ref Doctor | : Dr.SELF | Sponsor Name | : ARCOFEMI HEALTHCARE LIMITED | |
| Emp/Auth/TPA ID | : 82277031292 | | | |
| DEPARTMENT OF BIOCHEMISTRY | | | | |
| ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - TMT - PAN INDIA - FY2324 | | | | |

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

| GAMMA GLUTAMYL TRANSPEPTIDASE | 24.00 | U/L | <38 | IFCC |
|-------------------------------|-------|-----|-----|------|
| (GGT), SERUM | | | | |

Page 9 of 13



SIN No:SE04417180 This test has been performed at Apollo Health & Lifestyle Ltd, Global Reference Laboratory,Hyderabad

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| DEPARTMENT OF IMMUNOLOGY | | | | |
|--------------------------|-------------------|--------------|-------------------------------|--|
| Emp/Auth/TPA ID | : 82277031292 | | | |
| Ref Doctor | : Dr.SELF | Sponsor Name | : ARCOFEMI HEALTHCARE LIMITED | |
| Visit ID | : CUPPOPV118953 | Status | : Final Report | |
| UHID/MR No | : CUPP.0000080196 | Reported | : 08/Jul/2023 07:47PM | |
| Age/Gender | : 39 Y 6 M 0 D/F | Received | : 08/Jul/2023 06:47PM | |
| Patient Name | : Mrs.ARUNA M | Collected | : 08/Jul/2023 09:35AM | |

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - TMT - PAN INDIA - FY2324 **Test Name** Result Unit Bio. Ref. Range Method

THYROID PROFILE TOTAL (T3, T4, TSH), SERUM

| TRI-IODOTHYRONINE (T3, TOTAL) | 1.09 | ng/mL | 0.87-1.78 | CLIA |
|--------------------------------------|-------|--------|------------|------|
| THYROXINE (T4, TOTAL) | 10.08 | µg/dL | 6.09-12.23 | CLIA |
| THYROID STIMULATING HORMONE (TSH) | 1.597 | µIU/mL | 0.38-5.33 | CLIA |

Comment:

Serum TSH concentrations exhibit a diurnal variation with the peak occurring during the night and the nadir occurring between 10 a.m. and 4 p.m.In primary hypothyroidism, thyroid-stimulating hormone (TSH) levels will be elevated. In primary hyperthyroidism, TSH levels will be low. Elevated or low TSH in the context of normal free thyroxine is often referred to as subclinical hypo- or hyperthyroid-ism, respectively. Physiological rise in Total T3 / T4 levels is seen in pregnancy and in patients on steroid therapy.

Recommended test for T3 and T4 is unbound fraction or free levels as it is metabolically active. Note:

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





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SIN No:SPL23098082

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| DEPARTMENT OF CLINICAL PATHOLOGY | | | | |
|----------------------------------|-------------------|--------------|-------------------------------|--|
| Emp/Auth/TPA ID | : 82277031292 | | | |
| Ref Doctor | : Dr.SELF | Sponsor Name | : ARCOFEMI HEALTHCARE LIMITED | |
| Visit ID | : CUPPOPV118953 | Status | : Final Report | |
| UHID/MR No | : CUPP.0000080196 | Reported | : 08/Jul/2023 09:44PM | |
| Age/Gender | : 39 Y 6 M 0 D/F | Received | : 08/Jul/2023 08:41PM | |
| Patient Name | : Mrs.ARUNA M | Collected | : 08/Jul/2023 09:35AM | |

| ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - TMT - PAN INDIA - FY2324 | | | | | |
|---|--------|------|-----------------|--------|--|
| Test Name | Result | Unit | Bio. Ref. Range | Method | |

| COMPLETE URINE EXAMINATION (CUE |), URINE | | | |
|---------------------------------|-------------------|------|------------------|-------------------------------|
| PHYSICAL EXAMINATION | | | | |
| COLOUR | PALE YELLOW | | PALE YELLOW | Visual |
| TRANSPARENCY | CLEAR | | CLEAR | Visual |
| рН | 5.5 | | 5-7.5 | Bromothymol Blue |
| SP. GRAVITY | 1.010 | | 1.002-1.030 | Bromothymol Blue |
| 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 | SODIUM NITRO PRUSSIDE |
| UROBILINOGEN | NORMAL | | NORMAL | EHRLICH |
| BLOOD | NEGATIVE | | NEGATIVE | Peroxidase |
| NITRITE | NEGATIVE | | NEGATIVE | Diazotization |
| LEUCOCYTE ESTERASE | NEGATIVE | | NEGATIVE | PYRROLE HYDROLYSIS |
| CENTRIFUGED SEDIMENT WET MOUI | NT AND MICROSCOPY | | | |
| PUS CELLS | 2-3 | /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 |

