





: Mrs.RAJSHREE NARANJE

Age/Gender

: 32 Y 0 M 12 D/F

UHID/MR No Visit ID : CWAN.0000129970 : CWANOPV213037

Ref Doctor

: Dr.SELF

Emp/Auth/TPA ID :

: 028071991

©ollected : 09/Aug/2023 09:49AM

Received : 09/Aug/2023 11:57AM

Reported : 09/Aug/2023 01:10PM

Status : Final Report

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

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

PERIPHERAL SMEAR, WHOLE BLOOD EDTA

RBC NORMOCYTIC NORMOCHROMIC
WBC WITHIN NORMAL LIMITS
PLATELETS ARE ADEQUATE ON SMEAR
NO HEMOPARASITES SEEN

Page 1 of 12

SIN No:BED230187700







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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. Range Method

HAEMOGLOBIN	14.2	g/dL	12-15	Spectrophotometer
PCV	41.10	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.76	Million/cu.mm	3.8-4.8	Electrical Impedence
MCV	86.4	fL	83-101	Calculated
MCH	29.9	pg	27-32	Calculated
MCHC	34.6	g/dL	31.5-34.5	Calculated
R.D.W	14.1	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	7,560	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (D	LC)		XII	
NEUTROPHILS	51	%	40-80	Electrical Impedance
LYMPHOCYTES	41.1	%	20-40	Electrical Impedance
EOSINOPHILS	1.8	%	1-6	Electrical Impedance
MONOCYTES	5.8	%	2-10	Electrical Impedance
BASOPHILS	0.3	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	3855.6	Cells/cu.mm	2000-7000	Electrical Impedanc
LYMPHOCYTES	3107.16	Cells/cu.mm	1000-3000	Electrical Impedance
EOSINOPHILS	136.08	Cells/cu.mm	20-500	Electrical Impedance
MONOCYTES	438.48	Cells/cu.mm	200-1000	Electrical Impedance
BASOPHILS	22.68	Cells/cu.mm	0-100	Electrical Impedance
PLATELET COUNT	326000	cells/cu.mm	150000-410000	Electrical impedence
ERYTHROCYTE SEDIMENTATION RATE (ESR)	9	mm at the end of 1 hour	0-20	Modified Westergre
PERIPHERAL SMEAR				

RBC NORMOCYTIC NORMOCHROMIC

WBC WITHIN NORMAL LIMITS

PLATELETS ARE ADEQUATE ON SMEAR

NO HEMOPARASITES SEEN

Page 2 of 12

SIN No:BED230187700

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









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©ollected : 09/Aug/2023 09:49AM

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: ARCOFEMI HEALTHCARE LIMITED Sponsor Name

DEPARTMENT OF HAEMATOLOGY				
ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324				
Test Name	Result	Unit	Bio. Ref. Range	Method

BLOOD GROUP TYPE	A	Forward & Reverse Grouping with Slide/Tube Aggluti
Rh TYPE	POSITIVE	Forward & Reverse Grouping with Slide/Tube Agglutination

Page 3 of 12

SIN No:BED230187700









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©ollected : 09/Aug/2023 09:49AM

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Status : Final Report

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEDA	DTMENT	OE DIC	CHEMISTRY
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ARCOFEMI - MEDIWHEEL - FULL BODY	HEALTH ANNUAL	PLUS CHECK -	FEMALE - 2D ECHO - F	PAN INDIA - FY2324
Test Name	Result	Unit	Bio. Ref. Range	Method

GLUCOSE, FASTING , NAF PLASMA	89	ma/dL	70-100	HEXOKINASE	
GEOCOGE, I ASTING, NAI PLASMA	03	ing/u∟	70-100	ILACKINASE	

Comment:

As per American Diabetes Guidelines

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

GLUCOSE, POST PRANDIAL (PP), 2	98	mg/dL	70-140	HEXOKINASE
HOURS , SODIUM FLUORIDE PLASMA (2				
HR)				

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.

