

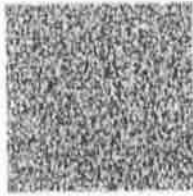


భారత ప్రభుత్వం  
Government of India

భారత విశిష్ట గుర్తింపు ప్రాధికార సంస్థ  
Unique Identification Authority of India

రిజిస్ట్రేషన్/Enrolment No.: 0000/00286/04790

To  
చిలకా విమల దేవి  
Chilaka Vimala Devi  
Chilaka chokka rao  
6-155-03  
14 th ward  
Chinakakani mangalagiri  
Kolla faram main road chinakakani  
Chinakakani  
Guntur Andhra Pradesh - 522503  
9581555455



మీ ఆధార్ సంఖ్య / Your Aadhaar No. :

5718 6042 8892  
VID : 9192 0405 4965 0525

నా ఆధార్, నా గుర్తింపు



భారత ప్రభుత్వం  
Government of India



చిలకా విమల దేవి  
Chitaka Vimala Devi  
పుట్టిన తేదీ/DOB: 21/04/1969  
FEMALE

5718 6042 8892  
VID : 9192 0405 4965 0525

నా ఆధార్, నా గుర్తింపు



Government of India



సమాచారము / INFORMATION

- ఆధార్ అనేది గుర్తింపు రుజువు, పౌరసత్వానికి కాదు.
- ఆధార్ ప్రత్యేకమైనది మరియు సురక్షితమైనది.
- సురక్షిత QR కోడ్/ఆఫ్లైన్ XML/ఆఫ్లైన్ ప్రమాణీకరణలు అవయోగించి గుర్తింపును తప్పిపోయింది.
- ఆధార్ లెటర్, PVC కార్డు, 3 ఆధార్, 5 ఆధార్ వంటి అన్ని రకాల ఆధార్ లు సమానంగా చెల్లుబాటు అవుతాయి. 12 అంకాల ఆధార్ నంబర్ ఫ్రీసెంట్ వచ్చిన ఆధార్ అసెంబ్లీ (VID)ని కూడా అవయోగించవచ్చు.
- ప్రతి 10 సంవత్సరాలకు ఒకసారి ఆధార్ ను అప్డేట్ చేయండి.
- నివేదిక ప్రభుత్వ మరియు ప్రభుత్వాలకు ప్రయోజనాలు/సేవలను పొందడంలో ఆధార్ మీకు సహాయపడుతుంది.
- మీ ముద్దర నంబర్ మరియు ఈ-మెయిల్ అడ్రస్ ఆధార్ లో అప్డేట్ చేసుకోండి.
- ఆధార్ సేవలను పొందేందుకు స్మార్ట్ ఫోన్లలో మీ ఆధార్ యాప్‌ను డౌన్లోడ్ చేసుకోండి.
- తల్లిదండ్రుల విశ్వాసించదానికే లాక/అన్లక్ ఆధార్/బయోమెట్రిక్స్ చివరికి అవయోగించండి.
- ఆధార్ ను అప్డేట్ చేయండి మరియు దానిని సమర్పించి పొందవలసి అవుతుంది.
- Aadhaar is a proof of identity, not of citizenship.
- Aadhaar is unique and secure.
- Verify identity using secure QR code/offline XML/online Authentication.
- All forms of Aadhaar like Aadhaar letter, PVC Cards, eAadhaar and mAadhaar are equally valid. Virtual Aadhaar Identity (VID) can also be used in place of 12 digit Aadhaar number.
- Update Aadhaar at least once in 10 years.
- Aadhaar helps you avail various Government and Non-Government benefits/services.
- Keep your mobile number and email id updated in Aadhaar.
- Download mAadhaar app on smart phones to avail Aadhaar Services.
- Use the feature of lock/unlock Aadhaar/biometrics to ensure security.
- Entities seeking Aadhaar are obligated to seek due consent.

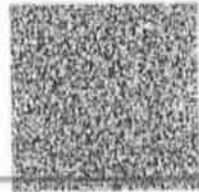


భారత విశిష్ట గుర్తింపు ప్రాధికార సంస్థ  
Unique Identification Authority of India



చిలకా విమల దేవి  
చిలకా చొక్కా రావు, 6-155-03, 14 వ వార్డు, చిలకాకాని మంగలగిరి, కొల్లా ఫారం మెయిన్ రోడ్, చిలకాకాని, చిలకాకాని, గుంటూరు, ఆంధ్ర ప్రదేశ్ - 522503

Address:  
Chilaka choikka rao, 6-155-03, 14 th ward,  
Chinakakani mangalagiri, Kolla faram main  
road chinakakani, Chinakakani, Guntur,  
Andhra Pradesh - 522503