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SIN No:UR2143161

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| Patient Name | : Mrs.ARUNA M | | Collected | : 08/Jul/2023 12:59PM | | |
|---|-------------------|------------------|---------------|-------------------------------|--------|--|
| Age/Gender | : 39 Y 6 M 0 D/F | | Received | : 08/Jul/2023 08:40PM | | |
| UHID/MR No | : CUPP.0000080196 | | Reported | : 09/Jul/2023 10:00AM | | |
| Visit ID | : CUPPOPV118953 | | Status | : Final Report | | |
| Ref Doctor | : Dr.SELF | | Sponsor Name | : ARCOFEMI HEALTHCARE LIMITED | | |
| Emp/Auth/TPA ID | : 82277031292 | | | | | |
| | DI | EPARTMENT OF CLI | INICAL PATHOL | .OGY | | |
| ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - TMT - PAN INDIA - FY2324 | | | | | | |
| Test Name Result | | | Unit | Bio. Ref. Range | Method | |

| URINE GLUCOSE(POST PRANDIAL) | NEGATIVE | NEGATIVE | Dipstick |
|------------------------------|----------|----------|----------|

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Telangana: Hyderabad (AS Rao Nagar | Chanda Nagar | Kondapur | Naliakunta | Nizampet | Manikonda | Uppal) Andhra Pradesh: Vizag (Seethamma Peta) Karnataka: Bangalore (Basavanagudi | Bellandur | Electronics City | Fraser Town | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli | Koramangala | Sarjapur Road) Mysore (VV Mohalla) Tamilnadu: Chennai (Annanagar | Kuturpuram | Mogappair | T Nagar | Valasaravakkam | Velachery) Maharashtra: Pune (Aundh | Nigdi Pradhikaran | Viman Nagar | Wanowrie) Uttar Pradesh: Ghazlabad (Indrapuram) Gujarat: Ahmedabad (Satellite) Punjab: Amritsar (Court Road) Haryana: Faridabad (Railway Station Road)









| Patient Name | : Mrs.ARUNA M | | Collected | : 08/Jul/2023 09:35AM | | |
|-----------------|---|-----------------|---------------|-------------------------------|--------|--|
| Age/Gender | : 39 Y 6 M 0 D/F | | Received | : 08/Jul/2023 08:41PM | | |
| UHID/MR No | : CUPP.0000080196 | | Reported | : 08/Jul/2023 09:44PM | | |
| Visit ID | : CUPPOPV118953 | | Status | : Final Report | | |
| Ref Doctor | : Dr.SELF | | Sponsor Name | : ARCOFEMI HEALTHCARE LIMITED | | |
| Emp/Auth/TPA ID | : 82277031292 | | | | | |
| | DI | EPARTMENT OF CL | INICAL PATHOL | .OGY | | |
| ARCOFEMI - N | ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - TMT - PAN INDIA - FY2324 | | | | | |
| Te | est Name | Result | Unit | Bio. Ref. Range | Method | |
| | | • | • | • | | |

URINE GLUCOSE(FASTING)

NEGATIVE

NEGATIVE Dipstick

Result/s to Follow: PERIPHERAL SMEAR

Cat

Dr.Shalini Singh M.B.B.S,M.D(Pathology) Consultant Pathologist

1 4.81 Dr.SRINIVAS N.S.NORI M.B.B.S, M.D(Pathology) CONSULTANT PATHOLOGY

*** End Of Report ***

Dr.R.SHALINI M.B.B.S,M.D(Pathology) **Consultant Pathologist**

Must

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

Page 13 of 13



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Address: H. No 6-48/3, Peerzadiguda Panchayat, Boduppal, R R District,, Uppal, Hyderabad, Telangana, India - 500





CERTIFICATE OF MEDICAL FITNESS

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Apollo Health and Liveszyle Limited