Ref: Marks medical biochemistry and clinical approach

www.apolloclinic.com





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Status : Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY	Y HEALTH ANNUAL	PLUS CHECK -	FEMALE - 2D ECHO - F	PAN INDIA - FY2324
Test Name	Result	Unit	Bio. Ref. Range	Method

HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD EDTA	5.1	%	HPLC
ESTIMATED AVERAGE GLUCOSE (eAG), WHOLE BLOOD EDTA	100	mg/dL	Calculated

Comment:

Reference Range as per American Diabetes Association (ADA):

REFERENCE GROUP	HBA1C IN %
NON DIABETIC ADULTS >18 YEARS	<5.7
AT RISK (PREDIABETES)	5.7 – 6.4
DIAGNOSING 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. A1C test should be performed at least two times a year in patients who are meeting treatment goals (and who have stable glycemic control).
- 2. Lowering A1C to below or around 7% has been shown to reduce microvascular and neuropathic complications of type 1 and type 2 diabetes. When mean annual HbA1c is <1.1 times ULN (upper limit of normal), renal and retinal complications are rare, but complications occur in >70% of cases when HbA1c is >1.7 times ULN.
- 3. 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. Fructosamine may be used as an alternate measurement of glycemic control

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SIN No:PLF02011660,PLP1357385,EDT230073456

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



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





: Mrs.RAJSHREE NARANJE

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Ref Doctor

: Dr.SELF

Emp/Auth/TPA ID : 028071991

ificate No: MC-F@ollected

: 09/Aug/2023 09:49AM

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Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT (OF BIOCHEMISTRY
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Test Name	Result	Unit	Bio. Ref. Range	Method
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180	mg/dL	<200	CHO-POD
94	mg/dL	<150	GPO-POD
41	mg/dL	40-60	Enzymatic Immunoinhibition
139	mg/dL	<130	Calculated
119.76	mg/dL	<100	Calculated
18.85	mg/dL	<30	Calculated
4.39		0-4.97	Calculated
	94 41 139 119.76 18.85	94 mg/dL 41 mg/dL 139 mg/dL 119.76 mg/dL 18.85 mg/dL	94 mg/dL <150 41 mg/dL 40-60 139 mg/dL <130 119.76 mg/dL <100 18.85 mg/dL <30

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
	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 can show physiological and analytical variations.

NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.

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SIN No:SE04447115









: Mrs.RAJSHREE NARANJE

Age/Gender

: 32 Y 0 M 12 D/F

UHID/MR No Visit ID

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Ref Doctor

: CWANOPV213037

Emp/Auth/TPA ID

: Dr.SELF

: 028071991

©ollected : 09/Aug/2023 09:49AM

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Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEE	L - FULL BOD	Y HEALTH ANNUAL	PLUS CHECK -	FEMALE - 2D ECHO - F	PAN INDIA - FY2324

Test Name Result	Unit	Bio. Ref. Range	Method
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LIVER FUNCTION TEST (LFT) , SERUM			(4)	
BILIRUBIN, TOTAL	0.45	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.07	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.38	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	24.25	U/L	<35	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	21.2	U/L	<35	IFCC
ALKALINE PHOSPHATASE	103.70	U/L	30-120	IFCC
PROTEIN, TOTAL	7.08	g/dL	6.6-8.3	Biuret
ALBUMIN	4.03	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.05	g/dL	2.0-3.5	Calculated
A/G RATIO	1.32		0.9-2.0	Calculated

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SIN No:SE04447115









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Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

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						

RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT), SERUM						
CREATININE	0.57	mg/dL	0.55-1.02	Modified Jaffe, Kinetic		
UREA	14.22	mg/dL	17-43	GLDH, Kinetic Assay		
BLOOD UREA NITROGEN	6.6	mg/dL	8.0 - 23.0	Calculated		
URIC ACID	3.78	mg/dL	2.6-6.0	Uricase PAP		
CALCIUM	8.42	mg/dL	8.8-10.6	Arsenazo III		
PHOSPHORUS, INORGANIC	2.61	mg/dL	2.5-4.5	Phosphomolybdate Complex		
SODIUM	139.54	mmol/L	136–146	ISE (Indirect)		
POTASSIUM	4.3	mmol/L	3.5–5.1	ISE (Indirect)		
CHLORIDE	105.41	mmol/L	101–109	ISE (Indirect)		