5718 6042 8892  
VID : 9192 0405 4965 0525

1947 | help@uidai.gov.in | www.uidai.gov.in

Fwd: Health Check up Booking Request(bobD52346), Beneficiary Code-64560

chilaka vineela <vickyvineela10@gmail.com>

Sat 23-12-2023 10:46

To:Koramangala Apolloclinic <koramangala@apolloclinic.com>

Sent from my iPhone

Begin forwarded message:

**From:** chilaka vineela <vickyvineela10@gmail.com>

**Date:** 23 December 2023 at 10:35:06 AM IST

**To:** koramangala@apolloclinic.co.in

**Subject: Fwd: Health Check up Booking Request(bobD52346), Beneficiary Code-64560**

Sent from my iPhone

Begin forwarded message:

**From:** Mediwheel <wellness@mediwheel.in>

**Date:** 6 December 2023 at 12:36:35 PM IST

**To:** vickyvineela10@gmail.com

**Cc:** customercare@mediwheel.in

**Subject: Health Check up Booking Request(bobD52346), Beneficiary Code-64560**

011-41195959

Email:wellness@mediwheel.in

Dear **Chilaka Vimala Devi**,

Thanks for booking Health Checkup, please make the payment for the confirmation.

**Booking Date** : 06-12-2023

**Health Check up Name** : Arcofemi MediWheel Full Body Annual Plus Check Advanced  
Female 2D ECHO (Metro)


**Name of Diagnostic/Hospital** : Apollo Medical Centre - Koramangala

**Address of Diagnostic/Hospital** : Plot 51, 5th Block, Opp. Jyothi Nivas College, Koramangala - 560095

**Appointment Date** : 23-12-2023

**Preferred Time** : 8:00am-9:00am

<b>Member Information</b>			
Booked Member Name	Age	Gender	Cost(In INR)
Chilaka Vimala Devi	59	Female	4000
<b>Total amount to be paid</b>		<b>4000</b>	Pay Now
We will get back to you with confirmation update shortly.Please find the package details as attached for your reference.			
<b>Package Name</b>	Arcofemi MediWheel Full Body Annual Plus Check Advanced Female 2D ECHO (Metro) - Includes(43)Tests		
<b>Tests included in this Package</b>	Ecg, TSH, X-ray Chest, Stress Test (tmt)/ 2d Echo, Gynec Consultation, Blood Sugar Postprandial, Dental Consultation, A:g Ratio, Blood Group, Total Cholesterol, Triglycerides, Dietician Consultation, Pap Smear, Fasting Blood Sugar, Ultrasound Whole Abdomen , Glycosylated Haemoglobin (hba1c), Mammography, Ent Consultation , Hdl, Vldl, Urine Analysis, LDL, Total Protine, General Consultation, HDL/ LDL ratio, GGT(Gamma-glutamyl Transferase), Eye Check-up consultation, ALP (ALKALINE PHOSPHATASE), Uric Acid, AST/ALT Ratio, Serum Protein, CBC with ESR, Stool Analysis, Urine Sugar Fasting, Urine Sugar PP, T3, T4, Cholesterol Total / HDL Ratio, BUN, BUN/Creatinine Ratio, Bilirubin Total & Direct and Indirect, Albumin, Globulin		

<b>Name</b> : Mrs. Vimala Devi Chilaka	<b>Age</b> : 54 Y	<b>UHID</b> :CKOR.0000251534
	<b>Sex</b> : F	
<b>Address</b> : NGV koramangala		<b>OP Number</b> :CKOROPV400847
<b>Plan</b> : ARCOFEMI MEDIWHEEL FEMALE AHC CREDIT PAN INDIA OP AGREEMENT		<b>Bill No</b> :CKOR-OCR-81026
		<b>Date</b> : 24.02.2024 08:39

Sno	Service Type/ServiceName	Department
1	ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324	
1	GAMMA GLUTAMYL TRANSFERASE (GGT)	
2	D ECHO	
3	LIVER FUNCTION TEST (LFT)	
4	GLUCOSE, FASTING	
5	HEMOGRAM + PERIPHERAL SMEAR	
6	GYNAECOLOGY CONSULTATION <i>73 12</i>	
7	DIET CONSULTATION	
8	COMPLETE URINE EXAMINATION	
9	URINE GLUCOSE(POST PRANDIAL)	
10	PERIPHERAL SMEAR	
11	ECG <i>123</i>	
12	LBC PAP TEST- PAPSURE <i>123 1</i>	
13	RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)	
14	DENTAL CONSULTATION	
15	GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL)	
16	URINE GLUCOSE(FASTING)	
17	HbA1c, GLYCATED HEMOGLOBIN	
18	X RAY CHEST PA	
19	ENT CONSULTATION <i>Dr. Nigam</i>	
20	FITNESS BY GENERAL PHYSICIAN	
21	BLOOD GROUP ABO AND RH FACTOR	
22	LIPID PROFILE	
23	BODY MASS INDEX (BMI)	
24	OPHTHAL BY GENERAL PHYSICIAN	
25	ULTRASOUND - WHOLE ABDOMEN	
26	THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)	

→ Nigam - Room - 21 2<sup>nd</sup> floor.

