

Name : Mrs. BINDHYAVASHINI TIWARY

Age: 47 Y

UHID: SCHI.0000018436

Sex: F



Address : DELHI

OP Number: SCHIOPV26726

Plan : ARCOFEMI MEDIWHEEL FEMALE AHC CREDIT PAN
INDIA OP AGREEMENT

Bill No : SCHI-OCR-9609

Date : 27.02.2024 08:56

Sno	Service Type/ServiceName	Department
1	ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY2324	
1	URINE GLUCOSE(FASTING) ✓	
2	GAMMA GLUTAMYL TRANSFERASE (GGT) ✓	
3	SONO MAMOGRAPHY - SCREENING ✓	
4	HbA1c, GLYCATED HEMOGLOBIN ✓	
5	2D ECHO 1.10pm ✓	
6	LIVER FUNCTION TEST (LFT) ✓	
7	X-RAY CHEST PA ✓	
8	GLUCOSE, FASTING ✓	
9	HEMOGRAM + PERIPHERAL SMEAR ✓	
10	ENT CONSULTATION	
11	FITNESS BY GENERAL PHYSICIAN	
12	Gynaecology Consultation ✓	
13	DIET CONSULTATION	
14	COMPLETE URINE EXAMINATION ✓	
15	URINE GLUCOSE(POST PRANDIAL)	
16	PERIPHERAL SMEAR ✓	
17	ECG ✓	
18	BLOOD GROUP ABO AND RH FACTOR ✓	
19	LIPID PROFILE ✓	
20	BODY MASS INDEX (BMI)	
21	LHC PAP TEST- PAPSURE ✓	
22	OPHTHAL BY GENERAL PHYSICIAN 1.06pm ✓	
23	RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT) ✓	
24	ULTRASOUND - WHOLE ABDOMEN ✓	
25	THYROID PROFILE (TOTAL T3, TOTAL T4, TSH) ✓	
26	MENTAL CONSULTATION ✓	
27	GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL) ✓	

Height: 160cm
 Weight: 68.3kg
 B.P.: 110/80mmHg
 Pulse: 56/m + 0
 SP02: 97% O2



भारतीय विशिष्ट पहचान प्राधिकरण

भारत सरकार
Unique Identification Authority of India
Government of India

नामांकन क्रम / Enrollment No.: 0623/12411/00182

To
बिन्द्यावशिनी तिवारी
Bindhyavashini Tiwari
W/O Prasad Tiwari
Plot No-677/25 Palkitra Apartments
Aashok Vastha
Delhi
Delhi
Hauz Khas South Delhi
Delhi 110062
9988481747
101436063
27/09/2012
ME014360539FH



आपका आधार क्रमांक / Your Aadhaar No. :

3073 1123 0277

मेरा आधार, मेरी पहचान

Dr. R.K. MEHRA
MBBS (MAMC), DTCD (Delhi)
DMC No.- 3835
Aakash Hospital
8043, Malviya Nagar,
New Delhi -110017



भारत सरकार
Government of India



बिन्द्यावशिनी तिवारी
Bindhyavashini Tiwari
जन्म तिथि / DOB - 02/06/1976
लिंग / Gender



3073 1123 0277

मेरा आधार, मेरी पहचान

प्रति,

समन्वयक,
Mediwheel (Arcofemi Healthcare Limited)
हेल्पलाइन नंबर: 011-41195959

महोदय/ महोदया,

विषय: बैंक ऑफ़ बड़ोदा के कर्मचारियों के लिए वार्षिक स्वास्थ्य जांच।

हम आपको सूचित करना चाहते हैं कि हमारे कर्मचारी की पत्नी/पति जिनके विवरण निम्नानुसार हैं हमारे करार के अनुसार आपके द्वारा उपलब्ध कराई गई कैशलेस वार्षिक स्वास्थ्य जांच सुविधा का लाभ लेना चाहते हैं।