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SIN No:SE04447115









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Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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GAMMA GLUTAMYL TRANSPEPTIDASE	16.30	U/L	<38	IFCC
(GGT), SERUM				

Page 9 of 12

SIN No:SE04447115

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



APOLLO CLINICS NETWORK







: Mrs.RAJSHREE NARANJE

Age/Gender

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Ref Doctor

: CWANOPV213037

: Dr.SELF Emp/Auth/TPA ID : 028071991 **©**ollected

: 09/Aug/2023 09:49AM

Received

: 09/Aug/2023 12:22PM : 09/Aug/2023 01:19PM

Reported Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FULL E	ODY HEALTH ANNUAL	PLUS CHECK	FEMALE - 2D ECHO - I	PAN INDIA - FY2324
Test Name	Result	Unit	Bio. Ref. Range	Method

THYROID PROFILE TOTAL (T3, T4, TSH),	SERUM			
TRI-IODOTHYRONINE (T3, TOTAL)	0.83	ng/mL	0.64-1.52	CMIA
THYROXINE (T4, TOTAL)	4.81	μg/dL	4.87-11.72	CMIA
THYROID STIMULATING HORMONE (TSH)	6.840	μIU/mL	0.35-4.94	CMIA

Comment:

Serum TSH concentrations exhibit a diurnal variation with the peak occurring during the night and the nadir occurring between 10 a.m. and 4 p.m.In primary hypothyroidism, thyroid-stimulating hormone (TSH) levels will be elevated. In primary hyperthyroidism, TSH levels will be low. Elevated or low TSH in the context of normal free thyroxine is often referred to as subclinical hypo- or hyperthyroid-ism, respectively. Physiological rise in Total T3 / T4 levels is seen in pregnancy and in patients on steroid therapy.

Recommended test for T3 and T4 is unbound fraction or free levels as it is metabolically active.

Note:

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

Page 10 of 12



SIN No:SPL23113369

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

"AMBA VATICA", Plot No. B-1, Survey No. 16A/2,







: Mrs.RAJSHREE NARANJE

Age/Gender

: 32 Y 0 M 12 D/F

UHID/MR No Visit ID

: CWAN.0000129970 : CWANOPV213037

Ref Doctor

: Dr.SELF

Emp/Auth/TPA ID : 028071991

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Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF CLINICAL PATHOLOGY ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324 **Test Name** Unit Bio. Ref. Range Result Method

COMPLETE URINE EXAMINATION (C	UE) , URINE			
PHYSICAL EXAMINATION				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
рН	6.5		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	MODIFED EHRLICH REACTION
BLOOD	NEGATIVE		NEGATIVE	Peroxidase
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	LEUCOCYTE ESTERASE
CENTRIFUGED SEDIMENT WET MO	OUNT AND MICROSCOPY			
PUS CELLS	2 - 3	/hpf	0-5	Microscopy
EPITHELIAL CELLS	1 - 2	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY

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SIN No:UR2163333









: Mrs.RAJSHREE NARANJE

Age/Gender

: 32 Y 0 M 12 D/F

UHID/MR No Visit ID : CWAN.0000129970 : CWANOPV213037

Ref Doctor

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Emp/Auth/TPA ID

: 028071991

Cartificate No. MC

©ollected : 09/Aug/2023 09:49AM

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Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324	1
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Test Name Result Unit Bio. Ref. Range Method

URINE GLUCOSE(POST PRANDIAL)

NEGATIVE

NEGATIVE

NEGATIVE

Dipstick

URINE GLUCOSE(FASTING) NEGATIVE NEGATIVE Dipstick

*** End Of Report ***

Dr Sneha Shah MBBS, MD (Pathology) Consultant Pathologist

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

Page 12 of 12

SIN No:UPP015288,UF009220

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



APOLLO CLINICS NETWORK



Patient Name : Mrs. RAJSHREE NARANJE Age/Gender : 32 Y/F

UHID/MR No.

