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Certificate No. MC-5697

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Patient Name	: Ms.VINITA YELLAMELLI	Collected	: 26/Oct/2024 09:10AM
Age/Gender	: 38 Y 8 M 15 D/F	Received	: 26/Oct/2024 01:49PM
UHID/MR No	: CVIM.0000229089	Reported	: 26/Oct/2024 02:19PM
Visit ID	: CVIMOPV636819	Status	: Final Report
Ref Doctor	: Self	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 22E34293		

DEPARTMENT OF HAEMATOLOGY

PERIPHERAL SMEAR , *WHOLE BLOOD EDTA*

RBC's Anisocytosis+, Microcytes+,
WBC's are normal in number and morphology
Platelets are Adequate
No hemoparasite seen.

DR.Sanjay Ingle
M.B.B.S,M.D(Pathology)
Consultant Pathologist

SIN No:VIR241003168
This test has been performed at Apollo Health and Lifestyle ltd- Sadashiv Peth Pune, Diagnostics Lab

Apollo Health and Lifestyle Limited (CIN - [illegible])
Regd. Office: [illegible] | www.apollohl.com | Email: [illegible] | Ph No: [illegible] | Fax No: [illegible]
Hyatt Millennium Premises Cooperative Society Limited, [illegible], Sadashiv Peth, Pune Nagar, Pune, Maharashtra, India - 411014
1860 500 7788
www.apolloclinic.com
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Telangana: Hyderabad [illegible] | Andhra Pradesh: [illegible] | Karnataka: Bangalore [illegible] | Tamil Nadu: Chennai [illegible] | Maharashtra: Pune [illegible] | Uttar Pradesh: Ghaziabad [illegible] | Gujarat: Ahmedabad [illegible] | Punjab: Amritsar [illegible] | Haryana: Faridabad [illegible]

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DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
HEMOGRAM , *WHOLE BLOOD EDTA*				
HAEMOGLOBIN	12.9	g/dL	12-15	Spectrophotometer
PCV	38.90	%	36-46	Electronic pulse & Calculation
RBC COUNT	**5.07**	Million/cu.mm	3.8-4.8	Electrical Impedence
MCV	**76.6**	fL	83-101	Calculated
MCH	**25.5**	pg	27-32	Calculated
MCHC	33.3	g/dL	31.5-34.5	Calculated
R.D.W	**15.4**	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	**10,450**	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	64.4	%	40-80	Electrical Impedance
LYMPHOCYTES	29.8	%	20-40	Electrical Impedance
EOSINOPHILS	**0.8**	%	1-6	Electrical Impedance
MONOCYTES	4.9	%	2-10	Electrical Impedance
BASOPHILS	0.1	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	6729.8	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	**3114.1**	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	83.6	Cells/cu.mm	20-500	Calculated
MONOCYTES	512.05	Cells/cu.mm	200-1000	Calculated
BASOPHILS	10.45	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	2.16		0.78- 3.53	Calculated
PLATELET COUNT	376000	cells/cu.mm	150000-410000	Electrical impedence
ERYTHROCYTE SEDIMENTATION RATE (ESR)	6	mm at the end of 1 hour	0-20	Modified Westergren
PERIPHERAL SMEAR				

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M.B.B.S,M.D(Pathology)
Consultant Pathologist

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

DR.Sanjay Ingle
M.B.B.S,M.D(Pathology)
Consultant Pathologist

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DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
BLOOD GROUP ABO AND RH FACTOR , *WHOLE BLOOD EDTA*				
BLOOD GROUP TYPE	O			Microplate Hemagglutination
Rh TYPE	Positive			Microplate Hemagglutination

Sneha Shah
Dr Sneha Shah
MBBS, MD (Pathology)
Consultant Pathologist

SIN No:VIR241003168

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APOLLO CLINICS NETWORK

Patient Name	: Ms.VINITA YELLAMELLI	Collected	: 26/Oct/2024 11:39AM
Age/Gender	: 38 Y 8 M 15 D/F	Received	: 26/Oct/2024 03:28PM
UHID/MR No	: CVIM.0000229089	Reported	: 26/Oct/2024 05:11PM
Visit ID	: CVIMOPV636819	Status	: Final Report
Ref Doctor	: Self	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 22E34293		

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, FASTING , *NAF PLASMA*	80	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:

1.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.

2. 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)*	88	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.

DR.Sanjay Ingle
M.B.B.S,M.D(Pathology)
Consultant Pathologist

SIN No:VIR241003292

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UHID/MR No	: CVIM.0000229089	Reported	: 26/Oct/2024 04:49PM
Visit ID	: CVIMOPV636819	Status	: Final Report
Ref Doctor	: Self	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
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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. Interval	Method
HBA1C (GLYCATED HEMOGLOBIN) , *WHOLE BLOOD EDTA*				
HBA1C, GLYCATED HEMOGLOBIN	5.6	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	114	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)

DR.Sanjay Ingle
M.B.B.S,M.D(Pathology)
Consultant Pathologist

SIN No:VIR241003172

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Patient Name	: Ms.VINITA YELLAMELLI	Collected	: 26/Oct/2024 09:10AM
Age/Gender	: 38 Y 8 M 15 D/F	Received	: 26/Oct/2024 01:55PM
UHID/MR No	: CVIM.0000229089	Reported	: 26/Oct/2024 03:18PM
Visit ID	: CVIMOPV636819	Status	: Final Report
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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. Interval	Method
LIPID PROFILE , *SERUM*				
TOTAL CHOLESTEROL	**226**	mg/dL	<200	CHO-POD
TRIGLYCERIDES	108	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	**36**	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	**190**	mg/dL	<130	Calculated
LDL CHOLESTEROL	**168.39**	mg/dL	<100	Calculated
VLDL CHOLESTEROL	21.63	mg/dL	<30	Calculated
CHOL / HDL RATIO	**6.32**		0-4.97	Calculated
ATHEROGENIC INDEX (AIP)	**0.12**		<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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M.B.B.S,M.D(Pathology)
Consultant Pathologist

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
LIVER FUNCTION TEST (LFT) , *SERUM*				
BILIRUBIN, TOTAL	0.55	mg/dL	0.3–1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.09	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.46	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	19.47	U/L	<35	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	18.5	U/L	<35	IFCC
AST (SGOT) / ALT (SGPT) RATIO (DE RITIS)	1.0		<1.15	Calculated
ALKALINE PHOSPHATASE	78.80	U/L	30-120	IFCC
PROTEIN, TOTAL	**6.52**	g/dL	6.6-8.3	Biuret
ALBUMIN	3.58	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.94	g/dL	2.0-3.5	Calculated
A/G RATIO	1.22		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 > 1In Alcoholic Liver Disease AST: ALT usually >2. This ratio is also seen to be increased in NAFLD, Wilsons'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.