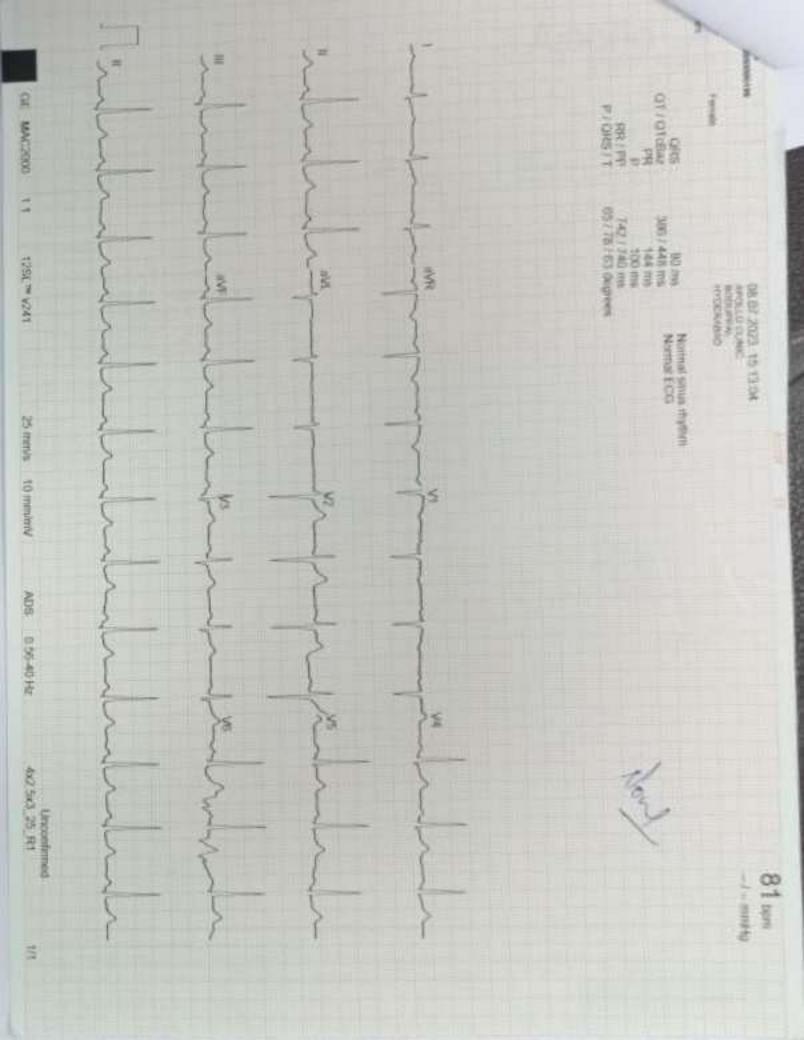
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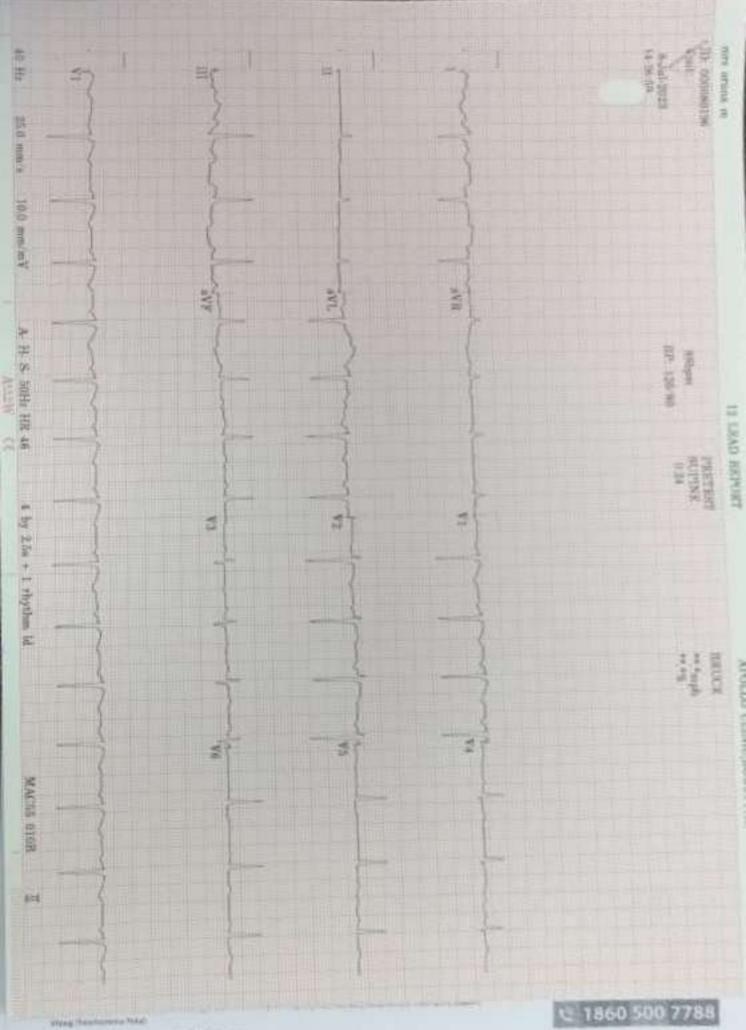
