

Patient Name	: Mrs.DHANYA M	Collected	: 09/Dec/2023 08:27AM
Age/Gender	: 42 Y 2 M 14 D/F	Received	: 09/Dec/2023 12:23PM
UHID/MR No	: CJPN.000089949	Reported	: 09/Dec/2023 02:53PM
Visit ID	: CJPNOPV182709	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 281823		

DEPARTMENT OF HAEMATOLOGY

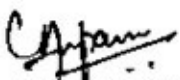
ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	8.7	g/dL	12-15	Spectrophotometer
PCV	28.00	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.43	Million/cu.mm	3.8-4.8	Electrical Impedance
MCV	63.1	fL	83-101	Calculated
MCH	19.6	pg	27-32	Calculated
MCHC	31	g/dL	31.5-34.5	Calculated
R.D.W	18.9	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	6,900	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	48.1	%	40-80	Electrical Impedance
LYMPHOCYTES	40.9	%	20-40	Electrical Impedance
EOSINOPHILS	2.1	%	1-6	Electrical Impedance
MONOCYTES	8.7	%	2-10	Electrical Impedance
BASOPHILS	0.2	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	3318.9	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2822.1	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	144.9	Cells/cu.mm	20-500	Calculated
MONOCYTES	600.3	Cells/cu.mm	200-1000	Calculated
BASOPHILS	13.8	Cells/cu.mm	0-100	Calculated
PLATELET COUNT	420000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	30	mm at the end of 1 hour	0-20	Modified Westegren method
PERIPHERAL SMEAR				

RBCs: Show moderate anisopoikilocytosis with Microcytic hypochromic RBCs. Tear drop cells, pencil cells and target cells seen.

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

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



Dr. Shobha Emmanuel
M.B.B.S.,M.D(Pathology)
Consultant Pathologist



SIN No:BED230303527

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

Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)
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DEPARTMENT OF HAEMATOLOGY

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

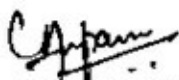
PLATELETS: appear adequate in number.

HEMOPARASITES: negative

IMPRESSION: MICROCYTIC HYPOCHROMIC ANEMIA

Note: Kindly evaluate for iron deficiency status.

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



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



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

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



Dr. Shobha Emmanuel
M.B.B.S., M.D (Pathology)
Consultant Pathologist



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UHID/MR No : CJPN.0000089949	Reported : 09/Dec/2023 01:48PM
Visit ID : CJPNOPV182709	Status : Final Report
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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
GLUCOSE, FASTING , NAF PLASMA	82	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 $> \text{ or } = 126 \text{ mg/dL}$ and/or a random / 2 hr post glucose value of $> \text{ or } = 200 \text{ mg/dL}$ on at least 2 occasions.
- Very high glucose levels ($>450 \text{ mg/dL}$ in adults) may result in Diabetic Ketoacidosis & is considered critical.



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

SIN No:PLF02067848

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Age/Gender : 42 Y 2 M 14 D/F	Received : 09/Dec/2023 12:32PM
UHID/MR No : CJPN.000089949	Reported : 09/Dec/2023 02:42PM
Visit ID : CJPNOPV182709	Status : Final Report
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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
HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA				
HBA1C, GLYCATED HEMOGLOBIN	6.3	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	134	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)




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

SIN No:EDT230111591

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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
LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	176	mg/dL	<200	CHO-POD
TRIGLYCERIDES	80	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	42	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	134	mg/dL	<130	Calculated
LDL CHOLESTEROL	117.9	mg/dL	<100	Calculated
VLDL CHOLESTEROL	16	mg/dL	<30	Calculated
CHOL / HDL RATIO	4.19		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.