DR.Sanjay Ingle
M.B.B.S,M.D(Pathology)
Consultant Pathologist

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DEPARTMENT OF BIOCHEMISTRY

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Test Name	Result	Unit	Bio. Ref. Interval	Method
RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , *SERUM*				
CREATININE	0.74	mg/dL	0.55-1.02	Modified Jaffe, Kinetic
UREA	18.89	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	8.8	mg/dL	8.0 - 23.0	Calculated
URIC ACID	4.30	mg/dL	2.6-6.0	Uricase PAP
CALCIUM	9.29	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	3.63	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	137.6	mmol/L	136–146	ISE (Indirect)
POTASSIUM	4.0	mmol/L	3.5–5.1	ISE (Indirect)
CHLORIDE	103.46	mmol/L	101–109	ISE (Indirect)
PROTEIN, TOTAL	**6.52**	g/dL	6.6-8.3	Biuret
ALBUMIN	3.58	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.94	g/dL	2.0-3.5	Calculated
A/G RATIO	1.22		0.9-2.0	Calculated

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , *SERUM*	25.48	U/L	<38	IFCC

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M.B.B.S,M.D(Pathology)
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DEPARTMENT OF IMMUNOLOGY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
THYROID PROFILE TOTAL (T3, T4, TSH) , *SERUM*				
TRI-IODOTHYRONINE (T3, TOTAL)	1.48	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	**15.89**	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	**7.704**	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

DR.Sanjay Ingle
M.B.B.S,M.D(Pathology)
Consultant Pathologist

SIN No:VIR241003174
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DEPARTMENT OF IMMUNOLOGY

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

High	High	High	High	Pituitary Adenoma; TSHoma/Thyrotropinoma

DR.Sanjay Ingle
M.B.B.S,M.D(Pathology)
Consultant Pathologist

SIN No:VIR241003174

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APOLLO CLINICS NETWORK
Telangana: Hyderabad (Ali Bag Nagar | Chanda Nagar | Kondapur | Hallabhavan | Hitampet | Mallapur | Uppal) | Andhra Pradesh: Vizag (Seethamma Pala) | Karnataka: Bangalore (Jayanagar | Bellandur | Electronic City | Frazer Town | HSR Layout | Indira Nagar | JP Nagar | Koramangala | Sahakar Nagar | Vijaya Nagar) | Mysore | Tamilnadu: Chennai (Anna Nagar | Kolapakkam | Mylapore | Nagar | Velachery) | Maharashtra: Pune (Aundh | Baner | Hadapsar | Kharadi | Kothrud | Pimpri Nagar | Wakad) | Uttar Pradesh: Ghaziabad (Indirapuram) | Gujarat: Ahmedabad (Gandhi) | Punjab: Amritsar (Green Field) | Haryana: Faridabad (Fairway Square Road)

Patient Name	: Ms.VINITA YELLAMELLI	Collected	: 26/Oct/2024 09:10AM
Age/Gender	: 38 Y 8 M 15 D/F	Received	: 26/Oct/2024 03:11PM
UHID/MR No	: CVIM.0000229089	Reported	: 26/Oct/2024 03:47PM
Visit ID	: CVIMOPV636819	Status	: Final Report
Ref Doctor	: Self	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 22E34293		

DEPARTMENT OF CLINICAL PATHOLOGY

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

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

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

Result/s to Follow:
COMPLETE URINE EXAMINATION (CUE)

Sneha Shah
Apollo Diagnostics

Dr Sneha Shah
MBBS, MD (Pathology)
Consultant Pathologist

SIN No:VIR241003173
This test has been performed at Apollo Health and Lifestyle ltd- Sadashiv Peth Pune, Diagnostics Lab

Apollo Health and Lifestyle Limited
1860 500 7788
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APOLLO CLINICS NETWORK

Apollo Clinic
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Patient Name	: Ms.VINITA YELLAMELLI	Collected	: 26/Oct/2024 09:10AM
Age/Gender	: 38 Y 8 M 15 D/F	Received	: 26/Oct/2024 03:11PM
UHID/MR No	: CVIM.0000229089	Reported	: 26/Oct/2024 03:47PM
Visit ID	: CVIMOPV636819	Status	: Final Report
Ref Doctor	: Self	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 22E34293		

TERMS AND CONDITIONS GOVERNING THIS REPORT

1. Reported results are for information and interpretation of the referring doctor or such other medical professionals, who understandreporting units, reference ranges and limitation of technologies.Laboratories not be responsible for any interpretation whatsoever.
2. It is presumed that the tests performed are, on the specimen / sample being to the patient named or identified and the verifications of parrticulars have been confirmed by the patient or his / her representative at the point of generation of said specimen.
3. The reported results are restricted to the given specimen only. Results may vary from lab to lab and from time to time for the same parameter for the same patient (within subject biological variation).
4. The patient details along with their results in certain cases like notifiable diseases and as per local regulatory requirements will be communicated to the assigned regulatory bodies.
5. The patient samples can be used as part of internal quality control, test verification, data analysis purposes within the testing scope of the laboratory.
6. This report is not valid for medico legal purposes. It is performed to facilitate medical diagnosis only.