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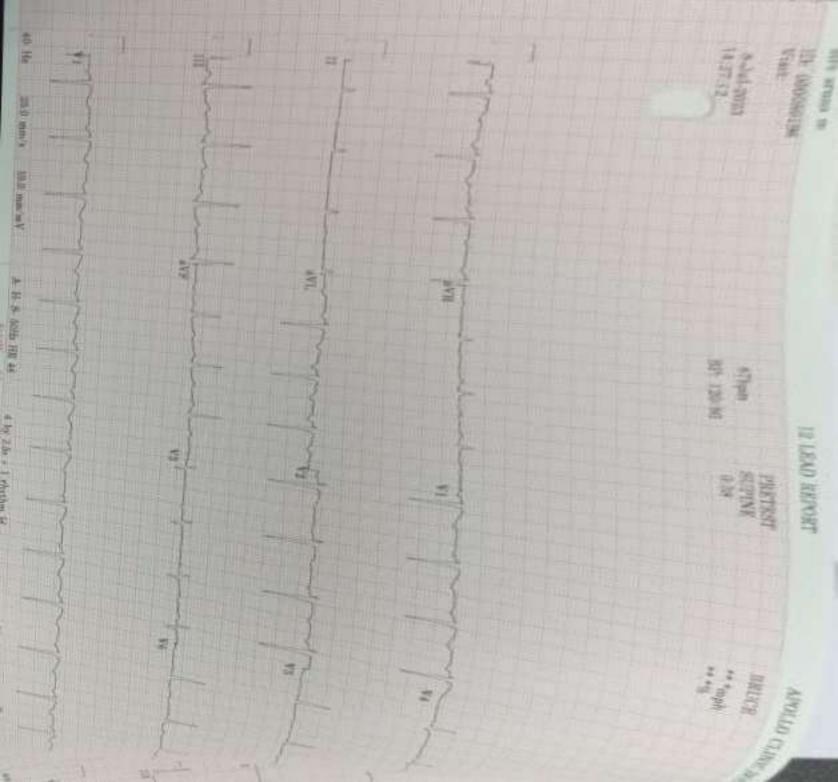
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