

Patient Name : Mrs.RAHMAT JAHAN FARID  
 Age/Gender : 41 Y 8 M 0 D/F  
 UHID/MR No : DRMV.0000007651  
 Visit ID : CKOROPV429956  
 Ref Doctor : Self

Collected : 26/Oct/2024 11:28AM  
 Received : 26/Oct/2024 02:08PM  
 Reported : 26/Oct/2024 03:15PM  
 Status : Final Report  
 Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

**DEPARTMENT OF HAEMATOLOGY**

**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY232**

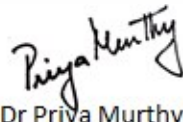
Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>HEMOGRAM , WHOLE BLOOD EDTA</b>				
<b>HAEMOGLOBIN</b>	12.8	g/dL	12-15	Spectrophotometer
PCV	37.90	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.29	Million/cu.mm	3.8-4.8	Electrical Impedance
MCV	88	fL	83-101	Calculated
MCH	29.9	pg	27-32	Calculated
MCHC	33.8	g/dL	31.5-34.5	Calculated
R.D.W	12.8	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	9,800	cells/cu.mm	4000-10000	Electrical Impedance
<b>DIFFERENTIAL LEUCOCYTIC COUNT (DLC)</b>				
NEUTROPHILS	54.8	%	40-80	Electrical Impedance
LYMPHOCYTES	36.1	%	20-40	Electrical Impedance
EOSINOPHILS	2.8	%	1-6	Electrical Impedance
MONOCYTES	6.2	%	2-10	Electrical Impedance
BASOPHILS	0.1	%	<1-2	Electrical Impedance
<b>ABSOLUTE LEUCOCYTE COUNT</b>				
NEUTROPHILS	5370.4	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	<b>3537.8</b>	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	274.4	Cells/cu.mm	20-500	Calculated
MONOCYTES	607.6	Cells/cu.mm	200-1000	Calculated
BASOPHILS	9.8	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	1.52		0.78- 3.53	Calculated
<b>PLATELET COUNT</b>	248000	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 Westegren method
<b>PERIPHERAL SMEAR</b>				

RBCs: are normocytic normochromic

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



**Dr. Vidya Aniket Gore**  
 M.B.B.S,M.D(Pathology)  
 Consultant Pathologist



**Dr Priya Murthy**  
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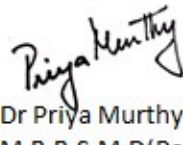
PLATELETS: appear adequate in number.

HEMOPARASITES: negative

**IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE**



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APOLLO HEALTH & LIFESTYLE LTD - RRL BANGALORE





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Collected : 26/Oct/2024 03:06PM  
 Received : 26/Oct/2024 06:50PM  
 Reported : 26/Oct/2024 07:18PM  
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**DEPARTMENT OF BIOCHEMISTRY**

**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY232**

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, FASTING , NAF PLASMA	107	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

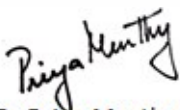
**Note:**

- 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. Interval	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	197	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.



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UHID/MR No : DRMV.0000007651	Reported : 26/Oct/2024 04:24PM
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**DEPARTMENT OF BIOCHEMISTRY**

**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY232**

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

**Comment:**

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

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

**Note:** Dietary preparation or fasting is not required.

1. HbA1c is recommended by American Diabetes Association for Diagnosing Diabetes and monitoring Glycemic Control by American Diabetes Association guidelines 2023.

2. Trends in HbA1c values is a better indicator of Glycemic control than a single test.

3. Low HbA1c in Non-Diabetic patients are associated with Anemia (Iron Deficiency/Hemolytic), Liver Disorders, Chronic Kidney Disease. Clinical Correlation is advised in interpretation of low Values.

4. Falsely low HbA1c (below 4%) may be observed in patients with clinical conditions that shorten erythrocyte life span or decrease mean erythrocyte age. HbA1c may not accurately reflect glycemic control when clinical conditions that affect erythrocyte survival are present.

5. In cases of Interference of Hemoglobin variants in HbA1c, alternative methods (Fructosamine) estimation is recommended for Glycemic Control

A: HbF >25%

B: Homozygous Hemoglobinopathy.