Sneha Shah
Apollo Diagnostics

Dr Sneha Shah
MBBS, MD (Pathology)
Consultant Pathologist

SIN No:VIR241003173

This test has been performed at Apollo Health and Lifestyle ltd- Sadashiv Peth Pune, Diagnostics Lab

Patient Name	: Ms. VINITA YELLAMELLI	Age	: 38Yrs 8Mths 16Days
UHID	: CVIM.0000229089	OP Visit No.	: CVIMOPV636819
Printed On	: 26-10-2024 05:54 AM	Advised/Pres Doctor	: --
Department	: Radiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employeer Id	: 22E34293		

DEPARTMENT OF RADIOLOGY

ULTRASOUND ABDOMEN AND PELVIS

Liver appears normal in size and bright in 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. No focal lesion seen. Splenic vein appears normal.

Pancreas appears normal in echopattern. No focal/mass lesion/calcification. No evidence of peripancreatic free fluid or collection. Pancreatic duct appears normal.

Both the kidneys appear normal in size, shape and echopattern. Cortical thickness and CM differentiation are maintained. No hydronephrosis seen on either side. Calcular concretions noted in both kidneys mid poles.

Urinary Bladder is well distended and appears normal. No evidence of any wall thickening or abnormality. No evidence of any intrinsic or extrinsic bladder mass detected.

Uterus appears normal in size. It shows posterior wall intra-mural fibroid measuring 2.1 x 1.5 cm. Endometrial echo-complex appears normal and measures 6.1 mm.

Both ovaries appear normal in size, shape and echotexture.
No evidence of any adnexal pathology noted.

Bowel loops and Retroperitoneum appear normal. Aorta and IVC appear normal.
No abnormal lymphadenopathy noted.

IMPRESSION:-
Grade I fatty liver.
Calcular concretions noted in both kidneys mid poles.
Uterus shows posterior wall intra-mural fibroid.

(The sonography findings should always be considered in correlation with the clinical and other investigation finding where applicable.)

---End Of The Report---

Preeti

Dr. PREETI P KATHE
DMRE, MD, DNB
2003/04/1886
Radiology

Patient Name	: Ms. VINITA YELLAMELLI	Age	: 38Yrs 8Mths 16Days
UHID	: CVIM.0000229089	OP Visit No.	: CVIMOPV636819
Printed On	: 26-10-2024 05:35 AM	Advised/Pres Doctor	: --
Department	: Radiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employeer Id	: 22E34293		

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Trachea appears normal.

Both the lung fields are clear.

Cardiac shadows appear apparently normal.

Both domes of diaphragm appear normal.

Both costophrenic angles are clear.

Bony thoracic cage shows no deformity. Visualised bones appear normal.

Soft tissues appear normal.

Impression: Essentially Normal Study.

---End Of The Report---

Preeti

Dr. PREETI P KATHE
DMRE, MD, DNB
2003/04/1886
Radiology

Apollo HOSPITALS

I-14

Apollo Clinic

Name :	Ms. VINITA YELLAMELLI	Age : 38Y 8M 15D	UHID : CVIM.0000229089
Address :	Yerwada Pune Maharashtra INDIA 411006	sex : Female	
Plan :	AROGFEMI MEDIWHEEL FEMALE AHC CREDIT PAN INDIA GP AGREEMENT		OP No: CVIMOPV636819 Bill No: CVIM-OCR-68284 Date: Oct 26th, 2024, 8:48 AM

Sno.	Service Type/Service Name	Department	
1	ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324		
1	ULTRASOUND - WHOLE ABDOMEN — 10	Ultrasound Radiology	
2	OPTHAL BY GENERAL PHYSICIAN	Consultation	
3	URINE GLUCOSE(POST PRANDIAL)	Clinical Pathology	
4	GAMMA GLUTAMYL TRANFERASE (GGT)	Biochemistry	
5	HbA1c, GLYCATED HEMOGLOBIN	Biochemistry	
6	GYNAECOLOGY CONSULTATION	Consultation	
7	DIET CONSULTATION	General	
8	BODY MASS INDEX (BMI)	General	
9	ECG	Cardiology	
10	THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)	Biochemistry	
11	2 D ECHO — 11	Cardiology	
12	BLOOD GROUP ABO AND RH FACTOR	Blood Bank	
13	X-RAY CHEST PA — 06	X Ray Radiology	
14	URINE GLUCOSE(FASTING)	Clinical Pathology	
15	LBC PAP TEST PAPSURE Not willing	Histopathology	
16	FITNESS BY GENERAL PHYSICIAN — 01	Consultation	
17	GLUCOSE, POST PRANDIAL (PP) 2 HOURS (POST MEAL) — 2 hrs.	Biochemistry	
18	GLUCOSE, FASTING	Biochemistry	
19	ENT CONSULTATION	Consultation	
20	LIPID PROFILE	Biochemistry	
21	DENTAL CONSULTATION — 08	Consultation	
22	HEMOGRAM + PERIPHERAL SMEAR	Haematology	
23	PERIPHERAL SMEAR	Haematology	
24	COMPLETE URINE EXAMINATION	Clinical Pathology	
25	RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)	Biochemistry	
26	LIVER FUNCTION TEST (LFT)	Biochemistry	

Nirmal

CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

of Vinita Yellamelli on 26/10/24

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

	Tick
• Medically Fit	✓
• Fit with restrictions/recommendations Though following restrictions have been revealed, in my opinion, these are not impediments to the job. 1. USG - ut fibroid 2. Grade 1 fatty liver hypercholesterolemia 3. Thyroid dysfunction However the employee should follow the advice/medication that has been communicated to him/her. Review after_____	
• Currently Unfit. Review after_____ recommended	
• Unfit	

Dr._____
Medical Officer
The Apollo Clinic, (Location)

This certificate is not meant for medico-legal purposes

Apollo HOSPITALS

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Date	: 10/26/2024	Department	:General Practice
Patient Name	: Ms. VINITA YELLAMELLI	Doctor	: Dr.ALIA FATHIMA
UHID	: CVIM.0000229089	Registration No.	: 9050
Age / Gender	: 38Yrs 8Mths 15Days / Female	Qualification	: MBBS
Consulation Timing	: 8:51 AM		

Height : 153	Weight : 71	BMI : 30	Waist Circum : 92
Temp : 97	Pulse : 78	Resp : 18	B.P : 114/70

General Examination / Allergies History

O/E: conscious oriented

RS
CVS
P/A
CNS
NAD

Clinical Diagnosis & Management Plan

AHC

No c/o at present

Past h/o: hypothyroid 2 Tab.