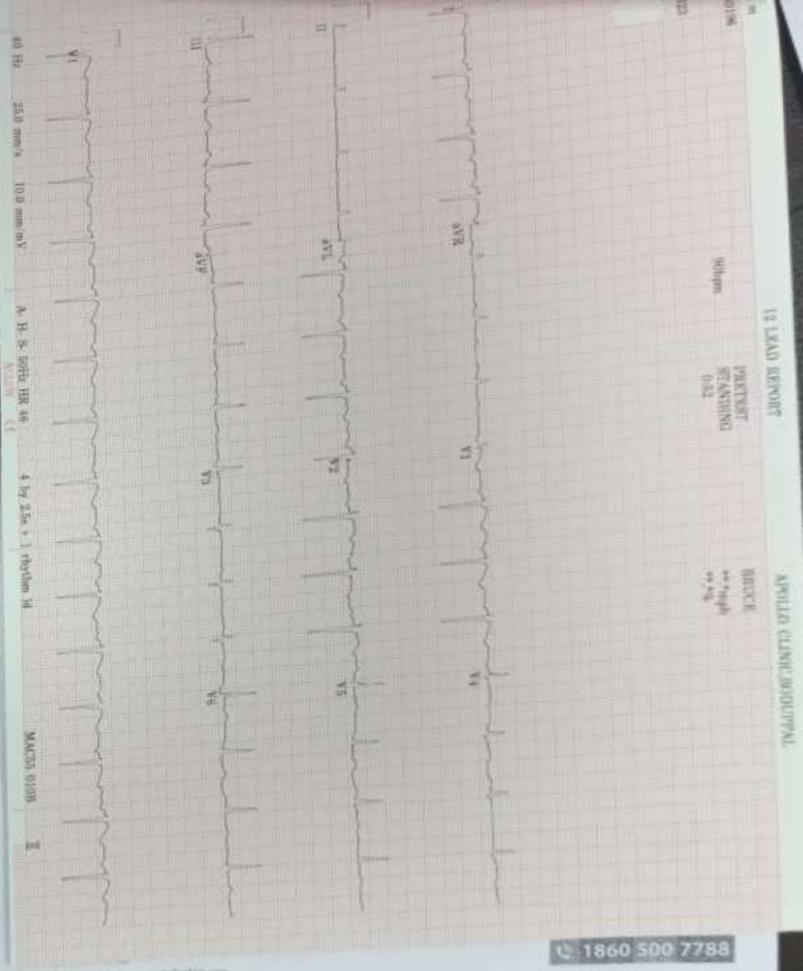
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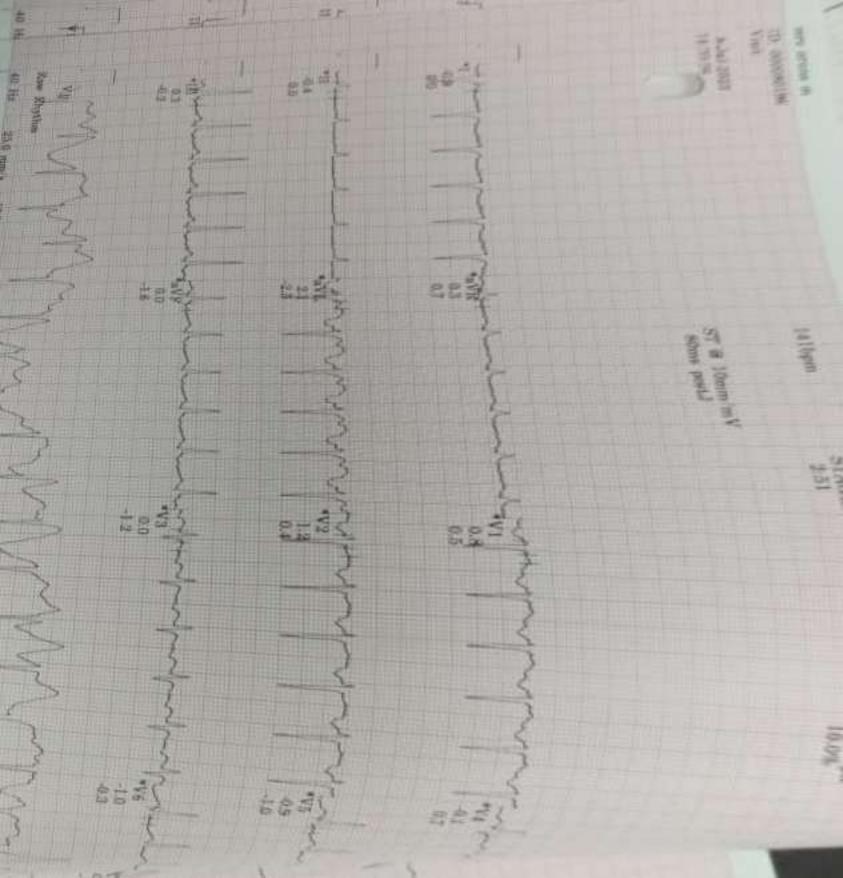


