

Patient Name : Mrs.BHAVYA T C	Collected : 09/Dec/2023 08:53AM
Age/Gender : 35 Y 2 M 18 D/F	Received : 09/Dec/2023 11:22AM
UHID/MR No : CMYS.0000058797	Reported : 09/Dec/2023 01:17PM
Visit ID : CMYSOPV120150	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 263689204945	

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324

PERIPHERAL SMEAR , WHOLE BLOOD EDTA

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SIN No:BED230303686

Patient Name : Mrs.BHAVYA T C	Collected : 09/Dec/2023 08:53AM
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DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324

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

HAEMOGLOBIN	13.8	g/dL	12-15	Spectrophotometer
PCV	42.60	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.49	Million/cu.mm	3.8-4.8	Electrical Impedence
MCV	95	fL	83-101	Calculated
MCH	30.7	pg	27-32	Calculated
MCHC	32.4	g/dL	31.5-34.5	Calculated
R.D.W	12.4	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	7,100	cells/cu.mm	4000-10000	Electrical Impedence

DIFFERENTIAL LEUCOCYTIC COUNT (DLC)

NEUTROPHILS	60.7	%	40-80	Electrical Impedence
LYMPHOCYTES	30.5	%	20-40	Electrical Impedence
EOSINOPHILS	1.5	%	1-6	Electrical Impedence
MONOCYTES	6.7	%	2-10	Electrical Impedence
BASOPHILS	0.6	%	<1-2	Electrical Impedence

ABSOLUTE LEUCOCYTE COUNT

NEUTROPHILS	4309.7	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2165.5	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	106.5	Cells/cu.mm	20-500	Calculated
MONOCYTES	475.7	Cells/cu.mm	200-1000	Calculated
BASOPHILS	42.6	Cells/cu.mm	0-100	Calculated

PLATELET COUNT

PLATELET COUNT	292000	cells/cu.mm	150000-410000	Electrical impedence
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ERYTHROCYTE SEDIMENTATION RATE (ESR)

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

RBCs : Majority are normocytic normochromic.
WBCs : are normal in number with normal morphology and distribution.
Platelets : are adequate and seen in clumps and singles.
Hemoparasites : Not seen.

IMPRESSION : NORMOCYTIC NORMOCHROMIC BLOOD PICTURE.



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DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA				
BLOOD GROUP TYPE	O			Forward & Reverse Grouping with Slide/Tube Aggluti
Rh TYPE	NEGATIVE			Forward & Reverse Grouping with Slide/Tube Agglutination



SIN No:BED230303686

Patient Name : Mrs.BHAVYA T C	Collected : 09/Dec/2023 08:52AM
Age/Gender : 35 Y 2 M 18 D/F	Received : 09/Dec/2023 11:05AM
UHID/MR No : CMYS.0000058797	Reported : 09/Dec/2023 11:34AM
Visit ID : CMYSOPV120150	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 263689204945	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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GLUCOSE, FASTING , NAF PLASMA	98	mg/dl	74-106	GOD, POD
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Comment:

As per American Diabetes Guidelines, 2023

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

Note:

- The diagnosis of Diabetes requires a fasting plasma glucose of > or = 126 mg/dL and/or a random / 2 hr post glucose value of > or = 200 mg/dL on at least 2 occasions.
- Very high glucose levels (>450 mg/dL in adults) may result in Diabetic Ketoacidosis & is considered critical.



SIN No:PLF02068008

APOLLO CLINICS NETWORK

Patient Name : Mrs.BHAVYA T C	Collected : 09/Dec/2023 08:53AM
Age/Gender : 35 Y 2 M 18 D/F	Received : 09/Dec/2023 01:21PM
UHID/MR No : CMYS.0000058797	Reported : 09/Dec/2023 02:10PM
Visit ID : CMYSOPV120150	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 263689204945	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD EDTA	4.9	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD EDTA	94	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.