SX h/o: nil

Fam h/o: father: DM (postmen) S. HTN
Mother: S. HTN
Thyroid.

no addictions

allergy (+) T. Azee

Diet: eggetarian

adv: HPV vaccination

= Post report consulting

Dr. Alia Fathima
M.B.B.S
Registration No. 2024/11/9050

Follow up date:

Doctor Signature

Mis Vinita Yellamelli Reg 301/n

Ele. n.n. – B/c CNC cycles

- Harmonic Actter ca cap 3 ?) (1)

- Fi ness (5)

At night.

Apollo Clinic
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Miss. Vinita Yellamelli
Unmarried. 38 y
not sexually active.

M/H LMP - 4/10/24
4-5/28-30 Reg

Adv
AMH

P/S not done

B/L Breast - NAD

DR. DEEPALI AMOL GALGE
M.B.B.S.,D.G.O.,D.N.B.
OBSTETRICIAN & GYNAECOLOGIST
Reg.No.:2003093495

EYE EXAMINATION

DATE:- 26/10/20

NAME:- Nikita Yellapatti

AGE:- 28

CORPORATE:- Arcofani

	Right Eye	Left Eye.
Distant vision	6/6	6/6
Near vision	N/6	N/6
Color vision	Normal	Normal
Fundus examination	Normal	Normal
Intraocular pressure	Normal	Normal
Slit lamp exam.	Normal	Normal

Dr Ketaki Dar 2013 Redt Nae

Impression – Normal Eye Check Up.

(Ophthalmology)

38 Years Female

Rate 71 Sinus rhythm .....normal P axis, V-rate 50- 99
. Low voltage, precordial leads.....precordial leads <1.0mV

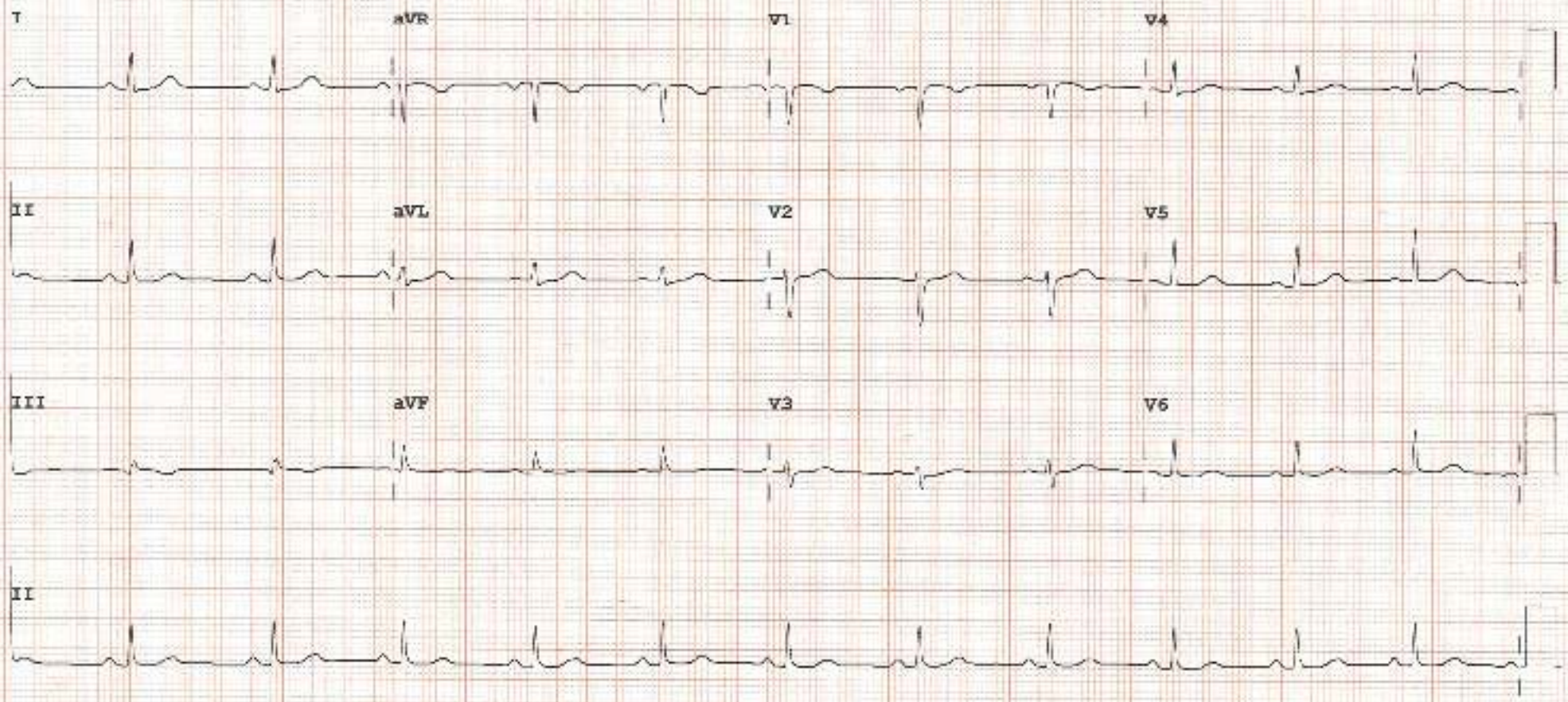
PR 148
QRSD 81
QT 382
QTc 416

--AXIS--
P 46
QRS 42
T 6

- OTHERWISE NORMAL ECG -

12 Lead; Standard Placement

Unconfirmed Diagnosis



Device: Speed: 25 mm/sec Limb: 10 mm/mV Chest: 10.0 mm/mV F 50~ 0.50- 40 Hz W PH100B CL P?