(Hb Electrophoresis is recommended method for detection of Hemoglobinopathy)

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SIN No.KOR241003074

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

Apollo Health and Lifestyle Limited  
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APOLLO CLINIC'S NETWORK

Telangana: Hyderabad (42 Rao Nagar) | Chanda Nagar | Kordega | Halakurki | Nizampet | Vengal Rao | Upper | Another | Pradins | Mangalochamma | Telangana: Bangalore | East Bengal | Solanki | Electronics City | Frazer Town | HSR Layout | Indira Nagar | IT Nagar | Jubilee Hills | Outer Ring Road | Outer Ring Road | Hyderabad | Vizag | Tamil Nadu: Chennai | Coimbatore | Erode | Karaikal | Kerala: Kochi | Kollam | Madhya Pradesh: Indore | Madhya Pradesh: Jabalpur | Madhya Pradesh: Bhopal | Madhya Pradesh: Gwalior | Madhya Pradesh: Lucknow | Madhya Pradesh: Patna | Madhya Pradesh: Ranchi | Madhya Pradesh: Raipur | Madhya Pradesh: Varanasi | Madhya Pradesh: Dehra Dun | Madhya Pradesh: Meerut | Madhya Pradesh: Moradabad | Madhya Pradesh: Noida | Madhya Pradesh: Ghaziabad | Madhya Pradesh: Faridkot | Madhya Pradesh: Ludhiana | Madhya Pradesh: Jalandhar | Madhya Pradesh: Amritsar | Madhya Pradesh: Patiala | Madhya Pradesh: Ferozpur | Madhya Pradesh: Bathinda | Madhya Pradesh: Moga | Madhya Pradesh: Sangrur | Madhya Pradesh: Muktsar | Madhya Pradesh: Gurgaon | Madhya Pradesh: Faridkot | Madhya Pradesh: Ludhiana | Madhya Pradesh: Jalandhar | Madhya Pradesh: Amritsar | Madhya Pradesh: Patiala | Madhya Pradesh: Ferozpur | Madhya Pradesh: Bathinda | Madhya Pradesh: Moga | Madhya Pradesh: Sangrur | Madhya Pradesh: Muktsar | Madhya Pradesh: Gurgaon

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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY232

Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>LIPID PROFILE , SERUM</b>				
TOTAL CHOLESTEROL	242	mg/dL	<200	CHO-POD
TRIGLYCERIDES	232	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	47	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	195	mg/dL	<130	Calculated
LDL CHOLESTEROL	148.3	mg/dL	<100	Calculated
VLDL CHOLESTEROL	46.4	mg/dL	<30	Calculated
CHOL / HDL RATIO	5.14		0-4.97	Calculated
ATHEROGENIC INDEX (AIP)	0.33		<0.11	Calculated

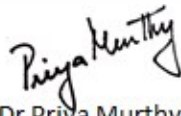
Comment:

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



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SIN No.KOR24I003073

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**DEPARTMENT OF BIOCHEMISTRY**

**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY232**

Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>LIVER FUNCTION TEST (LFT) , SERUM</b>				
BILIRUBIN, TOTAL	0.63	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.11	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.52	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	27	U/L	<35	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	29.0	U/L	<35	IFCC
AST (SGOT) / ALT (SGPT) RATIO (DE RITIS)	1.1		<1.15	Calculated
ALKALINE PHOSPHATASE	96.00	U/L	30-120	IFCC
PROTEIN, TOTAL	7.49	g/dL	6.6-8.3	Biuret
ALBUMIN	4.21	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.28	g/dL	2.0-3.5	Calculated
A/G RATIO	1.28		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. 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. ALP elevation also seen in pregnancy, impacted by age and sex.\*Bilirubin elevated- predominantly direct , To establish the hepatic origin correlation with elevated GGT helps.

3. Synthetic function impairment:\*Albumin- Liver disease reduces albumin levels, Correlation with PT (Prothrombin Time) helps.