- HbA1C is recommended by American Diabetes Association for Diagnosing Diabetes and monitoring Glycemic Control by American Diabetes Association guidelines 2023.
- Trends in HbA1C values is a better indicator of Glycemic control than a single test.
- Low HbA1C in Non-Diabetic patients are associated with Anemia (Iron Deficiency/Hemolytic), Liver Disorders, Chronic Kidney Disease. Clinical Correlation is advised in interpretation of low Values.
- Falsely low HbA1c (below 4%) may be observed in patients with clinical conditions that shorten erythrocyte life span or decrease mean erythrocyte age. HbA1c may not accurately reflect glycemic control when clinical conditions that affect erythrocyte survival are present.
- In cases of Interference of Hemoglobin variants in HbA1C, alternative methods (Fructosamine) estimation is recommended for Glycemic Control
 - A: HbF >25%
 - B: Homozygous Hemoglobinopathy.
 (Hb Electrophoresis is recommended method for detection of Hemoglobinopathy)



SIN No:EDT230111673

Patient Name : Mrs.BHAVYA T C	Collected : 09/Dec/2023 08:53AM
Age/Gender : 35 Y 2 M 18 D/F	Received : 09/Dec/2023 11:48AM
UHID/MR No : CMYS.0000058797	Reported : 09/Dec/2023 01:11PM
Visit ID : CMYSOPV120150	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 263689204945	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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LIPID PROFILE , SERUM

TOTAL CHOLESTEROL	142	mg/dl	0-200	CHOD
TRIGLYCERIDES	58	mg/dl	0-150	GPO, Trinder
HDL CHOLESTEROL	50	mg/dL	>40	CHE/CHO/POD
NON-HDL CHOLESTEROL	92	mg/dL	<130	Calculated
LDL CHOLESTEROL	80.86	mg/dL	<100	Calculated
VLDL CHOLESTEROL	11.56	mg/dL	<30	Calculated
CHOL / HDL RATIO	2.86		0-4.97	Calculated

Comment:

Reference Interval as per National Cholesterol Education Program (NCEP) Adult Treatment Panel III Report.

	Desirable	Borderline High	High	Very High
TOTAL CHOLESTEROL	< 200	200 - 239	≥ 240	
TRIGLYCERIDES	<150	150 - 199	200 - 499	≥ 500
LDL	Optimal < 100 Near Optimal 100-129	130 - 159	160 - 189	≥ 190
HDL	≥ 60			
NON-HDL CHOLESTEROL	Optimal <130; Above Optimal 130-159	160-189	190-219	>220

- Measurements in the same patient on different days can show physiological and analytical variations.
- NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.
- Primary prevention algorithm now includes absolute risk estimation and lower LDL Cholesterol target levels to determine eligibility of drug therapy.
- Low HDL levels are associated with Coronary Heart Disease due to insufficient HDL being available to participate in reverse cholesterol transport, the process by which cholesterol is eliminated from peripheral tissues.
- As per NCEP guidelines, all adults above the age of 20 years should be screened for lipid status. Selective screening of children above the age of 2 years with a family history of premature cardiovascular disease or those with at least one parent with high total cholesterol is recommended.
- VLDL, LDL Cholesterol Non HDL Cholesterol, CHOL/HDL RATIO, LDL/HDL RATIO are calculated parameters when Triglycerides are below 350mg/dl. When Triglycerides are more than 350 mg/dl LDL cholesterol is a direct measurement.



SIN No:SE04564120

Patient Name : Mrs.BHAVYA T C	Collected : 09/Dec/2023 08:53AM
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UHID/MR No : CMYS.0000058797	Reported : 09/Dec/2023 01:19PM
Visit ID : CMYSOPV120150	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 263689204945	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324

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

BILIRUBIN, TOTAL	0.67	mg/dl	0-1.2	NBD
BILIRUBIN CONJUGATED (DIRECT)	0.16	mg/dl	0-0.2	Diazotized sulfanilic acid
BILIRUBIN (INDIRECT)	0.51	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	17	U/l	0-45	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	18.0	U/l	0-31	IFCC
ALKALINE PHOSPHATASE	85.00	U/l	42-98	IFCC (AMP buffer)
PROTEIN, TOTAL	6.20	g/dl	6.4-8.3	Biuret
ALBUMIN	4.30	g/dl	3.5-5.2	Bromcresol Green
GLOBULIN	1.90	g/dL	2.0-3.5	Calculated
A/G RATIO	2.26		0.9-2.0	Calculated

Comment:

LFT results reflect different aspects of the health of the liver, i.e., hepatocyte integrity (AST & ALT), synthesis and secretion of bile (Bilirubin, ALP), cholestasis (ALP, GGT), protein synthesis (Albumin)

Common patterns seen:

1. Hepatocellular Injury:

- AST – Elevated levels can be seen. However, it is not specific to liver and can be raised in cardiac and skeletal injuries.
- ALT – Elevated levels indicate hepatocellular damage. It is considered to be most specific lab test for hepatocellular injury. Values also correlate well with increasing BMI.
- Disproportionate increase in AST, ALT compared with ALP.
- Bilirubin may be elevated.
- AST: ALT (ratio) – In case of hepatocellular injury AST: ALT > 1 In Alcoholic Liver Disease AST: ALT usually >2. This ratio is also seen to be increased in NAFLD, Wilson's diseases, Cirrhosis, but the increase is usually not >2.

2. Cholestatic Pattern:

- ALP – Disproportionate increase in ALP compared with AST, ALT.
- Bilirubin may be elevated.
- ALP elevation also seen in pregnancy, impacted by age and sex.
- To establish the hepatic origin correlation with GGT helps. If GGT elevated indicates hepatic cause of increased ALP.

3. Synthetic function impairment:

- Albumin- Liver disease reduces albumin levels.
- Correlation with PT (Prothrombin Time) helps.

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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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Patient Name	: Mrs.BHAVYA T C	Collected	: 09/Dec/2023 08:53AM
Age/Gender	: 35 Y 2 M 18 D/F	Received	: 09/Dec/2023 11:48AM
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Visit ID	: CMYSOPV120150	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 263689204945		

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324

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

CREATININE	0.77	mg/dL	0.5-1.04	Creatinine amidohydrolase
UREA	16.23	mg/dl	13-43	Urease, UV
BLOOD UREA NITROGEN	7.6	mg/dL	8.0 - 23.0	Calculated
URIC ACID	4.60	mg/dL	2.5-6.2	Uricase
CALCIUM	9.54	mg/dl	8.6-10.3	Arsenazo III
PHOSPHORUS, INORGANIC	2.99	mg/dl	2.7-4.5	Molybdate
SODIUM	143	mmol/L	135-145	Direct ISE
POTASSIUM	4.1	mmol/L	3.5-5.1	Direct ISE
CHLORIDE	102	mmol/L	98 - 107	Direct ISE



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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	21.00	U/l	0-38	IFCC



SIN No:SE04564120

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Visit ID : CMYSOPV120150	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 263689204945	

DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324

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

TRI-IODOTHYRONINE (T3, TOTAL)	1.24	ng/mL	0.64-1.52	CMIA
THYROXINE (T4, TOTAL)	8.71	µg/dL	4.87-11.72	CMIA
THYROID STIMULATING HORMONE (TSH)	0.820	µIU/mL	0.35-4.94	CMIA

Comment:

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

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

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



SIN No:SPL23178009

Patient Name : Mrs.BHAVYA T C	Collected : 09/Dec/2023 08:53AM
Age/Gender : 35 Y 2 M 18 D/F	Received : 09/Dec/2023 11:31AM
UHID/MR No : CMYS.0000058797	Reported : 09/Dec/2023 01:18PM
Visit ID : CMYSOPV120150	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 263689204945	

DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324

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

PHYSICAL EXAMINATION

COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pH	6.5		5-7.5	Bromothymol Blue
SP. GRAVITY	1.015		1.002-1.030	Dipstick

BIOCHEMICAL EXAMINATION

URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE		NEGATIVE	GOD-POD
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	NITROPRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	EHRlich
BLOOD	NEGATIVE		NEGATIVE	Dipstick
NITRITE	NEGATIVE		NEGATIVE	Dipstick
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	PYRROLE HYDROLYSIS

CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY

PUS CELLS	8 - 10	/hpf	0-5	Microscopy
EPITHELIAL CELLS	6 - 8	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY



SIN No:UR2237302

Patient Name : Mrs.BHAVYA T C	Collected : 09/Dec/2023 10:33AM
Age/Gender : 35 Y 2 M 18 D/F	Received : 10/Dec/2023 10:42AM
UHID/MR No : CMYS.0000058797	Reported : 11/Dec/2023 05:09PM
Visit ID : CMYSOPV120150	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 263689204945	