PHILIPS

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Patient Name	: Ms. VINITA YELLAMELLI	Age	: 38Yrs 8Mths 16Days
UHID	: CVIM.0000229089	OP Visit No.	: CVIMOPV635819
Printed On	: 28-10-2024 09:54 AM	Advised/Pres Doctor	: --
Department	: Radiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employeeid	: 22E34293		

DEPARTMENT OF RADIOLOGY

ULTRASOUND ABDOMEN AND PELVIS

Liver appears normal in size and bright in 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.

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Both ovaries appear normal in size, shape and echotexture.
No evidence of any adnexal pathology noted.

Bowel loops and Retroperitoneum appear normal. Aorta and IVC appear normal.
No abnormal lymphadenopathy noted.

IMPRESSION:-
Grade I fatty liver.
Calcular concretions noted in both kidneys mid poles.
Uterus shows posterior wall intra-mural fibroid.

(The sonography findings should always be considered in correlation with the clinical and other investigation finding where applicable.)

---End Of The Report---

Preeti

Dr. PREETI P KATHE
DMRE, MD, DNB
2003/04/1886
Radiology

Apollo Clinic
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Patient Name	: Ms. VINITA YELLAVELLI	Age	: 38Yrs 8Mths 16Days
UHID	: CVIM.0000229089	OP Visit No.	: CVIMOPV636819
Printed On	: 25-10-2024 06:35 AM	Advised/Pres Doctor	: --
Department	: Radiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employee Id	: 22F34293		

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Trachea appears normal.

Both the lung fields are clear.

Cardiac shadows appear apparently normal.

Both domes of diaphragm appear normal.

Both costophrenic angles are clear.

Bony thoracic cage shows no deformity. Visualised bones appear normal.

Soft tissues appear normal.

Impression: Essentially Normal Study.

---End Of The Report---

Preeti

Dr. PREETI P KATHE
DMRE, MD, DNB
2003/04/1886
Radiology

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CONSENT FORM

Patient Name: Vinita Y Wanveli Age: 38

UHID Number: ..... Company Name: BOB

I Mr/Mrs/Ms ..... Employee of .....

(Company) Want to inform you that I am not interested in getting Pap smear + Dental checkup

Tests done which is a part of my routine health check package.

And I claim the above statement in my full consciousness.

Patient Signature: ..... Date: 26/10/24

Apollo
TOUCHING LIVES

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Apollo Clinic

CONSENT FORM

Patient Name: Vinila Yellamelli Age: 38

UHID Number: ..... Company Name: .....

I Mr/Mrs/Ms Vinita Employee of .....

(Company) Want to Inform you that I am not interested in getting Urine R/Urine PP + PapSmear + Diet.

Tests done which is a part of my routine health check package.

And I claim the above statement in my full consciousness.

Patient Signature: Yellamelli Date: 26/10/24

Apollo
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Certificate No: MC-5697

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Patient Name	: Ms.VINITA YELLAMELLI	Collected	: 26/Oct/2024 09:10AM
Age/Gender	: 38 Y 8 M 15 D/F	Received	: 26/Oct/2024 01:49PM
UHID/MR No	: CVIM.0000229089	Reported	: 26/Oct/2024 02:19PM
Visit ID	: CVIMOPV636819	Status	: Final Report
Ref Doctor	: Self	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 22E34293		

DEPARTMENT OF HAEMATOLOGY

PERIPHERAL SMEAR , *WHOLE BLOOD EDTA*

RBC's Anisocytosis+, Microcytes+,
WBC's are normal in number and morphology
Platelets are Adequate
No hemoparasite seen.

DR.Sanjay Ingle
M.B.B.S,M.D(Pathology)
Consultant Pathologist

SIN No:VIR241003168
This test has been performed at Apollo Health and Lifestyle ltd- Sadashiv Peth Pune, Diagnostics Lab

Apollo Health and Lifestyle Limited CIN: U85110TG2000PLC115078
Regd. Office: 1-10-60/62, Ashoka Rajdapath Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500016 | www.apollohl.com | Email: Diagnostics@apollohl.com, Ph No. 040-40041777, Fax No: 4004 7744
Hyd Millenium Premises Cooperative Society Limited, Shop No.01 & 5th Floor, Building "C", Viman Nagar, Pune, Maharashtra - India - 411014
1860 500 7788
www.apollofortlinic.com
APOLLO CLINICS NETWORK
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Apollo

Apollo Clinic
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Certificate No: MC-5697

Patient Name	: Ms.VINITA YELLAMELLI	Collected	: 26/Oct/2024 09:10AM
Age/Gender	: 38 Y 8 M 15 D/F	Received	: 26/Oct/2024 01:49PM
UHID/MR No	: CVIM.0000229089	Reported	: 26/Oct/2024 02:19PM
Visit ID	: CVIMOPV636819	Status	: Final Report
Ref Doctor	: Self	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 22E34293		

DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
HEMOGRAM , *WHOLE BLOOD EDTA*				
HAEMOGLOBIN	12.9	g/dL	12-15	Spectrophotometer
PCV	38.90	%	36-46	Electronic pulse & Calculation
RBC COUNT	**5.07**	Million/cu.mm	3.8-4.8	Electrical Impedence
MCV	**76.6**	fL	83-101	Calculated
MCH	**25.5**	pg	27-32	Calculated
MCHC	33.3	g/dL	31.5-34.5	Calculated
R.D.W	**15.4**	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	**10,450**	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	64.4	%	40-80	Electrical Impedance
LYMPHOCYTES	29.8	%	20-40	Electrical Impedance
EOSINOPHILS	**0.8**	%	1-6	Electrical Impedance
MONOCYTES	4.9	%	2-10	Electrical Impedance
BASOPHILS	0.1	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	6729.8	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	**3114.1**	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	83.6	Cells/cu.mm	20-500	Calculated
MONOCYTES	512.05	Cells/cu.mm	200-1000	Calculated
BASOPHILS	10.45	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	2.16		0.78- 3.53	Calculated
PLATELET COUNT	376000	cells/cu.mm	150000-410000	Electrical impedence
ERYTHROCYTE SEDIMENTATION RATE (ESR)	6	mm at the end of 1 hour	0-20	Modified Westergren

PERIPHERAL SMEAR

RBC's Anisocytosis+, Microcytes+,
WBC's are normal in number and morphology
Platelets are Adequate
No hemoparasite seen.