4. Associated tests for assessment of liver fibrosis - Fibrosis-4 and APRI Index.

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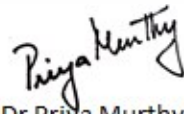
**DEPARTMENT OF BIOCHEMISTRY**

**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY232**

Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM</b>				
CREATININE	<b>0.56</b>	mg/dL	0.66 - 1.09	Modified Jaffe, Kinetic
UREA	<b>13.50</b>	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	<b>6.3</b>	mg/dL	8.0 - 23.0	Calculated
URIC ACID	<b>7.14</b>	mg/dL	2.6-6.0	Uricase PAP
CALCIUM	9.50	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	3.23	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	136	mmol/L	136-146	ISE (Indirect)
POTASSIUM	4.3	mmol/L	3.5-5.1	ISE (Indirect)
CHLORIDE	<b>98</b>	mmol/L	101-109	ISE (Indirect)
PROTEIN, TOTAL	7.49	g/dL	6.6-8.3	Biuret
ALBUMIN	4.21	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.28	g/dL	2.0-3.5	Calculated
A/G RATIO	1.28		0.9-2.0	Calculated



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Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM</b>	<b>54.00</b>	U/L	<38	IFCC

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APOLLO CLINIC'S NETWORK

Telangana: Hyderabad (45) | Andhra Pradesh: Chennai (Nagar) | Karnataka: Bangalore (14) | Kerala: Kochi (1) | Maharashtra: Mumbai (1) | Gujarat: Gandhinagar (1) | Odisha: Bhubaneswar (1) | West Bengal: Kolkata (1) | Punjab: Chandigarh (1) | Haryana: Gurgaon (1) | Uttar Pradesh: Lucknow (1) | Bihar: Patna (1) | Jharkhand: Ranchi (1) | Chhattisgarh: Raipur (1) | Madhya Pradesh: Bhopal (1) | Rajasthan: Jaipur (1) | Himachal Pradesh: Shimla (1) | Uttarakhand: Dehradun (1) | Jammu & Kashmir: Srinagar (1) | Ladakh: Leh (1) | Andaman & Nicobar: Port Blair (1) | Chandernagore: Chandernagore (1) | Lakshadweep: Kavaratti (1) | India: 28 States & 8 Union Territories



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**DEPARTMENT OF IMMUNOLOGY**
**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY232**

Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM</b>				
TRI-IODOTHYRONINE (T3, TOTAL)	1	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	9.7	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	2.573	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

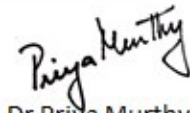
1. TSH is a glycoprotein hormone secreted by the anterior pituitary. TSH activates production of T3 (Triiodothyronine) and its prohormone T4 (Thyroxine). Increased blood level of T3 and T4 inhibit production of TSH.
2. TSH is elevated in primary hypothyroidism and will be low in primary hyperthyroidism. Elevated or low TSH in the context of normal free thyroxine is often referred to as sub-clinical hypo- or hyperthyroidism respectively.
3. 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.
4. 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

Page 10 of 16



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**DEPARTMENT OF IMMUNOLOGY**

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High	High	High	High	Pituitary Adenoma; TSHoma/Thyrotropinoma
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SIN No.KOR241003071

**Apollo Health and Lifestyle Limited**

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

Regd. Office: 10/22/60, Anand Nagar, 4th Cross, 4th Block, 4th Stage, 4th Cross, Anand Nagar, Hyderabad, Telangana - 500016

www.apolloclinic.com | Email ID: enquiry@apolloclinic.com, Ph No: 040-6664 7777, Fax No: 040-6664 7766

APOLLO CLINIC'S NETWORK

Telangana: Hyderabad (45 Rao Nagar) | Chanda Nagar | Koradiguda | Palakurthi | Hyderabad | Karnataka: Udupi | Andhra Pradesh: Visakhapatnam | Kerala: Bangalore | Gujarat: Gandhinagar | Odisha: Bhubaneswar | Maharashtra: Mumbai | West Bengal: Kolkata | Rajasthan: Jaipur | Madhya Pradesh: Indore | Uttar Pradesh: Lucknow | Bihar: Patna | Jharkhand: Ranchi | Assam: Dispur | Punjab: Chandigarh | Himachal Pradesh: Shimla | Uttarakhand: Dehradun | Jammu & Kashmir: Srinagar | Arunachal Pradesh: Itanagar | Mizoram: Aizawl | Nagaland: Kohima | Tripura: Agartala | West Bengal: Kolkata | Jharkhand: Ranchi | Assam: Dispur | Punjab: Chandigarh | Himachal Pradesh: Shimla | Uttarakhand: Dehradun | Jammu & Kashmir: Srinagar | Arunachal Pradesh: Itanagar | Mizoram: Aizawl | Nagaland: Kohima | Tripura: Agartala