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

SIN No:SE04563942

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CONSULTANT BIOCHEMIST

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Test Name	Result	Unit	Bio. Ref. Range	Method
LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.72	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.14	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.58	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	11	U/L	<35	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	23.0	U/L	<35	IFCC
ALKALINE PHOSPHATASE	45.00	U/L	30-120	IFCC
PROTEIN, TOTAL	7.84	g/dL	6.6-8.3	Biuret
ALBUMIN	4.56	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.28	g/dL	2.0-3.5	Calculated
A/G RATIO	1.39		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:

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Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016 |
www.apollohl.com | Email ID: enquiry@apollohl.com, Ph No: 040-4904 7777, Fax No: 4904 7744

APOLLO CLINICS NETWORK

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Neeladri Nagar, Electronic city, Bengaluru,
Karnataka- 560034

 1860 500 7788
www.apolloclinic.com

Patient Name	: Mrs.DHANYA M	Collected	: 09/Dec/2023 08:27AM
Age/Gender	: 42 Y 2 M 14 D/F	Received	: 09/Dec/2023 12:26PM
UHID/MR No	: CJPN.000089949	Reported	: 09/Dec/2023 01:03PM
Visit ID	: CJPNOPV182709	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 281823		

DEPARTMENT OF BIOCHEMISTRY

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

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



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

SIN No:SE04563942

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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
RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	0.59	mg/dL	0.72 – 1.18	JAFFE METHOD
UREA	13.80	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	6.4	mg/dL	8.0 - 23.0	Calculated
URIC ACID	3.59	mg/dL	2.6-6.0	Uricase PAP
CALCIUM	9.50	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	3.98	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	138	mmol/L	136–146	ISE (Indirect)
POTASSIUM	4.0	mmol/L	3.5–5.1	ISE (Indirect)
CHLORIDE	105	mmol/L	101–109	ISE (Indirect)



DR.SHIVARAJA SHETTY
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CONSULTANT BIOCHEMIST

SIN No:SE04563942

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Age/Gender	: 42 Y 2 M 14 D/F	Received	: 09/Dec/2023 12:26PM
UHID/MR No	: CJPN.0000089949	Reported	: 09/Dec/2023 01:01PM
Visit ID	: CJPNOPV182709	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 281823		

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	15.00	U/L	<38	IFCC



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Age/Gender : 42 Y 2 M 14 D/F	Received : 09/Dec/2023 12:26PM
UHID/MR No : CJPN.0000089949	Reported : 09/Dec/2023 01:31PM
Visit ID : CJPNOPV182709	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 281823	

DEPARTMENT OF IMMUNOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM				
TRI-IODOTHYRONINE (T3, TOTAL)	1.1	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	10.6	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	2.900	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:SPL23177874

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Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
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DEPARTMENT OF IMMUNOLOGY

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



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Patient Name : Mrs.DHANYA M	Collected : 09/Dec/2023 08:26AM
Age/Gender : 42 Y 2 M 14 D/F	Received : 12/Dec/2023 01:00PM
UHID/MR No : CJPN.000089949	Reported : 12/Dec/2023 01:43PM
Visit ID : CJPNOPV182709	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 281823	

DEPARTMENT OF CLINICAL PATHOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
COMPLETE URINE EXAMINATION (CUE) , URINE				
PHYSICAL EXAMINATION				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pH	7.5		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	1.015		1.002-1.030	Bromothymol Blue
BIOCHEMICAL EXAMINATION				
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
CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY				
PUS CELLS	1-2	/hpf	0-5	Microscopy
EPITHELIAL CELLS	2-3	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY

*** End Of Report ***

Result/s to Follow:

Page 14 of 15



Dr. Shobha Emmanuel
M.B.B.S., M.D (Pathology)
Consultant Pathologist



SIN No: UR2237159

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DEPARTMENT OF CLINICAL PATHOLOGY

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

PERIPHERAL SMEAR

Page 15 of 15



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Consultant Pathologist



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 **1860 500 7788**
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Name : Mrs. DHANYA M	Age : 42 Y	UHID :CJPN.0000089949
Address : BLR	Sex : F	
Plan : ARCOFEMI MEDIWHEEL FEMALE AHC CREDIT PAN INDIA OP AGREEMENT		OP Number :CJPNOPV182709
		Bill No :CJPN-OCR-67616
		Date : 09.12.2023 08:20