DR.Sanjay Ingle
M.B.B.S,M.D(Pathology)
Consultant Pathologist

SIN No:VIR241003168
This test has been performed at Apollo Health and Lifestyle ltd- Sadashiv Peth Pune, Diagnostics Lab

Apollo Health and Lifestyle Limited (CIN: L85110TG2000PLC115819)
Regd. Office: 7-1-616/2, Ameerpet, Dharam Karan, 5th Floor, Begumpet, Hyderabad, Telangana - 500016
www.apollolabs.com | Email: ... Ph No: 040-4904 7777, Fax No: 4904 7744
Apollo Health and Lifestyle Limited, Cooperative Society Limited, Shop No 01 & 509 Floor, Building "C", Vikas Nagar, Pune, Maharashtra, India - 411014
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www.apolloclinic.com
APOLLO CLINIC NETWORK
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Apollo
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Certificate No: MC-5697

Apollo Clinic
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Patient Name	: Ms.VINITA YELLAMELLI	Collected	: 26/Oct/2024 09:10AM
Age/Gender	: 38 Y 8 M 15 D/F	Received	: 26/Oct/2024 01:49PM
UHID/MR No	: CVIM.0000229089	Reported	: 26/Oct/2024 02:19PM
Visit ID	: CVIMCPV636819	Status	: Final Report
Ref Doctor	: Self	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 22E34293		

DEPARTMENT OF HAEMATOLOGY

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

DR.Sanjay Ingle
M.B.B.S,M.D(Pathology)
Consultent Pathologist

SIN No:VIR241003168

This test has been performed at Apollo Health and Lifestyle ltd- Sadashiv Peth Pune, Diagnostics Lab

Apollo Health and Lifestyle Limited CIN - L85110TG2000PLC115810
Hyd Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016 | www.apollohl.com | Email: Diagnostics@apollohl.com, Ph No: 040 4904 7777, Fax No: 4904 7700
Hyd Bilekahalli Premises Cooperative Society Limited, Shop No.S1 & S2 (Part), Building No., Vision Heaven, Pune, Maharashtra, India - 411014
1860 500 7788
www.apollonlinic.com
APOLLO CLINICS NETWORK
Telangana: Hyderabad (Kukatpally | Chanda Nagar | Kondapur | Nallakunta | Kowkur) | Maharashtra: Nigdi | Andhra Pradesh: Vizag | Karnataka: Bangalore (Basavanagudi | Jalahalli | Bellandur | Sadashiv Sky | Hosur Road | HSR Layout | Indira

Apollo
TOUCHING LIVES

Apollo Clinic
Expertise. Closer to you.

Certificate No: MC-5697

Patient Name	: Ms.VINITA YELLAMELLI	Collected	: 26/Oct/2024 09:10AM
Age/Gender	: 38 Y 8 M 15 D/F	Received	: 26/Oct/2024 01:49PM
UHID/MR No	: CVIM 0000229089	Reported	: 26/Oct/2024 03:03PM
Visit ID	: CVIMOPV636619	Status	: Final Report
Ref Doctor	: Self	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 22E34293		

DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
BLOOD GROUP ABO AND RH FACTOR , *WHOLE BLOOD EDTA*				
BLOOD GROUP TYPE	O			Microplate Hemagglutination
Rh TYPE	Positive			Microplate Hemagglutination

Dr Sneha Shah
MBBS, MD (Pathology)
Consultant Pathologist

SIN No:VTR241003168

This test has been performed at Apollo Health and Lifestyle ltd- Sadashiv Peth Pune, Diagnostics Lab

Apollo Health and Lifestyle Limited (CIN: U85110TG2008PLC158193)
Regd. Office: 1-10-85/92, Adeeb Rajkapoor Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500016
www.apollohl.com | Email: Ehospital@apollohl.com, Ph No: 040-4814 7777, Fax No: 4814 7744
Ipad Millenium Premises Cooperative Society, Limited, Nos. 51 & 56 Floor, Building "C", Aundh Nagar, Pune, Maharashtra, India - 411014
1860 500 7788
www.apolloclinic.com
Hyderabad (HO, Ameerpet, Chanda Nagar) | Secunderabad | Nalgonda | Nizamabad | Warangal | Andhra Pradesh: Vizag, Gachibowli, Nellore | Karnataka: Bangalore (Bannerghatta, Koramangala, Whitefield, Electronic City, Hosur Road, HSR Layout) | India

Apollo

Certificate No: MC-5697

Apollo Clinic
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Patient Name	: Ms.VINITA YELLAMELLI	Collected	: 26/Oct/2024 11:39AM
Age/Gender	: 38 Y 8 M 15 D/F	Received	: 26/Oct/2024 03:28PM
UHID/MR No	: CVIM.0000229089	Reported	: 26/Oct/2024 05:11PM
Visit ID	: CVIMOPV636819	Status	: Final Report
Ref Doctor	: Self	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 22E34293		

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, FASTING , *NAF PLASMA*	80	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:

1.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.

2. 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)*	88	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.