- Get a complimentary dental screening
- Get a complimentary eye check Opp. to
- Avail a complimentary session with physiotherapist
- Get a complimentary hearing check

- Room No. 15
- Room No. 11
- Room No. 17
- Room No. 19

BF - 10:15  
PP - 11:30

→ vit ALP 2 vit D + B<sub>12</sub> + cal

Height :- 148 cms  
Weight :- 69 kgs  
BP - 158/84 mm/Hg  
Pulse - 75/min



## Apollo Clinic

### Consent Form

Patient Name: Vinoda Devi Chilata Age: 54

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

I Mr/Mrs/Miss: Vinoda Employee of BOB

(Company) want to inform you that I am not getting the consultation pending after  
reports received.

Test which is a part of health check package.

Reason If any: consultation on 29/02/24

And I claim the above statement in my full consciousness.

Patient Signature: CH. Vinoda Devi Date: 24/02/24

**Apollo Health and Lifestyle Limited**

(CIN - U85110TG2000PLC046089) Regd. Office: #7-1-617/A, 615 & 616, Imperial Towers, 7th Floor ; Ameerpet, Hyderabad, Telangana - 500 038 | Email ID: enquiry@apollohl.com

APOLLO CLINICS NETWORK KARNATAKA

**Bangalore** (Basavanagudi | Bellandur | Electronics City | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli | Koramangala | Sarjapur Road) **Mysore** (Kalidasa Road)

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

**1860 500 7788**

NAME: MRS. VIMALA DEVI CHILAKA

AGE: 54Y

SEX: FEMALE

DATE: 24/02/2024

## ECHOCARDIOGRAPHY REPORT

### MEASUREMENT

AO - 21(20 - 35)mm	LIVD d - 37(36-52)mm	IVS - 10(06 - 11)mm
LA - 24(19- 40)mm	LVID s - 25(23- 39)mm	PWD - 11(06- 11)mm
EF - 60 (>50%)	RVID-24	

### VALVES

Mitral Valve : Normal ,  
Aortic Valve : Normal ,  
Tricuspid Valve : Normal, Trivial TR, RVSP - 22 mm  
Pulmonary Valve : Normal,

### CHAMBERS

Left Atrium : Normal  
Right Atrium : Normal  
Left Ventricle : Normal ,  
Right Ventricle : Normal

### SEPTAE

IVS : Intact  
IAS : Intact

**GREAT ARTERIES**

Aorta : Normal  
Pulmonary Artery : Normal

**DOPPLER DATA**

Mitral : E > A , 0.7 / 0.66  
Aortic : Normal , 1.0 m/s  
Tricuspid : Normal , 0.4 / 0.6  
Pulmonary : Normal, 1.10

WALL MOTION ABNORMALITIES : No RWMA

Pericardium : Normal

**FINAL DIAGNOSIS**

**NORMAL CHAMBERS AND VALVES  
NO RWMA AT REST, LV EF - 60 %  
NORMAL DIASTOLIC FUNCTION  
NO OBVIOUS CLOTS/ EFFUSION/ VEGETATION**



**DR. MOHAN MURALI  
DNB(MED), DrNB(CARDIOLOGY)  
CONSULTANT CARDIOLOGIST**



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



**Apollo Medical Centre**  
*Expertise. Closer to you.*

**HEALTH CHECK- ENT**

*24/02/24*

**NAME:** *Vinod Kumar P*

**AGE:** *54*

**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

*Normal*

*Normal*

**NECK**

NECK NODES

OTHER

*Normal*

**AUDIOMETRY**

**IMPRESSION**

*Normal*

*[Signature]*

**SIGNATURE:**

**Apollo Health and Lifestyle Limited**

(CIN - U85110TG2000PLC046089) Regd. Office: #7-1-617/A, 615 & 616, Imperial Towers, 7th Floor; Ameerpet, Hyderabad, Telangana - 500 038 | Email ID: enquiry@apollohl.com

**APOLLO CLINICS NETWORK KARNATAKA**

**Bangalore** (Basavanagudi | Bellandur | Electronics City | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli | Koramangala | Sarjapur Road) **Mysore** (Kallidasa Road)

Online appointments: [www.apolloclinic.com](http://www.apolloclinic.com)

TO BOOK AN APPOINTMENT

**1860 500 7788**



HEALTH CHECK

Date : 24/2/24  
MRNO :  
Name : Mrs Vimala  
Age/Gender : 54yr

Department : OBSTETRICS & GYNAECOLOGY  
Consultant : DR JYOTHI RAJESH  
KMC NO-42823  
Qualification : DGO (DNB)  
Consultation Timings: 9.30am to 12.00pm  
Phone No : 9972044580