Patient Name	: Mrs.RAHMAT JAHAN FARID	Collected	: 26/Oct/2024 11:28AM
Age/Gender	: 41 Y 8 M 0 D/F	Received	: 26/Oct/2024 02:50PM
UHID/MR No	: DRMV.0000007651	Reported	: 26/Oct/2024 03:26PM
Visit ID	: CKOROPV429956	Status	: Final Report
Ref Doctor	: Self	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED

**DEPARTMENT OF CLINICAL PATHOLOGY**

**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY232**

Test Name	Result	Unit	Bio. Ref. Interval	Method
URINE GLUCOSE(FASTING)	NEGATIVE		NEGATIVE	GOD-POD



Dr. Vidya Aniket Gore  
M.B.B.S, M.D(Pathology)  
Consultant Pathologist



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

ARCOFEMI FULL BODY PLUS - 1016 BANGALORE











प्रति,

समन्वयक,  
MediWheel (M/s. Arcofemi Healthcare Pvt. Ltd.)

महोदय/ महोदया,

विषय: बैंक ऑफ़ बड़ौदा के कर्मचारियों के लिए वार्षिक स्वास्थ्य जांच।

हम आपको सूचित करना चाहते हैं कि हमारे कर्मचारी जिनका विवरण निम्नानुसार हैं हमारे करार के अनुसार आपके द्वारा उपलब्ध कराई गई कैशलेस वार्षिक स्वास्थ्य जांच सुविधा का लाभ लेना चाहते हैं।

	कर्मचारी विवरण
नाम	MS. FARIDI RAHMAT JAHAN
क.कू.संख्या	165523
पदनाम	CREDIT
कार्य का स्थान	BANGALORE, RT NAGAR
जन्म की तारीख	28-02-1983
स्वास्थ्य जांच की प्रस्तावित तारीख	26-10-2024
बुकिंग संदर्भ सं.	24D165523100114956E

यह अनुमोदन/ संस्तुति पत्र तभी वैध माना जाएगा जब इसे बैंक ऑफ़ बड़ौदा के कर्मचारी आईडी कार्ड की प्रति के साथ प्रस्तुत किया जाएगा। यह अनुमोदन पत्र दिनांक **23-09-2024** से **31-03-2025** तक मान्य है। इस पत्र के साथ किए जाने वाले चिकित्सा जांच की सूची अनुलग्नक के रूप में दी गई है। कृपया नोट करें कि उक्त स्वास्थ्य जांच हमारी टाई-अप व्यवस्था के अनुसार कैशलेस सुविधा है। हम अनुरोध करते हैं कि आप हमारे कर्मचारी के स्वास्थ्य जांच संबंधी आवश्यकताओं पर उचित कार्रवाई करें तथा इस संबंध में अपनी सर्वोच्च प्राथमिकता तथा सर्वोत्तम संसाधन उपलब्ध कराएं। उपर्युक्त सारणी में दी गई कर्मचारी कूट संख्या एवं बुकिंग संदर्भ संख्या का उल्लेख अनिवार्य रूप से इनवॉइस में किया जाना चाहिए।

हम इस संबंध में आपके सहयोग की अपेक्षा करते हैं।

भवदीय,

हस्ता/-

(मुख्य महाप्रबंधक)

मा.सं.प्र. एवं विपणन

बैंक ऑफ़ बड़ौदा

(नोट: यह कंप्यूटर द्वारा जनरेट किया गया पत्र है। हस्ताक्षर की आवश्यकता नहीं है। कृपया किसी भी स्पष्टीकरण के लिए MediWheel (M/s. Arcofemi Healthcare Pvt. Ltd.) से संपर्क करें।)