DEPARTMENT OF CYTOLOGY

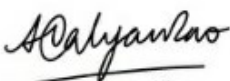
ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324


LBC PAP TEST (PAPSURE) , CERVICAL SAMPLE

	CYTOLOGY NO.	20617/23
I	SPECIMEN	
a	SPECIMEN ADEQUACY	ADEQUATE
b	SPECIMEN TYPE	LIQUID-BASED PREPARATION (LBC)
	SPECIMEN NATURE/SOURCE	CERVICAL SMEAR
c	ENDOCERVICAL-TRANSFORMATION ZONE	PRESENT WITH ENDOCERVICAL CELLS
d	COMMENTS	SATISFACTORY FOR EVALUATION
II	MICROSCOPY	Superficial and intermediate squamous epithelial cells with benign morphology. Inflammatory cells, predominantly neutrophils. Negative for intraepithelial lesion/ malignancy.
III	RESULT	
a	EPITHEIAL CELL	
	SQUAMOUS CELL ABNORMALITIES	NOT SEEN
	GLANDULAR CELL ABNORMALITIES	NOT SEEN
b	ORGANISM	NIL
IV	INTERPRETATION	NEGATIVE FOR INTRAEPITHELIAL LESION OR MALIGNANCY

Pap Test is a screening test for cervical cancer with inherent false negative results. Regular screening and follow-up is recommended (Bethesda-TBS-2014) revised

*** End Of Report ***


Dr. A. Kalyan Rao
M.B.B.S, M.D (Pathology)
Consultant Pathologist


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

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SIN No:CS071097

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

Patient Name : Mrs. BHAVYA T C

Age/Gender : 35 Y/F

UHID/MR No. : CMYS.0000058797

OP Visit No : CMYSOPV120150

Sample Collected on :

Reported on : 09-12-2023 16:30

LRN# : RAD2173167

Specimen :

Ref Doctor : SELF

Emp/Auth/TPA ID : 263689204945

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

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

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

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

PANCREAS: It is normal.

RIGHT KIDNEY: It measures 96x45 mm with parenchymal thickness of 15 mm. It is normal in size, outline and echotexture. No e/o calculus or hydronephrosis seen.

LEFT KIDNEY: It measures 93x39 mm with parenchymal thickness of 12mm. It is normal in size, outline and echotexture. No e/o calculus or hydronephrosis seen.

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

UTERUS: It is anteverted and measures 69x36x55 mm with ET= 09mm. It is normal in size, outline and echotexture. No mass lesion.

Rt. OVARY: It measures 29x27 mm. It is normal. No mass lesion seen.

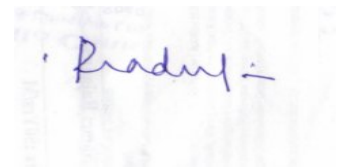
Lt. OVARY: It measures 32x27 mm. It is normal. No mass lesion seen.

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

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

IMPRESSION: NORMAL STUDY.

Pradeep Kumar C N, DNB
Consultant Radiologist.



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

Date : 09-12-2023
 MR NO : CMYS.0000058797
 Name : Mrs. BHAVYA T C
 Age/ Gender : 35 Y / Female

Department : LABORATORY
 Doctor :
 Registration No :
 Qualification :

Consultation Timing: 08:41

Height : 153	Weight : 60.8	BMI :	Waist Circumf:
Temp :	Pulse :	Resp :	B.P : 100 / 70

General Examination /
 Allergies History
 PH -
 AH -
 USH - normal
 urine cl/s →
 11/12/23

Clinical Diagnosis & Management Plan

MI - regular walk
 mid flow
 Imp → 21/11/23. breast VAD.

MI → 9 yrs. P/L -
 I-FIND.

study.

Adv: regular walk / exercise.
 avoid junk food.