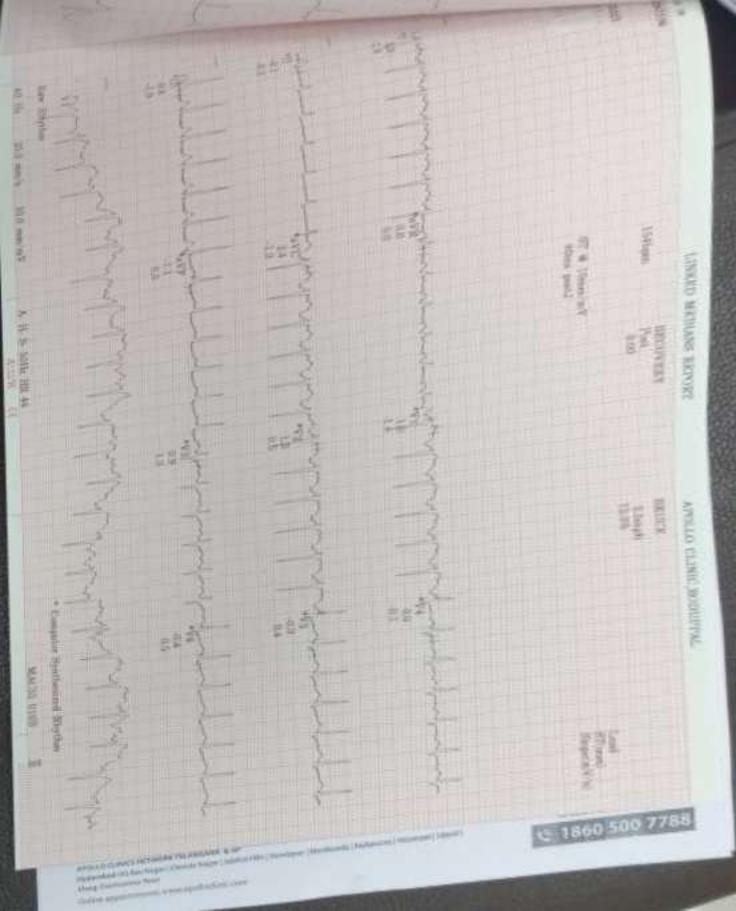
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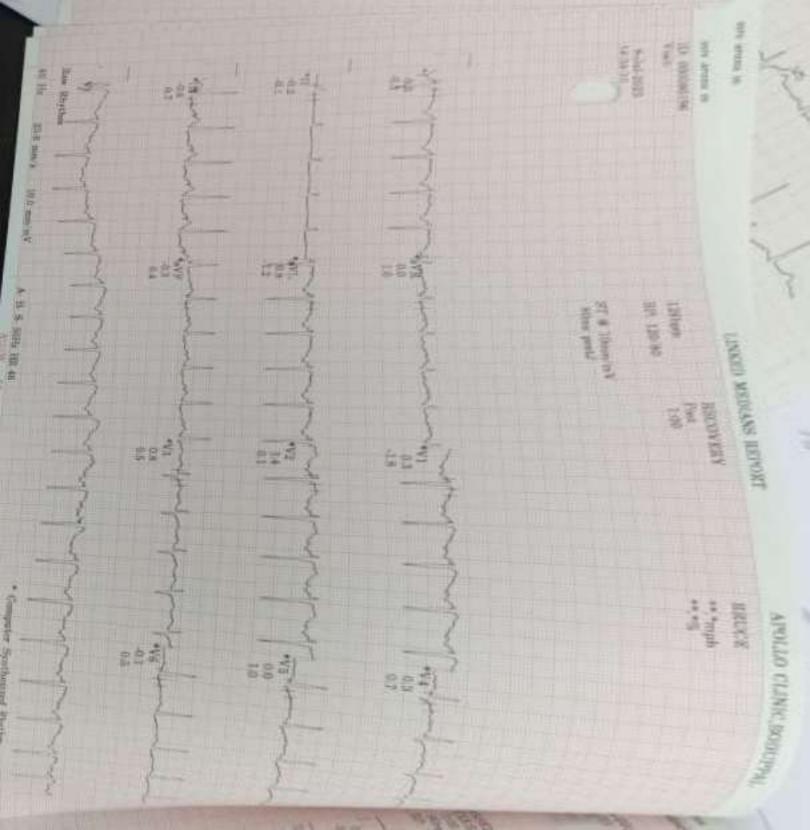