**List of tests & consultations to be covered as part of Annual Health Check-up**

S.No.	For Male	For Female
1	CBC	CBC
2	ESR	ESR
3	Blood Group & RH Factor	Blood Group & RH Factor
4	Blood and Urine Sugar Fasting	Blood and Urine Sugar Fasting
5	Blood and Urine Sugar PP	Blood and Urine Sugar PP
6	Stool Routine	Stool Routine
	<b>Lipid Profile</b>	<b>Lipid Profile</b>
7	Total Cholesterol	Total Cholesterol
8	HDL	HDL
9	LDL	LDL
10	VLDL	VLDL
11	Triglycerides	Triglycerides
12	HDL/ LDL ratio	HDL/ LDL ratio
	<b>Liver Profile</b>	<b>Liver Profile</b>
13	AST	AST
14	ALT	ALT
15	GGT	GGT
16	Bilirubin (total, direct, indirect)	Bilirubin (total, direct, indirect)
17	ALP	ALP
18	Proteins (T, Albumin, Globulin)	Proteins (T, Albumin, Globulin)
	<b>Kidney Profile</b>	<b>Kidney Profile</b>
19	Serum Creatinine	Serum Creatinine
20	Blood Urea Nitrogen	Blood Urea Nitrogen
21	Uric Acid	Uric Acid
22	HBA1C	HBA1C
23	Routine Urine Analysis	Routine Urine Analysis
24	USG Whole Abdomen	USG Whole Abdomen
	<b>General Tests</b>	<b>General Tests</b>
25	X Ray Chest	X Ray Chest
26	ECG	ECG
27	2D/3D ECHO / TMT	2D/3D ECHO / TMT
28	Stress Test	Gynaec Consultation
29	PSA Male (above 40 years)	Pap Smear (above 30 years) & Mammography (above 40 years)
30	Thyroid Profile (T3, T4, TSH)	Thyroid Profile (T3, T4, TSH)
31	Dental Check-up Consultation	Dental Check-up Consultation
32	Physician Consultation	Physician Consultation
33	Eye Check-up Consultation	Eye Check-up Consultation
34	Skin/ENT Consultation	Skin/ENT Consultation

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ಭಾರತ ಚುನಾವಣಾ ಆಯೋಗ  
ELECTION COMMISSION OF INDIA

ವೋಟರ್ ಗುರುತು ಕಾರ್ಡ್ - Voter Photo Identity Card



Z808954729



ಹೆಸರು: ರಾಹ್ಮಾತ್ ಜಾಹಾನ್ ಪಾರಿಡಿ

Name: RAHMAAT JAHAN PARIDI

ಹೆಸರು: ಬಿರಂದ್ರಾ ಕುಮಾರ್

Husband's Name: BIRENDRA KUMAR

ಜನನ ದಿನಾಂಕ: 28-02-1983

Date of Birth / Age: 28-02-1983

**Name :** Mrs. RAHMAT JAHAN FARID **Age :** 41Y 7M 29D  
**Address :** Koramangala Vi Bk Bangalore Karnataka INDIA 560095 **sex :** Female  
**Plan :** ARCOFEMI MEDIWHEEL FEMALE AHC  
 CREDIT PAN INDIA OP AGREEMENT