Sno	Service Type/ServiceName	Department
1	ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324	
1	GAMMA GLUTAMYL TRANSFERASE (GGT)	
2	HbA1c, GLYCATED HEMOGLOBIN	
3	LIVER FUNCTION TEST (LFT)	
4	GLUCOSE, FASTING	
5	HEMOGRAM + PERIPHERAL SMEAR	
6	DENT CONSULTATION - 5	
7	FITNESS BY GENERAL PHYSICIAN	
8	GYNAECOLOGY CONSULTATION - 11	
9	DIET CONSULTATION	
10	COMPLETE URINE EXAMINATION	
11	PERIPHERAL SMEAR	
12	ECG	
13	BLOOD GROUP ABO AND RH FACTOR	
14	LIPID PROFILE	
15	BODY MASS INDEX (BMI)	
16	LBC PAP TEST- PAPSURE Parking	
17	OPHTHAL BY GENERAL PHYSICIAN - 03	
18	RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)	
19	ULTRASOUND - WHOLE ABDOMEN	
20	THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)	
21	DENTAL CONSULTATION - 22	

Niramoi

Radio = 21

physio = 4

Weight = 53.3 kg

Height = 146 cm

Waist = 83 cm

Hip = 94 cm

BP = 117/87 mmHg

PR = 98 bpm

CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

of Dhanya M on 9/12/23

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

	Tick
<ul style="list-style-type: none"> Medically Fit ✓ 	✓
<ul style="list-style-type: none"> Fit with restrictions/recommendations <p>Though following restrictions have been revealed, in my opinion, these are not impediments to the job.</p> <p>1.....</p> <p>2.....</p> <p>3.....</p> <p>However the employee should follow the advice/medication that has been communicated to him/her.</p> <p>Review after _____</p>	
<ul style="list-style-type: none"> Currently Unfit. <p>Review after _____ recommended</p>	
<ul style="list-style-type: none"> Unfit 	

Dr. M.P. Shiva Kumar
 MBBS., MD (GEN. MED.), FRSH (CONGENIT)
 Consultant - Physician & Diabetologist
 Mcb : 9739563913, 9902555999
 KMC - 24348
 Medical Officer
 The Apollo Clinic, (Location)

This certificate is not meant for medico-legal purposes



Mrs. Dhanya M 424

9/12/23

MS - 187ms Pulse

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

General Examination / Allergies History

Clinical Diagnosis & Management Plan

no complaints

Comp: 11/12/23
 Bleeding sw
 M.H: h-5 days → Regular
 25 days → Mod. No. →
 Comp ⊕

P.H.S : Chronic Anaemia →
 D.H. done for primary infertility.

P.H.S NO Cancer

O.R.T. Pulse
 Both L.S.S.
 T.L. done

O.R.T.
 L.C. rain
 M.P. rain
 M.R. 10/11
 P.S.
 P.V. / pending

Advice

- Hb E Electrophoresis
- P.V. for Ovar 2
 Pap smear

Follow up date:

Doctor Signature

Dr. Smrithi B. Kalappa
 MBBS, MCh (GYN) DNB

Dhanya - M.

42/F.

9/12/2023

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

General Examination / Allergies
History

No DM/H7N

Clinical Diagnosis & Management Plan

- ENT check .

- No complaints

o/et

DNS to (L)

Tht Examinee -

Exam B/C TM intact (N)

Review sos

Follow up date:



Doctor Signature

Dr. Swathi

PATIENT CASE SHEET



Name: Dhanya .m. Age: 42 Gender: F

Address: _____

UHID / Emp Id: CJPN.89949

Ref. by Doctor

CHC

Treating Doctor

Dr. Sijo

Past Dental History:

—

Past Medical History:

—

Chief Complaint(s): Regular dental check up

Investigation:

RVG

OPG

CBCT

M Mrs. dhanya
ID: cjpn.89949

09.12.2023 10:21:57

89 bpm

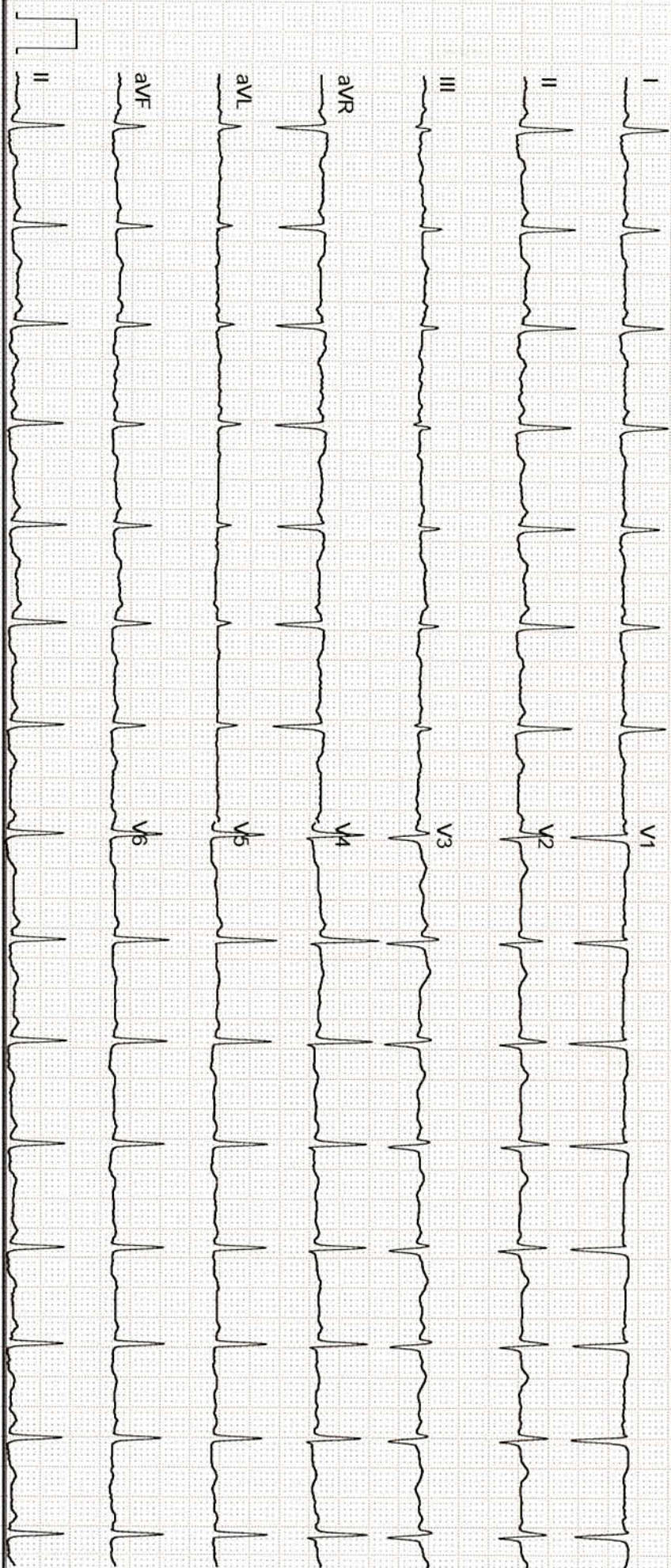
42 Years 146 cm Female
53.0 kg

Apollo Clinic
J P Nagar
Bangalore

117 / 87 mmHg

QRS	68 ms
QT / QTcBaz	360 / 438 ms
PR	122 ms
P	98 ms
RR / PP	672 / 674 ms
P / QRS / T	45 / 50 / 14 degrees

Normal sinus rhythm
Nonspecific T wave abnormality
Abnormal ECG



GE MAC2000 1 1 12SL™ V241

25 mm/s 10 mm/mV

ADS 0.56-20 Hz 50 Hz 2x5x6_25_R1

Unconfirmed

1/1

Name - Dhanya M
Age - 42 yrd F

Date - 09/12/23

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

General Examination / Allergies History	Clinical Diagnosis & Management Plan
<p>clo - Routine Eye checkup</p> <p>H/O NIP - not using reading glass</p> <p>H/O Eye Ex - No</p>	<p>UVA < 6/6 N6 UVB < 6/6 N6</p> <p>UV < 6/6 N6 UV < 6/6 N6</p> <p>colour vision is normal in RC</p> <p>Emmetropic</p> <p>Follow up date: <i>after 6 months.</i></p> <p>Doctor Signature</p>

Patient Name : Mrs. DHANYA M

Age/Gender : 42 Y/F

UHID/MR No. : CJPN.0000089949

OP Visit No : CJPNOPV182709

Sample Collected on :

Reported on : 09-12-2023 10:40

LRN# : RAD2173032

Specimen :

Ref Doctor : SELF

Emp/Auth/TPA ID : 281823

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

LIVER : Normal in size and echotexture. No focal lesion seen.