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

General Examination / Allergies  
History

Clinical Diagnosis & Management Plan

No gynaec complaints  
Menopause - 10yr  
OBN - P/L2 F/ND  
Past U - NOS 18052817  
Family U - Falta H/O, DM  
DE, P/A - 50ll  
P/L<sup>r</sup> pigmentation around vulva  
Cp 1 @ UBC taken  
Vajma 1 @

Follow up date:

24/3/24

Doctor Signature

*(Signature)*

# OPHTHAL REPORT

NAME: *Dimala*

AGE: *54* GENDER: MALE/FEMALE

## RIGHT EYE

	SPH	CYL	AXIS	VA
DV		<i>with glass</i>		<i>6/6</i>
NV		<i>''</i>		<i>16</i>

## LEFT EYE

	SPH	CYL	AXIS	VA
DV		<i>with glass</i>		<i>6/6</i>
NV		<i>''</i>		<i>16</i>

REMARK: *use same glass*

DATE: *24/02/24*

*oks*  
OPTOMETRIST

BRING THIS PRESCRIPTION IN YOUR NEXT VISIT

Patient Name	: Mrs. Vimala Devi Chilaka	Age	: 54 Y F
UHID	: CKOR.0000251534	OP Visit No	: CKOROPV400847
Reported on	: 24-02-2024 18:14	Printed on	: 25-02-2024 12:07
Adm/Consult Doctor	:	Ref Doctor	: SELF

## DEPARTMENT OF RADIOLOGY

### X-RAY CHEST PA

Both lungs fields appear normal.

Both hila are normal.

Both costophrenic and cardiophrenic angles are normal.

The cardiac and mediastinal shadows appear normal.

Bones and soft tissues appear normal.

**IMPRESSION : NORMAL STUDY.**



**DR ABID HUSSAIN**  
**RADIOLOGIST**

Printed on:24-02-2024 18:14

---End of the Report---

### Apollo Health and Lifestyle Limited

(CIN - U85110TG2000PLC115819)

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@apollohl.com | www.apollohl.com

### APOLLO CLINICS NETWORK KARNATAKA

**Bangalore** (Basavanagudi | Bellandur | Electronic City | Fraser Town | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli | Kemangala | Sarjapur Road) **Mysore** (VV Mohalla)

Online appointments: www.apolloclinic.com

Patient Name : Mrs Vimala Devi

Patient ID : 251534

Age : 54Year(s)

Sex : Female

Referring Doctor : H/C

Date : 24.02.2024

ULTRASOUND ABDOMEN AND PELVIS

**Liver** is normal in size and shows normal echo pattern. No biliary dilatation .No focal lesion

**Portal vein** is normal in size, course and caliber. CBD is not dilated.

**Gall bladder** is normal without evidence of calculi, wall thickening or pericholecystic fluid

**Pancreas** to the extent visualized, appears normal in size, contour and echogenicity

**Spleen** is normal in size, shape, contour and echopattern. No evidence of mass or focal lesion.

**Right kidney** is normal in size, position, shape and echopattern. Corticomedullary differentiation is maintained. No evidence of calculi or hydronephrosis.

**Left kidney** is normal in size, position, shape and echopattern.corticomedullary differentiation is maintained. No evidence of calculi or hydronephrosis.

**Urinary Bladder** is well distended. wall thickness is normal. No internal echoes.

**Uterus:** Post menopausal status

**Endometrium:** measures 6mm.

**Both ovaries** are normal in size and echopattern

**Both adnexa:** Normal, no mass seen.

There is no ascites.

IMPRESSION: NO SIGNIFICANT ABNORMALITIES DETECTED.

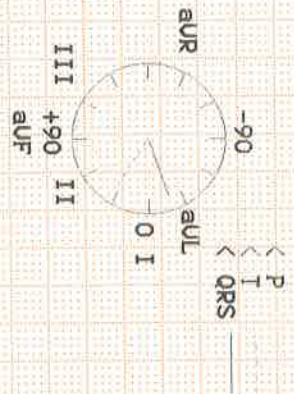
  
**DR. VIGNESH . K**  
**CONSULTANT RADIOLOGIST**

Female

AGE: 54

Measurement Results:

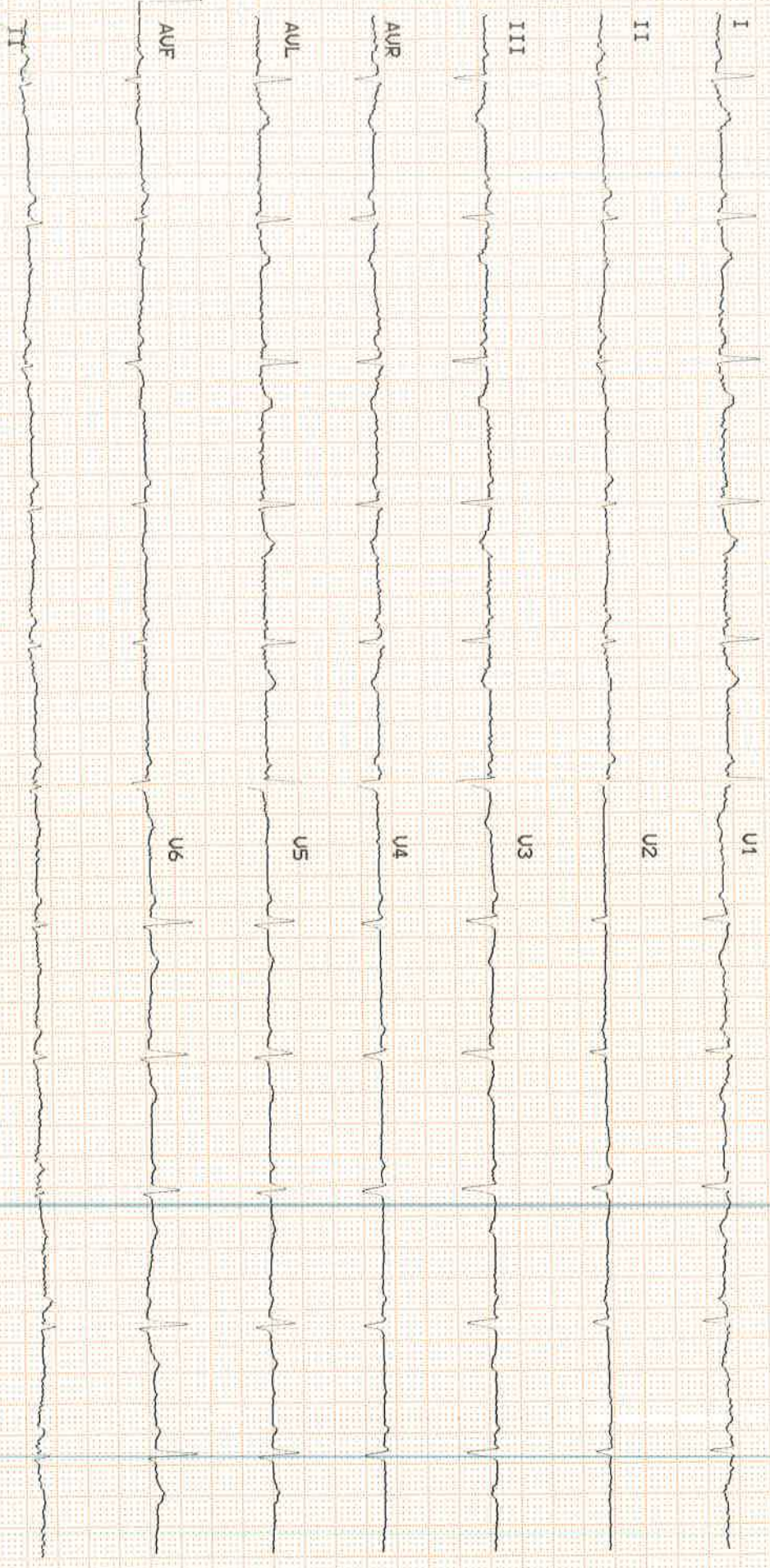
QT/QTcB	396 / 418 ms
PR	150 ms
P	110 ms
RR/PP	898 / 890 ms
P/ORS/T	35 / -20 / -20 degrees
QTd/QTcBD	42 / 44 ms
Sokolow	mV 8
NK	



Interpretation:

Unconfirmed report.

*S.P. E*  
*T-wave ↓ in V2-V3*



Patient Name  
UHID  
Reported By:  
Referred By

Mrs. Vimala Devi Chilaka  
CKOR.0000251534  
Dr. MOHAN MURALI  
SELF

Age  
OP Visit No  
Conducted Date

54 Y/F  
CKOROPV400847  
25-02-2024 11:36

### ECG REPORT

#### Observation :-

1. Normal Sinus Rhythm.
2. Heart rate is 67 beats per minutes.
3. No pathological Q wave or S-T changes seen.
4. Normal P,Q,R,S, waves and axis.T inversion in V2-V3.
5. No evidence of chamber, hypertrophy or enlargement seen.

#### Impression:

NORMAL RESTING ECG.

Dr MOHAN MURALI  
CARDIOLOGIST

NOTE:KINDLY TAKE A PHOTOCOPY OF THE GRAPH  
FOR FUTURE REFERENCE IF NEEDED.