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| Patient Name | : Mrs. ARUNA M | Age/Gender | : 39 Y/F |
|---------------------|-------------------|--------------------|--------------------|
| UHID/MR No. | : CUPP.0000080196 | OP Visit No | : CUPPOPV118953 |
| Sample Collected on | : | Reported on | : 08-07-2023 17:26 |
| LRN# | : RAD2041782 | Specimen | : |
| Ref Doctor | : SELF | | |
| Emp/Auth/TPA ID | : 82277031292 | | |
| | | | |

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Both lung fields and hila are normal.

No obvious active pleuro-parenchymal lesion seen .

Both costophrenic and cardiophrenic angles are clear.

Both diaphragms are normal in position and contour.

Thoracic wall and soft tissues appear normal.

CONCLUSION :

No obvious abnormality seen

H. Lysthiemai

Dr. MATTA JYOTHIRMAI <u>MBBS, MDRD</u> Radiology



| Patient Name | : Mrs. ARUNA M | Age/Gender | : 39 Y/F |
|---------------------|-------------------|--------------------|--------------------|
| UHID/MR No. | : CUPP.0000080196 | OP Visit No | : CUPPOPV118953 |
| Sample Collected on | : | Reported on | : 08-07-2023 12:33 |
| LRN# | : RAD2041782 | Specimen | : |
| Ref Doctor | : SELF | | |
| Emp/Auth/TPA ID | : 82277031292 | | |

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

Liver appears normal in size 144 mm and echotexture. No focal lesion is seen. PV and CBD normal. No dilatation of the intrahepatic biliary radicals.

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

Spleen appears normal in size 97 mm.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 kidneysappear normal in size, shape and echopattern. Cortical thickness and
CM differentiation are maintained. No calculus / hydronephrosis seen on either side.Right kidney : 100 x 39 mm.Left kidney : 107 x 51 mm.

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 79 x 49 x 39 mm. It shows normal shape & echo pattern.Endometrial echo-complex appears normal and measures 9 mm.

Both ovaries appear normal in size, shape and echotexture. **Right ovary :** 28 x 22 mm. **Left ovary :** 28 x 22 mm.

No evidence of any adnexal pathology noted.

IMPRESSION:-

No significant abnormality detected. Suggest – clinical correlation.

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



Patient Name

: Mrs. ARUNA M

Age/Gender

H. Tystliemai Dr. MATT

MBBS, MDRD Radiology

A alla Haalth and Lifestula Limits



| Patient Name | : Mrs. ARUNA M | Age/Gender | : 39 Y/F |
|---------------------|-------------------|-------------|--------------------|
| UHID/MR No. | : CUPP.0000080196 | OP Visit No | : CUPPOPV118953 |
| Sample Collected on | : | Reported on | : 08-07-2023 12:31 |
| LRN# | : RAD2041782 | Specimen | : |
| Ref Doctor | : SELF | | |
| Emp/Auth/TPA ID | : 82277031292 | | |

DEPARTMENT OF RADIOLOGY

SONO MAMOGRAPHY - SCREENING

Real time B–Mode USG of both breasts:

Sono mammography study reveals normal appearance and distribution of fibro glandular breast parenchyma.

No evidence of focal, solid or cystic lesion.

No obvious asymmetry or distortion is noted.

No abnormal axillary lymphadenopathy is detected.

CONCLUSION : No significant abnormality is seen in this study.

Consultant Radiologist.

(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.

4. Lysthiemai

Dr. MATTA JYOTHIRMAI <u>MBBS, MDRD</u> Radiology

Name:Mrs. ARUNA MAge/Gender:39 Y/FAddress:HYDLocation:HYDERABAD, TELANGANADoctor:EDepartment:GENERALRate Plan:UPPAL_06042023Sponsor:ARCOFEMI HEALTHCARE LIMITEDConsulting Doctor: Jr. KOPPULA TRIVENI

MR No: Visit ID: Visit Date: Discharge Date: Referred By: CUPP.0000080196 CUPPOPV118953 08-07-2023 09:30

SELF

HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

SYSTEMIC REVIEW

HT-HISTORY

PHYSICAL EXAMINATION

SYSTEMIC EXAMINATION

IMPRESSION

RECOMMENDATION

Name: Mrs. ARUNA M 39 Y/F Age/Gender: Address: HYD HYDERABAD, TELANGANA Location: Doctor: Department: GENERAL UPPAL_06042023 Rate Plan: ARCOFEMI HEALTHCARE LIMITED Sponsor: Consulting Doctor: Dr. AYYAPPA SWAMY AMARA

MR No: Visit ID: Visit Date: Discharge Date: Referred By: CUPP.0000080196 CUPPOPV118953 08-07-2023 09:30