**UHID :** DRMV000007651



**OP No:** CKOROPV429956  
**Bill No:** CKOR-OCR-85012  
**Date:** Oct 26th, 2024, 11:16 AM

Sno.	Service Type/Service Name	Department
	ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA FY2324	
1	ULTRASOUND - WHOLE ABDOMEN <i>2nd ph RW 18</i>	Ultrasound Radiology
2	FITNESS BY GENERAL PHYSICIAN	Consultation
3	HbA1c, GLYCATED HEMOGLOBIN	Biochemistry
4	BC PAP TEST- PAPSURE <i>2</i>	Histopathology
5	COMPLETE URINE EXAMINATION	Clinical Pathology
6	SONO MAMOGRAPHY - SCREENING	Mammography
7	BLOOD GROUP ABO AND RH FACTOR	Blood Bank
8	LIVER FUNCTION TEST (LFT)	Biochemistry
9	GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL)	Biochemistry
10	GLUCOSE, FASTING <i>-12</i>	Biochemistry
11	OPHTHAL BY GENERAL PHYSICIAN	Consultation
12	DIET CONSULTATION	General
13	DENTAL CONSULTATION <i>15</i>	Consultation
14	BODY MASS INDEX (BMI)	General
15	X-RAY CHEST PA <i>11</i>	X Ray Radiology
16	HEMOGRAM + PERIPHERAL SMEAR	Haematology
17	PERIPHERAL SMEAR	Haematology
18	LIPID PROFILE	Biochemistry
19	2D-ECHO	Cardiology
20	GYNACOLOGY CONSULTATION <i>2 Ground floor - Room-3</i>	Consultation
21	ECG <i>14</i>	Cardiology
22	THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)	Biochemistry
23	ENT CONSULTATION <i>Dr. Ujwal</i>	Consultation
24	URINE GLUCOSE(POST PRANDIAL)	Clinical Pathology
25	URINE GLUCOSE(FASTING)	Clinical Pathology
26	GAMMA GLUTAMYL TRANSFERASE (GGT)	Biochemistry
27	RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)	Biochemistry

*Physio - 17*  
*Dental - 15*

*Ophtal - Room - 11 opp Bp - 114/64*  
*P - 87.6 k/m*  
*wt - 85.4 kg*



## Apollo Clinic

### Consent Form

Patient Name: ..... Bahmat J. Farid ..... Age: ..... 4 | .....  
 UHID Number: ..... Company Name: ..... Bank of Baroda .....

I Mr/Mrs/Miss: ..... Employee of .....

(Company) want to inform you that I am not getting the..... Echo, X-Ray, USG, ECG .....

Test which is a part of health check package.

Reason If any: ..... due to unavail staff, next week I will come .....

And I claim the above statement in my full consciousness.

Patient Signature: ..... [Signature] ..... Date: ..... 26/10/2022 .....

6721

6001

NAME: Mrs. Rahmat Jahann  
AGE: 41..... GENDER: MALE/FEMALE

RIGHT EYE

	SPH	CYL	AXIS	VA
DV	-3.75	-2.00	180	6/6
Add	+1.25			N6

	SPH	CYL	AXIS	VA
DV	-3.75	-2.00	175	6/6
NV Add	+1.25			N6

REMARK: Progressives  
Colour Vn = Normal

DATE: 26-10-2024.

*[Signature]*  
OPTOMETRIST

BRING THIS PRESCRIPTION IN YOUR NEXT VISIT



**DR VIJAYA LAKSHMI M**  
**M.B.B.S, D.L.O, D.N.B(ENT)**  
**Phone No.9972044580,080-25633823/24/23**

*26/10/24*

**HEALTH CHECK- ENT**

**NAME:** *RAHAMAT JAHAN FARID* **AGE:** *41 yr/f*

**EAR:** **RE:** **LE:**

EXTERNAL EAR

MIDDLE EAR

INNER EAR (FN)

*Normal*

**HEARING ASSESSMENT:** **RE:** **LE:**

RHINNE

WEBER

ABC

*Normal*

**NOSE**

**THROAT**

AIRWAY

ORAL CAVITY

SEPTUM

OROPHARYNX

TURBINATES

PHARYNX

OTHERS

LARYNX

*mycosis  
lyp mms  
Normal*

*Normal*

NECK

NECK NODES

OTHER

*Normal*

**AUDIOMETRY**

**IMPRESSION**

*Normal*

*[Signature]*  
**SIGNATURE:**



*M/C*

Date : 26/10/29  
MR No :  
Name : *M. Rahmat*  
Age/Gender : *41yo*  
Mobile no :

Department : OBSTETRICS & GYNAECOLOGY  
Consultant : DR JYOTHI RAJESH  
REG NO; KMC-42823  
Qualification : DGO, (DNB)  
Consulting Timings: 9.30am TO 12.00PM  
phone no: 9972044580, 7338064558

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

General Examination / Allergies  
History

Clinical Diagnosis & Management Plan

*No gynae complaints*  
*MH. PMH regular since 26/9*  
*OBV. P2G LSC 10-5yo*

*Post-Gr. No*  
*Family H. - Parents - 112, 0m*  
*OLE. P/A self*  
*Pls. Cx 10*  
*vopma 10*

Follow up date:

Doctor Signature

*u*