Follow up date :

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

Date : 09-12-2023
 MR NO : CMYS.0000058797
 Name : Mrs. BHAVYA T C
 Age/ Gender : 35 Y / Female

Department : LABORATORY Diabetics
 Doctor : Madhura. B.P
 Registration No :
 Qualification : M.Sc Nutrition & Dietetics
 PhD*

Consultation Timing: 08:41

IBW - 51kg

Height : 153	Weight : 60.8	BMI : 25.6 kg/m ²	Waist Circum : 90
Temp :	Pulse :	Resp :	B.P : 100/70

General Examination /
 Allergies History

Vitamin D - 8.8

Clinical Diagnosis & Management Plan

- ⇒ Advise a low calorie high protein diet with fiber rich foods.
- ⇒ Take small frequent meals. Do not skip meals.
- ⇒ Include all variety of seasonal fruits, vegetables and green leafy vegetables.
- ⇒ Include nuts like Almonds, walnuts & dry fruits like dried dates & raisins.
- ⇒ Include seeds like flaxseed, sunflower seeds, watermelon seeds, sesame seeds & watermelon seeds - 1 teaspoon each, dry roasted.
- ⇒ Cooking oil - 1/2 tsp per person per mouth. Use combination of oils like Rice Bran oil, Mustard oil, Groundnut oil, Canola oil, coconut oil & Olive oil.
- ⇒ Avoid maida, sugar, fatty salt, bakery soda, creams.

Follow up date :

Calcium - 1 teaspoon each

Doctor Signature : P.P
 21/12/2023
 # 23, 1st Floor,
 Kalidasa Road, Mysore - 02
 Ph: 0820-400640/41

Date : 09-12-2023
MR NO : CMYS.0000058797
Name : Mrs. BHAVYA T C
Age/ Gender : 35 Y / Female

Department : LABORATORY
Doctor :
Registration No : *H Praveen Kumar*
Qualification : *MS (ENT)*

Consultation Timing: 08:41

Height : <i>153</i>	Weight : <i>60.8</i>	BMI :	Waist Circum :
Temp :	Pulse :	Resp :	B.P : <i>100/70</i>

General Examination /
Allergies History

Clinical Diagnosis & Management Plan

Came for regular health checkup

Ears - Bilateral TM - normal

Nose - nasal mucosa - @

Oral cavity & oropharynx - normal

neck - @

As - heard

Follow up date :

[Signature]
Apollon Clinic
23, 1st Floor,
Kalidasa Road, Mysore - 02
Ph : 0821-4006040/41

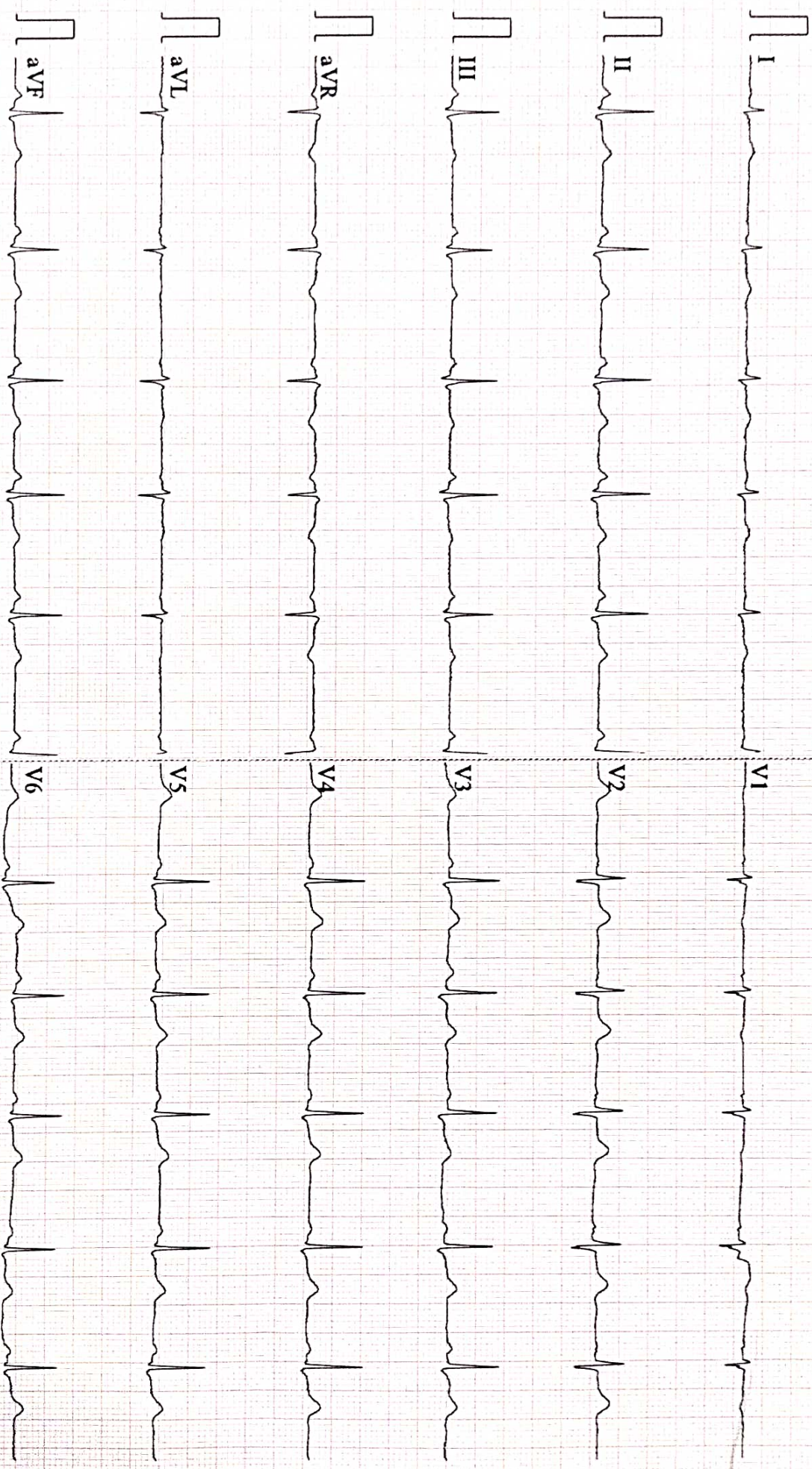
ID: 58/9/
MRS BHAVYA T C
Female 35 Years
153cm 60kg 100/70 mmHg