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RECOMMENDATION

| Date | Pulse (Beats/min) | Resp (Rate/min) | Temp (F) | Height (cms) | Weight (Kas) | Percentage | Fat Level | Body Age (Years) | BMI | Circum | Hip (cms) | Waist | Waist & Hip Ratio | User |
|--------------------|----------------------|--------------------|-------------|-----------------|-----------------|------------|-----------|------------------------|-------|--------|--------------|-------|-------------------------|-----------|
| 08-07-202 18:31 | 3 88 Beats/min | 22 Rate/min | - | 152 cms | 68 Kgs | % | % | Years | 29.43 | cms | cms | cms | | AHLL06629 |

| Date | Pulse (Beats/min) | Resp (Rate/min) | Temp (F) | Height (cms) | Weight (Kas) | Percentage | Fat Level | Body Age (Years) | BMI | Circum | Hip (cms) | Waist | Waist & Hip Ratio | User |
|--------------------|----------------------|--------------------|-------------|-----------------|-----------------|------------|-----------|------------------------|-------|--------|--------------|-------|-------------------------|-----------|
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| Patient Name | : Mrs. ARUNA M | Age | : 39 Y/F |
|--------------|----------------------|----------------|--------------------|
| UHID | : CUPP.0000080196 | OP Visit No | : CUPPOPV118953 |
| Reported By: | : Dr. CH VENKATESHAM | Conducted Date | : 08-07-2023 18:22 |
| Referred By | : SELF | | |

ECG REPORT

Observation :-

- 1. Normal Sinus Rhythm.
- 2. Heart rate is 81 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 see

Impression:

NORMAL ECG

CORRELATE CLINICALLY.

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

Dr. CH VENKATESHAM

| Patient Name : | Mrs. ARUNA M | Age | : 39 Y/F |
|-----------------|--------------------|----------------|--------------------|
| UHID : | CUPP.0000080196 | OP Visit No | : CUPPOPV118953 |
| Conducted By: : | Dr. CH VENKATESHAM | Conducted Date | : 08-07-2023 16:49 |
| Referred By : | SELF | | |

CARDIOLOGY

CARDIAC STRESS TEST – (TMT)

| Angina Pectoria: | | |
|---------------------|--|--|
| NO | | |
| | | |
| Previous MI: | | |
| NO | | |
| PTCA: | | |
| NO | | |
| NO | | |
| CABG: | | |
| NO | | |
| | | |
| HTN: | | |
| NO | | |
| DM: | | |
| NO | | |
| | | |
| Smoking: | | |
| NO | | |
| 01 | | |
| Obesity: | | |
| NO | | |
| Lipidemia: | | |
| NO | | |
| | | |
| Resting ECG Supine: | | |
| 88 BPM | | |
| | | |
| Standing: | | |
| 87 BPM | | |
| Droto col Llood. | | |
| Protocol Used: | | |
| BRUCE | | |
| Monitoring Leads: | | |
| 12 LEADS | | |
| | | |

| Patient Name | : Mrs. ARUNA M | Age | : 39 Y/F |
|---------------|----------------------|----------------|--------------------|
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| Referred By | : SELF | | |

Grade Achieved: 81

% HR / METS: 181 BPM / 7.0 METS

Reason for Terminating Test: MAX HR ATTAINED

Total Exercise Time: 5:23

Symptoms and ECG Changes during Exercise: NO SYMPTOMS NO SIGNIFICANT ST T CHANGES

0 mts: NO SYMPTOMS NO SIGNIFICANT ST T CHANGES

3 mts: NO SYMPTOMS NO SIGNIFICANT ST T CHANGES

6 mts: NO SYMPTOMS NO SIGNIFICANT ST T CHANGES

INTERPRETATION:

Rhythm: NORMAL

| Patient Name | : Mrs. ARUNA M | Age | : 39 Y/F |
|---------------|----------------------|----------------|--------------------|
| UHID | : CUPP.0000080196 | OP Visit No | : CUPPOPV118953 |
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| Referred By | : SELF | | |
| 0 | | | |

S.T. Segment : NORMAL

III Blood Pressure Response : NORMAL

IV Fitness Response : GOOD

Impression:

TMT IS NEGATIVE FOR EXERSICE INDUCED ISCHEMIA.

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

Dr. CH VENKATESHAM