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

**Patient Name** : Mrs. Vimala Devi Chilaka

**Age/Gender** : 54 Y/F

**UHID/MR No.** : CKOR.0000251534

**OP Visit No** : CKOROPV400847

**Sample Collected on** :

**Reported on** : 24-02-2024 18:14

**LRN#** : RAD2246468

**Specimen** :

**Ref Doctor** : SELF

**Emp/Auth/TPA ID** : bob125353

---

**DEPARTMENT OF RADIOLOGY**

---

**X-RAY CHEST PA**

Both lungs fields appear normal.

Both hila are normal.

Both costophrenic and cardiophrenic angles are normal.

The cardiac and mediastinal shadows appear normal.

Bones and soft tissues appear normal.

**IMPRESSION : NORMAL STUDY.**

**DR ABID HUSSAIN**  
**RADIOLOGIST**

**Patient Name** : Mrs. Vimala Devi Chilaka

**Age/Gender** : 54 Y/F

**UHID/MR No.** : CKOR.0000251534

**OP Visit No** : CKOROPV400847

**Sample Collected on** :

**Reported on** : 28-02-2024 10:53

**LRN#** : RAD2246468

**Specimen** :

**Ref Doctor** : SELF

**Emp/Auth/TPA ID** : bob125353

---

**DEPARTMENT OF RADIOLOGY**

---

**ULTRASOUND - WHOLE ABDOMEN**

**Liver** is normal in size and shows normal echo pattern. No biliary dilatation .No focal lesion

**Portal vein** is normal in size, course and caliber. CBD is not dilated.

**Gall bladder** is normal without evidence of calculi, wall thickening or pericholecystic fluid

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**Both adnexa:** Normal, no mass seen.

There is no ascites.

**IMPRESSION:** NO SIGNIFICANT ABNORMALITIES DETECTED.

**DR. VIGNESH. K**  
**CONSULTANT RADIOLOGIST**



Patient Name : Mrs.VIMALA DEVI CHILAKA	Collected : 24/Feb/2024 09:05AM
Age/Gender : 54 Y 10 M 3 D/F	Received : 24/Feb/2024 11:30AM
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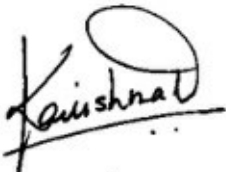
DEPARTMENT OF HAEMATOLOGY

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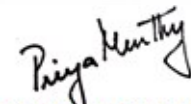
Test Name	Result	Unit	Bio. Ref. Range	Method
<b>HEMOGRAM , WHOLE BLOOD EDTA</b>				
HAEMOGLOBIN	13	g/dL	12-15	Spectrophotometer
PCV	37.90	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.33	Million/cu.mm	3.8-4.8	Electrical Impedance
MCV	87.5	fL	83-101	Calculated
MCH	30	pg	27-32	Calculated
MCHC	34.2	g/dL	31.5-34.5	Calculated
R.D.W	14.2	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	6,830	cells/cu.mm	4000-10000	Electrical Impedance
<b>DIFFERENTIAL LEUCOCYtic COUNT (DLC)</b>				
NEUTROPHILS	54.2	%	40-80	Electrical Impedance
LYMPHOCYTES	35.1	%	20-40	Electrical Impedance
EOSINOPHILS	3.7	%	1-6	Electrical Impedance
MONOCYTES	6.4	%	2-10	Electrical Impedance
BASOPHILS	0.6	%	<1-2	Electrical Impedance
<b>ABSOLUTE LEUCOCYTE COUNT</b>				
NEUTROPHILS	3701.86	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2397.33	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	252.71	Cells/cu.mm	20-500	Calculated
MONOCYTES	437.12	Cells/cu.mm	200-1000	Calculated
BASOPHILS	40.98	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	1.54		0.78- 3.53	Calculated
PLATELET COUNT	329000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	13	mm at the end of 1 hour	0-20	Modified Westergren
<b>PERIPHERAL SMEAR</b>				

RBCs: are normocytic normochromic

Page 1 of 15



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SIN No:BED240048006

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Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)

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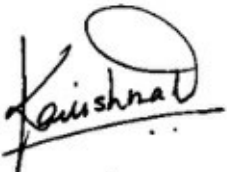
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WBCs: are normal in total number with normal distribution and morphology.


PLATELETS: appear adequate in number.