09-12-2023 10:04:14 AM

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

Diagnosis Information:

Unconfirmed Report.



0.5-45Hz AC50 25mm/s 10mm/mV 2*5.0s 67 CARDIART

D V1.43 Glasgow V28.6.0 APOLLO CLINIC MYSURU

Patient Name: Mrs .Bhavya T C	Date : 09.12.2023	Referring Doctor: Dr .Self
Age / Sex: 35 Yrs/Female	UHID NO:58797	Location : OP
ULTRASONOGRAPHY- ABDOMEN & PELVIS		

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

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

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

PANCREAS: It is normal.

RIGHT KIDNEY: It measures 96x45 mm with parenchymal thickness of 15 mm. It is normal in size, outline and echotexture. No e/o calculus or hydronephrosis seen.

LEFT KIDNEY: It measures 93x39 mm with parenchymal thickness of 12mm. It is normal in size, outline and echotexture. No e/o calculus or hydronephrosis seen.

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

UTERUS: It is anteverted and measures 69x36x55 mm with ET= 09mm. It is normal in size, outline and echotexture. No mass lesion.

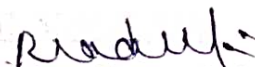
Rt. OVARY: It measures 29x27 mm. It is normal. No mass lesion seen.

Lt. OVARY: It measures 32x27 mm. It is normal. No mass lesion seen.

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

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

IMPRESSION: NORMAL STUDY.


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

Apollo Health and Lifestyle Limited

(CIN: U65110TG2000PLC115819)

Regd. Office: 1-10-60-62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016

Ph. No: 040 4904 7777, Fax No: 4904 7744 | Email ID: enquiry@apollohi.com | www.apollohi.com

APOLLO CLINICS NETWORK KARNATAKA

Bangalore: Basavanagudi | Bellandur | Electronic City | Fraser Town | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli |

Koramangala | Marajapur Road | Mysore (VV Mohalla)

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

 **1860 500 7788**

Apollo

Informed Consent/Declaration For Test Exclusion

Patient Name: Bhavya . T.C Age: 35 Years

UHID Number: 58797

Please tick and sign the relevant part

I certify that I will skip Physician Consultation Test from my own.

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

Patient signature: [Signature] Date: 09/12/23

Witness signature: N. Blitha . R Date: 09/12/23

Apollo Clinic
25, 1st floor,
Kalidasa Road, Mysore - 02
Ph : 0821-4006040/41