DR.Sanjay Ingle
M.B.B.S,M.D(Pathology)
Consultant Pathologist

SIN No:VIR241003292

This test has been performed at Apollo Health and Lifestyle ltd- Sadashiv Peth Pune, Diagnostics Lab

Apollo Health and Lifestyle Limited CIN - U85110TG2000PLC113819
Regd. Office: 1-10-60/2, Adeeb Roshpathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500016
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Certificate No: MC-5697

Patient Name	: Ms.VINITA YELLAMELLI	Collected	: 26/Oct/2024 09:10AM
Age/Gender	: 39 Y 8 M 15 D/F	Received	: 26/Oct/2024 01:50PM
UHID/MR No	: CVIM.0000229089	Reported	: 26/Oct/2024 04:49PM
Visit ID	: CVIMOPV636819	Status	: Final Report
Ref Doctor	: Self	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 22E34293		

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
HBA1C (GLYCATED HEMOGLOBIN) , *WHOLE BLOOD EDTA*				
HBA1C, GLYCATED HEMOGLOBIN	5.6	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	114	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)

DR.Sanjay Ingle
M.B.B.S,M.D(Pathology)
Consultant Pathologist

SIN No:VIR241003172

This test has been performed at Apollo Health and Lifestyle ltd- Sadashiv Peth Pune, Diagnostics Lab

Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)
Regd. Office: 5-10-193/2, Ashoka Rajyaprabha Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500016 | www.apollohl.com | Email: Diagnostics@apollohl.com, Ph No: 040-4944 7777, Fax No: 4944 7755
Hyd Milkman Premises Cooperative Society Limited, Shop No 51 & 56 Floor, Hakikat CC, Khan Nagar, Pune, Maharashtra, India - 411014
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Patient Name	: Ms.VINITA YELLAMELLI	Collected	: 26/Oct/2024 09:10AM
Age/Gender	: 38 Y 8 M 15 D/F	Received	: 26/Oct/2024 01:55PM
UHID/MR No	: CVIM.0000229089	Reported	: 26/Oct/2024 03:18PM
Visit ID	: CVIMOPV838819	Status	: Final Report
Ref Doctor	: Self	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 22E34293		

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
LIPID PROFILE , *SERUM*				
TOTAL CHOLESTEROL	**226**	mg/dL	<200	CHO-POD
TRIGLYCERIDES	108	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	**36**	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	**190**	mg/dL	<130	Calculated
LDL CHOLESTEROL	**168.39**	mg/dL	<100	Calculated
VLDL CHOLESTEROL	21.63	mg/dL	<30	Calculated
CHOL / HDL RATIO	**6.32**		0-4.97	Calculated
ATHEROGENIC INDEX (AIP)	**0.12**		<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

DR.Sanjay Ingle
M.B.B.S.M.D(Pathology)
Consultent Pathologist

SIN No:VIR24100317I

This test has been performed at Apollo Health and Lifestyle ltd- Sadashiv Peth Pune, Diagnostics Lab

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Patient Name	: Ms.VINITA YELLAMELLI	Collected	: 26/Oct/2024 09:10AM
Age/Gender	: 38 Y 8 M 15 D/F	Received	: 26/Oct/2024 01:55PM
UHID/MR No	: CVIM.0000229089	Reported	: 26/Oct/2024 03:16PM
Visit ID	: CVIMOPV636819	Status	: Final Report
Ref Doctor	: Self	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 22E34293		

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
LIVER FUNCTION TEST (LFT) , *SERUM*				
BILIRUBIN, TOTAL	0.55	mg/dL	0.3–1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.09	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.46	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	19.47	U/L	<35	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	18.5	U/L	<35	IFCC
AST (SGOT) / ALT (SGPT) RATIO (DE RITIS)	1.0		<1.15	Calculated
ALKALINE PHOSPHATASE	78.80	U/L	30-120	IFCC
PROTEIN, TOTAL	**6.52**	g/dL	6.6-8.3	Biuret
ALBUMIN	3.58	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.94	g/dL	2.0-3.5	Calculated
A/G RATIO	1.22		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 > 1In Alcoholic Liver Disease AST: ALT usually >2. This ratio is also seen to be increased in NAFLD, Wilsons'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.

DR.Sanjay Ingle
M.B.B.S,M.D(Pathology)
Consultant Pathologist

SIN No:VIR241003171

This test has been performed at Apollo Health and Lifestyle ltd- Sadashiv Peth Pune, Diagnostics Lab

Apollo Health and Lifestyle Limited
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Patient Name	: Ms.VINITA YELLAMELLI	Collected	: 26/Oct/2024 09:10AM
Age/Gender	: 38 Y 8 M 15 D/F	Received	: 26/Oct/2024 01:55PM
UHID/MR No	: CVIM.0000229089	Reported	: 26/Oct/2024 03:18PM
Visit ID	: CVIMOPV636819	Status	: Final Report
Ref Doctor	: Self	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 22E34293		

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , *SERUM*				
CREATININE	0.74	mg/dL	0.55-1.02	Modified Jaffe, Kinetic
UREA	18.89	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	8.8	mg/dL	8.0 - 23.0	Calculated
URIC ACID	4.30	mg/dL	2.6-6.0	Uricase PAP
CALCIUM	9.29	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	3.63	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	137.6	mmol/L	136–146	ISE (Indirect)
POTASSIUM	4.0	mmol/L	3.5–5.1	ISE (Indirect)
CHLORIDE	103.46	mmol/L	101–109	ISE (Indirect)
PROTEIN, TOTAL	**6.52**	g/dL	6.6-8.3	Biuret
ALBUMIN	3.58	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.94	g/dL	2.0-3.5	Calculated
A/G RATIO	1.22		0.9-2.0	Calculated

DR.Sanjay Ingle
M.B.B.S,M.D(Pathology)
Consultant Pathologist

SIN No:VTR241003171

This test has been performed at Apollo Health and Lifestyle ltd- Sadashiv Peth Pune, Diagnostics Lab

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Patient Name	: Ms.VINITA YELLAMELLI	Collected	: 26/Oct/2024 09:10AM
Age/Gender	: 38 Y 8 M 15 D/F	Received	: 26/Oct/2024 01:55PM
UHID/MR No	: CVIM.0000229089	Reported	: 26/Oct/2024 03:18PM
Visit ID	: CVIMOPV636818	Status	: Final Report
Ref Doctor	: Self	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 22E34293		