HEMOPARASITES: negative

**IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE**



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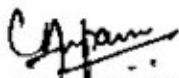
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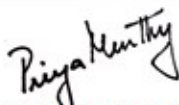
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Test Name	Result	Unit	Bio. Ref. Range	Method
<b>BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA</b>				
BLOOD GROUP TYPE	O			Microplate Hemagglutination
Rh TYPE	Positive			Microplate Hemagglutination



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

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, FASTING , NAF PLASMA	88	mg/dL	70-100	HEXOKINASE

Comment:

As per American Diabetes Guidelines, 2023

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

Note:

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

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	99	mg/dL	70-140	HEXOKINASE

Comment:

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

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

Test Name	Result	Unit	Bio. Ref. Range	Method
HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA				
HBA1C, GLYCATED HEMOGLOBIN	5.9	%		HPLC



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ESTIMATED AVERAGE GLUCOSE (eAG)	123	mg/dL	Calculated
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**Comment:**

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

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

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

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




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Test Name	Result	Unit	Bio. Ref. Range	Method
<b>LIPID PROFILE , SERUM</b>				
TOTAL CHOLESTEROL	194	mg/dL	<200	CHO-POD
TRIGLYCERIDES	81	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	47	mg/dL	40-60	Enzymatic Immuno-inhibition
NON-HDL CHOLESTEROL	<b>146</b>	mg/dL	<130	Calculated
LDL CHOLESTEROL	<b>130.3</b>	mg/dL	<100	Calculated
VLDL CHOLESTEROL	16.2	mg/dL	<30	Calculated
CHOL / HDL RATIO	4.12		0-4.97	Calculated

**Comment:**

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

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

- Measurements in the same patient on different days can show physiological and analytical variations.
- NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.
- Primary prevention algorithm now includes absolute risk estimation and lower LDL Cholesterol target levels to determine eligibility of drug therapy.
- Low HDL levels are associated with Coronary Heart Disease due to insufficient HDL being available to participate in reverse cholesterol transport, the process by which cholesterol is eliminated from peripheral tissues.
- As per NCEP guidelines, all adults above the age of 20 years should be screened for lipid status. Selective screening of children above the age of 2 years with a family history of premature cardiovascular disease or those with at least one parent with high total cholesterol is recommended.
- VLDL, LDL Cholesterol Non HDL Cholesterol, CHOL/HDL RATIO, LDL/HDL RATIO are calculated parameters when Triglycerides are below 400 mg/dL. When Triglycerides are more than 400 mg/dL LDL cholesterol is a direct measurement.




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Test Name	Result	Unit	Bio. Ref. Range	Method
<b>LIVER FUNCTION TEST (LFT) , SERUM</b>				
BILIRUBIN, TOTAL	0.82	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.14	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.68	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	15	U/L	<35	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	22.0	U/L	<35	IFCC
ALKALINE PHOSPHATASE	96.00	U/L	30-120	IFCC
PROTEIN, TOTAL	7.22	g/dL	6.6-8.3	Biuret
ALBUMIN	4.07	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.15	g/dL	2.0-3.5	Calculated
A/G RATIO	1.29		0.9-2.0	Calculated

**Comment:**

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

Common patterns seen:

**1. Hepatocellular Injury:**

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

**2. Cholestatic Pattern:**

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

**3. Synthetic function impairment:**

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



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Karnataka- 560034



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Patient Name : Mrs.VIMALA DEVI CHILAKA	Collected : 24/Feb/2024 09:05AM
Age/Gender : 54 Y 10 M 3 D/F	Received : 24/Feb/2024 11:53AM
UHID/MR No : CKOR.0000251534	Reported : 24/Feb/2024 12:59PM
Visit ID : CKOROPV400847	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bob125353	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM</b>				
CREATININE	0.83	mg/dL	0.51-0.95	Jaffe's, Method
UREA	<b>15.70</b>	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	<b>7.3</b>	mg/dL	8.0 - 23.0	Calculated
URIC ACID	3.60	mg/dL	2.6-6.0	Uricase PAP
CALCIUM	9.40	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	3.44	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	141	mmol/L	136-146	ISE (Indirect)
POTASSIUM	4.6	mmol/L	3.5-5.1	ISE (Indirect)
CHLORIDE	<b>110</b>	mmol/L	101-109	ISE (Indirect)



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

SIN No:SE04639876

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

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



Patient Name : Mrs.VIMALA DEVI CHILAKA	Collected : 24/Feb/2024 09:05AM
Age/Gender : 54 Y 10 M 3 D/F	Received : 24/Feb/2024 11:53AM
UHID/MR No : CKOR.0000251534	Reported : 24/Feb/2024 12:54PM
Visit ID : CKOROPV400847	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. Range	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	13.00	U/L	<38	IFCC



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Karnataka - 560034

**1860 500 7788**  
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Patient Name : Mrs.VIMALA DEVI CHILAKA	Collected : 24/Feb/2024 09:05AM
Age/Gender : 54 Y 10 M 3 D/F	Received : 24/Feb/2024 11:53AM
UHID/MR No : CKOR.0000251534	Reported : 24/Feb/2024 12:58PM
Visit ID : CKOROPV400847	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bob125353	