No intra hepatic biliary / venous radicular dilation.

CBD and Main Portal vein appear normal.PV-11 mm.

GALL BLADDER : Well distended. Normal in internal contents. Wall Thickness is normal.

SPLEEN : Normal in size and echotexture. No focal lesion was seen.

PANCREAS : Appeared normal to the visualized extent.

KIDNEYS : Both kidneys are normal in size, shape and outlines Cortico medullary delineation is normal. No Hydronephrosis / No calculi.

Right kidney measures:10.4 x 2.1 cm.

Left kidney measures :11.2 x 2.2 cm.

URINARY BLADDER : Well distended. Normal in internal contents. Wall thickness is normal.

UTERUS : Normal in size and echotexture. It measures :9.6 x 4.7 x 5.2 cm. Uniform myometrial echoes are normal. Endometrial thickness measuring- 7 mm.

Small fibroid seen in anterior wall measuring~1.5 x 1.5cm.

OVARIES : Both ovaries are normal in size.

Right ovary measures : 2.9 x 2.1cm.

Left ovary measures :3.0 x 2.0 cm.

No free fluid is seen in the peritoneum. No lymphadenopathy.

Patient Name : Mrs. DHANYA M

Age/Gender : 42 Y/F

IMPRESSION : NORMAL STUDY.Except for small fibroid uterus.

Please Note :No preparation done before scanning.

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

Dr. KUSUMA JAYARAM
MBBS,DMRD
Radiology

M,Dhanya

From: Mediwheel <wellness@mediwheel.in>
Sent: 29 November 2023 16:08
To: M,Dhanya
Cc: customercare@mediwheel.in
Subject: Health Check up Booking Confirmed Request(UBOI2857),Package Code- PKG10000450, Beneficiary Code-276210

You don't often get email from wellness@mediwheel.in. [Learn why this is important](#)

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011-41195959

Dear DHANYA M,

We are pleased to confirm your health checkup booking request with the following details.

Booking Date : 27-11-2023
Hospital Package Name : Mediwheel Annual Health Checkup Female Starter
Patient Package Name : MediWheel Full Body Health Checkup Female 40 to 50 For Self and Spouse
Name of Diagnostic/Hospital : Apollo Clinic- JP Nagar
Address of Diagnostic/Hospital- Apollo Clinic, House List No. 22, BNR Complex, Sree Rama Layout, Opp: RBI Layout, JP Nagar 7th Phase, Kothanur Village, Uttarahalli Hobli, JP nagar - 560078
City : Bangalore
State :
Pincode : 560078
Appointment Date : 09-12-2023
Confirmation Status : Booking Confirmed
Preferred Time : 8:30am-9:30am
Booking Status : Booking Confirmed



ഭാരത സർക്കാർ
Unique Identification Authority of India

പേരുചേർക്കൽ നമ്പർ / Enrollment No. : 2003/42061/06735

To
Dhanya
ധന്യ
W/O: Prasanth
Ganapathikandy
Thikkody
Pallikara, Kozhikode
Kerala - 673522

23/03/2013



KL023774406FT

2377440



നിങ്ങളുടെ ആധാർ നമ്പർ / Your Aadhaar No. :

9214 6159 1953

ആധാർ - സാധാരണക്കാരന്റെ അവകാശം



ഭാരത സർക്കാർ
Government of India



ധന്യ
Dhanya

ജനന വർഷം / Year of Birth: 1981
ലിംഗം / Female

9214 6159 1953



ആധാർ - സാധാരണക്കാരന്റെ അവകാശം