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , *SERUM*	25.48	U/L	<38	IFCC

DR.Sanjay Ingle
M.B.B.S,M.D(Pathology)
Consultant Pathologist

SIN No:VIR24100317I

This test has been performed at Apollo Health and Lifestyle ltd- Sadashiv Peth Pune, Diagnostics Lab

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Patient Name	: Ms.VINITA YELLAMELLI	Collected	: 26/Oct/2024 08:10AM
Age/Gender	: 38 Y 8 M 15 D/F	Received	: 26/Oct/2024 01:10PM
UHID/MR No	: CVIM.0000229089	Reported	: 26/Oct/2024 02:09PM
Visit ID	: CVIMCPV636819	Status	: Final Report
Ref Doctor	: Self	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 22F34293		

DEPARTMENT OF IMMUNOLOGY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
THYROID PROFILE TOTAL (T3, T4, TSH) , *SERUM*				
TRI-IODOTHYRONINE (T3, TOTAL)	1.48	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	**15.89**	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	**7.704**	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

DR.Sanjay Ingle
M.B.B.S,M.D(Pathology)
Consultent Pathologist

SIN No:VIR241003174

This test has been performed at Apollo Health and Lifestyle ltd- Sadashiv Peth Pune. Diagnostics Lab

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Certificate No: MC-5697

Patient Name	: Ms.VINITA YELLAMELLI	Collected	: 26/Oct/2024 08:10AM
Age/Gender	: 38 Y 8 M 15 D/F	Received	: 26/Oct/2024 01:10PM
UHID/MR No	: CVIM.0000229089	Reported	: 26/Oct/2024 02:09PM
Visit ID	: CVIMOPV636819	Status	: Final Report
Ref Doctor	: Self	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 22E34293		

DEPARTMENT OF IMMUNOLOGY

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

High	High	High	High	Pituitary Adenoma; TSHoma/Thyrotropinoma

DR.Sanjay Ingle
M.B.B.S,M.D(Pathology)
Consultant Pathologist

SIN No:VIR241003174

This test has been performed at Apollo Health and Lifestyle ltd- Sadashiv Peth Pune, Diagnostics Lab

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Patient Name	: Ms.VINITA YELLAMELLI	Collected	: 26/Oct/2024 09:10AM
Age/Gender	: 38 Y 8 M 15 D/F	Received	: 26/Oct/2024 03:11PM
UHID/MR No	: CVIM.0000229089	Reported	: 26/Oct/2024 03:47PM
Visit ID	: CVIMOPV636819	Status	: Final Report
Ref Doctor	: Self	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 22E34293		

DEPARTMENT OF CLINICAL PATHOLOGY

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

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

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

Result/s to Follow:
COMPLETE URINE EXAMINATION (CUE)

Sneha Shah

Dr Sneha Shah
MBBS, MD (Pathology)
Consultant Pathologist

SIN No:VIR241003173
This test has been performed at Apollo Health and Lifestyle ltd- Sadashiv Peth Pune, Diagnostics Lab

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Patient Name	: Ms.VINITA YELLAMELLI	Collected	: 26/Oct/2024 09:10AM
Age/Gender	: 38 Y 8 M 15 D/F	Received	: 26/Oct/2024 03:11PM
UHID/MR No	: CVIM.0000229089	Reported	: 26/Oct/2024 03:47PM
Visit ID	: CVIMOPV636819	Status	: Final Report
Ref Doctor	: Self	Sponsor Name	: ARCOFFMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 22E34293		

TERMS AND CONDITIONS GOVERNING THIS REPORT

1. Reported results are for information and interpretation of the referring doctor or such other medical professionals, who understandreporting units, reference ranges and limitation of technologies.Laboratories not be responsible for any interpretation whatsoever.
2. It is presumed that the tests performed are, on the specimen / sample being to the patient named or identified and the verifications of particulars have been confirmed by the patient or his / her representative at the point of generation of said specimen.
3. The reported results are restricted to the given specimen only. Results may vary from lab to lab and from time to time for the same parameter for the same patient (within subject biological variation).
4. The patient details along with their results in certain cases like notifiable diseases and as per local regulatory requirements will be communicated to the assigned regulatory bodies.
5. The patient samples can be used as part of internal quality control, test verification, data analysis purposes within the testing scope of the laboratory.
6. This report is not valid for medico legal purposes. It is performed to facilitate medical diagnosis only.

Sneha Shah

Dr Sneha Shah
MBBS, MD (Pathology)
Consultant Pathologist

SIN No:VIR241003173

This test has been performed at Apollo Health and Lifestyle ltd- Sadashiv Peth Pune, Diagnostics Lab

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2D ECHO/COLOUR DOPPLER

NAME	VINITA YELLAMELLI
AGE & SEX	37 /FEMALE
DATE	26/10/2024
REF:	

AO-24mm; LA-28 mm; IVS- 10mm; LVIDd-39 mm; PW-10mm; LVIDS: 25mm; LVEF-60%.

MITRAL VALVE: Normal leaflets.No MR

AORTIC VALVE: Normal leaflets.

TRICUSPID VALVE: Normal tricuspid leaflets. No tricuspid regurgitation.

PULMONARY VALVE: Normal leaflets. Normal gradients. No Pulmonary Regurgitation.

LEFT VENTRICLE: : Normal LV size & normal wall thickness.Uniform contractility.Normal LV Systolic Function,LVEF-60%.

PERICARDIUM: Normal

RA & RV: Normal .

IVS & IAS: Intact IAS. No flow seen across it.

IMPRESSION:

NORMAL LV SYSTOLICFUNCTION..LVEF-60%.

NO PAH

DR. PRAMOD NARKHEDE

CONSULTANT INTERVENTIONAL CARDIOLOGIST

MBBS, DNB (MEDICINE). DNB (CARDIOLOGY),F.S.C.A.I, F,I,S,H.

MMC NO 2004/ 09 / 3195