DEPARTMENT OF IMMUNOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM</b>				
TRI-IODOTHYRONINE (T3, TOTAL)	1	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	11.80	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	2.342	µIU/mL	0.34-5.60	CLIA

Comment:

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

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

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



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

SIN No:SPL24031587

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

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Patient Name	: Mrs.VIMALA DEVI CHILAKA	Collected	: 24/Feb/2024 09:05AM
Age/Gender	: 54 Y 10 M 3 D/F	Received	: 24/Feb/2024 11:53AM
UHID/MR No	: CKOR.0000251534	Reported	: 24/Feb/2024 12:58PM
Visit ID	: CKOROPV400847	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: bob125353		

DEPARTMENT OF IMMUNOLOGY

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



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

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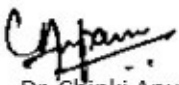


Patient Name : Mrs.VIMALA DEVI CHILAKA	Collected : 24/Feb/2024 09:02AM
Age/Gender : 54 Y 10 M 3 D/F	Received : 24/Feb/2024 01:04PM
UHID/MR No : CKOR.0000251534	Reported : 24/Feb/2024 02:01PM
Visit ID : CKOROPV400847	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bob125353	

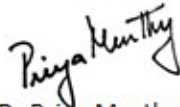
DEPARTMENT OF CLINICAL PATHOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>COMPLETE URINE EXAMINATION (CUE) , URINE</b>				
<b>PHYSICAL EXAMINATION</b>				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pH	6.5		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	1.005		1.002-1.030	Bromothymol Blue
<b>BIOCHEMICAL EXAMINATION</b>				
URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE		NEGATIVE	GLUCOSE OXIDASE
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING REACTION
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	SODIUM NITRO PRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	MODIFIED EHRlich REACTION
BLOOD	NEGATIVE		NEGATIVE	Peroxidase
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	LEUCOCYTE ESTERASE
<b>CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY</b>				
PUS CELLS	2-3	/hpf	0-5	Microscopy
EPITHELIAL CELLS	3-4	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY



Dr. Chinki Anupam  
M.B.B.S.,M.D(Pathology)  
Consultant Pathologist



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



SIN No:UR2290130

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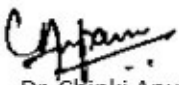
Patient Name : Mrs.VIMALA DEVI CHILAKA	Collected : 24/Feb/2024 09:02AM
Age/Gender : 54 Y 10 M 3 D/F	Received : 24/Feb/2024 01:04PM
UHID/MR No : CKOR.0000251534	Reported : 24/Feb/2024 03:44PM
Visit ID : CKOROPV400847	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bob125353	

DEPARTMENT OF CLINICAL PATHOLOGY

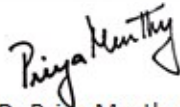
ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324

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

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



Dr. Chinki Anupam  
M.B.B.S,M.D(Pathology)  
Consultant Pathologist



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



SIN No:UF010717

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 **1860 500 7788**  
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Patient Name : Mrs.VIMALA DEVI CHILAKA	Collected : 24/Feb/2024 04:39PM
Age/Gender : 54 Y 10 M 3 D/F	Received : 25/Feb/2024 09:32PM
UHID/MR No : CKOR.000251534	Reported : 28/Feb/2024 10:43AM
Visit ID : CKOROPV400847	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bob125353	

DEPARTMENT OF CYTOLOGY


LBC PAP TEST (PAPSURE) , CERVICAL BRUSH SAMPLE

	CYTOLOGY NO.	4043/24
<b>I</b>	<b>SPECIMEN</b>	
<b>a</b>	SPECIMEN ADEQUACY	ADEQUATE
<b>b</b>	SPECIMEN TYPE	LIQUID-BASED PREPARATION (LBC)
	SPECIMEN NATURE/SOURCE	CERVICAL SMEAR
<b>c</b>	ENDOCERVICAL-TRANSFORMATION ZONE	ABSENT
<b>d</b>	COMMENTS	SATISFACTORY FOR EVALUATION
<b>II</b>	<b>MICROSCOPY</b>	Parabasal and intermediate squamous epithelial cells with benign morphology.  Inflammatory cells, predominantly neutrophils.  Negative for intraepithelial lesion/ malignancy
<b>III</b>	<b>RESULT</b>	
<b>a</b>	<b>EPITHEIAL CELL</b>	
	SQUAMOUS CELL ABNORMALITIES	NOT SEEN
	GLANDULAR CELL ABNORMALITIES	NOT SEEN
<b>b</b>	<b>ORGANISM</b>	NIL
<b>IV</b>	<b>INTERPRETATION</b>	NEGATIVE FOR INTRAEPITHELIAL LESION OR MALIGNANCY

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

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

Result/s to Follow:  
PERIPHERAL SMEAR



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



SIN No:CS075175

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

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