: CWAN.0000129970

Sample Collected on :

LRN#

: RAD2068712

Ref Doctor : SELF **Emp/Auth/TPA ID** : 028071991 Reported on Specimen

OP Visit No

: CWANOPV213037 : 09-08-2023 11:51

. 07-06-2025 11.5

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

Liver appears normal in size and 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 focal lesion is seen.

Spleen appears normal. No focal lesion seen. Splenic vein appears normal.

<u>Pancreas</u> 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 calculus / hydronephrosis seen on either side.

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

Uterus antiverted measures 7.2 x 3.6 x 4.6 normal in size. It shows normal shape & echo pattern. Endometrial echo-complex appears normal and measures 7.5mm. No intra/extra uterine gestational sac seen.

Both ovaries appear normal in size, shape and echotexture. No focal lesion noted.

No evidence of any adnexal pathology noted.

IMPRESSION:-

No significant abnormality detected.

Suggest - clinical correlation.

(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.



Patient Name : Mrs. RAJSHREE NARANJE Age/Gender : 32 Y/F

 $\frac{\text{Dr. SATINDER LAMBA}}{\text{MBBS, DMRE}}$ Radiology



Patient Name : Mrs. RAJSHREE NARANJE Age/Gender : 32 Y/F

UHID/MR No.

: CWAN.0000129970

Sample Collected on

LRN#

: RAD2068712

Ref Doctor : SELF **Emp/Auth/TPA ID** : 028071991

Reporter Specime

OP Visit No Reported on Specimen : CWANOPV213037 : 09-08-2023 11:44

. 09-06-2023 11.44

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Both lung fields and hila are normal.

No obvious active pleuro-parenchymal lesion seen .

Both costophrenic and cardiophrenic angles are clear.

Both diaphragms are normal in position and contour.

Cardiac shadow is normal.

Thoracic wall and soft tissues appear normal.

CONCLUSION:

No obvious abnormality seen

 $\frac{\text{Dr. SATINDER LAMBA}}{\text{MBBS, DMRE}}$ Radiology

Radiology



-

Your Apollo order has been confirmed

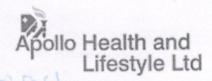
noreply@apolloclinics.info < noreply@apolloclinics.info>

Sat 05-08-2023 13:15

To:amol.tembhurkar@bankofbaroda.co.in <amol.tembhurkar@bankofbaroda.co.in>

Cc:Wanowrie Apolloclinic <wanowrie@apolloclinic.com>;Syamsunder M

<syamsunder.m@apollohl.com>;DCM Wanowrie <dcm.wanowrie@apolloclinic.com>



Dear Rajshree Naranje,

Namaste Team,

Greetings from Apollo Clinics,

With regards to the below request the below appointment is scheduled at **WANOURI** clinic on 2023-08-09 at 08:20-08:25.

Corporate Name	ARCOFEMI HEALTHCARE LIMITED
Agreement Name	ARCOFEMI MEDIWHEEL FEMALE AHC CREDIT PAN INDIA OP AGREEMENT
Package Name	[ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324]

"In view of corona virus precautionary measures, you are requested to take a mandatory check for symptoms & self-declaration at centre. Please cooperate. Thank you."

NOTE: We are not providing the breakfast in view of corona virus. And that customers on their own should carry their breakfast.

Note: Also once appointment is booked, based on availability of doctors at clinics tests will happen, any pending test will happen based on doctor availability and clinics will be updating the same to customers.

Instructions to undergo Health Check:

- 1. Please ensure you are on complete fasting for 10-To-12-Hours prior to check.
- 2. During fasting time do not take any kind of medication, alcohol, cigarettes, tobacco or any other liquids (except Water) in the morning.
- 3. Bring urine sample in a container if possible (containers are available at the Health Check Centre).
- 4. Please bring all your medical prescriptions and previous health medical records with you
- 5. Kindly inform the health check reception in case if you have a history of diabetes