स्वास्थ्य जांच ताभाधी केविवरण	
नाम	BINDHYA VASHINI TIWARY
जन्म की तारीख	02-06-1976
कर्मचारी की पत्नी/पति के स्वास्थ्य जांच की प्रस्तावित तारीख	27-02-2024
बुकिंग संदर्भ सं.	23M105496100093794S
पत्नी/पति केविवरण	
कर्मचारी का नाम	MR. TIWARY PRAMOD
कर्मचारी की क.कू.संख्या	105496
कर्मचारी का पद	BRANCH OPERATIONS
कर्मचारी के कार्य का स्थान	PARTAPUR
कर्मचारी के जन्म की तारीख	26-10-1971

यह अनुमोदन/ संस्तुति पत्र तभी वैध माना जाएगा जब इसे बैंक ऑफ़ बड़ोदा के कर्मचारी आईडी कार्ड की प्रति के साथ प्रस्तुत किया जाएगा। यह अनुमोदन पत्र दिनांक **26-02-2024** से **31-03-2024** तक मान्य है। इस पत्र के साथ किए जाने वाले चिकित्सा जांच की सूची अनुलग्नक के रूप में दी गई है। कृपया नोट करें कि उक्त स्वास्थ्य जांच हमारी टाई-अप व्यवस्था के अनुसार कैशलेस सुविधा है। हम अनुरोध करते हैं कि आप हमारे कर्मचारी के पत्नी/पति की स्वास्थ्य जांच संबंधी आवश्यकताओं पर उचित कार्रवाई करें तथा इस संबंध में अपनी सर्वोच्च प्राथमिकता तथा सर्वोत्तम संसाधन उपलब्ध कराएं। उपर्युक्त सारणी में दी गई कर्मचारी कूट संख्या एवं बुकिंग संदर्भ संख्या का उल्लेख अनिवार्य रूप से इनबॉइस में किया जाना चाहिए।

हम इस संबंध में आपके सहयोग की अपेक्षा करते हैं।

भवदीय,

हस्ता/-

(मुख्य महाप्रबंधक)

मानव संसाधन प्रबंधन विभाग

बैंक ऑफ़ बड़ोदा

(नोट: यह कंप्यूटर द्वारा जनरेट किया गया पत्र है। हस्ताक्षर की आवश्यकता नहीं है। कृपया किसी भी स्पष्टीकरण के लिए Mediwheel (Arcofemi Healthcare Limited) से संपर्क करें।)

To,

The Coordinator,
Mediwheel (Arcofemi Healthcare Limited)
Helpline number: 011- 41195959

Dear Sir / Madam,

Sub: Annual Health Checkup for the employees of Bank of Baroda

This is to inform you that the following spouse of our employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS OF HEALTH CHECK UP BENEFICIARY	
NAME	BINDHYA VASHINI TIWARY
DATE OF BIRTH	02-06-1976
PROPOSED DATE OF HEALTH CHECKUP FOR EMPLOYEE SPOUSE	27-02-2024
BOOKING REFERENCE NO.	23M105496100093794S
SPOUSE DETAILS	
EMPLOYEE NAME	MR. TIWARY PRAMOD
EMPLOYEE EC NO.	105496
EMPLOYEE DESIGNATION	BRANCH OPERATIONS
EMPLOYEE PLACE OF WORK	PARTAPUR
EMPLOYEE BIRTHDATE	26-10-1971

This letter of approval / recommendation is valid if submitted along with copy of the Bank of Baroda employee id card. This approval is valid from **26-02-2024** till **31-03-2024**. The list of medical tests to be conducted is provided in the annexure to this letter. Please note that the said health checkup is a **cashless facility** as per our tie up arrangement. We request you to attend to the health checkup requirement of our employee's spouse and accord your top priority and best resources in this regard. The EC Number and the booking reference number as given in the above table shall be mentioned in the invoice, invariably.

We solicit your co-operation in this regard.

Yours faithfully,

Sd/-

Chief General Manager
HRM Department
Bank of Baroda

(Note: This is a computer generated letter. No Signature required. For any clarification, please contact Mediwheel (Arcofemi Healthcare Limited))

SUGGESTIVE LIST OF MEDICAL TESTS

FOR MALE	FOR FEMALE
CBC	CBC
ESR	ESR
Blood Group & RH Factor	Blood Group & RH Factor
Blood and Urine Sugar Fasting	Blood and Urine Sugar Fasting
Blood and Urine Sugar PP	Blood and Urine Sugar PP
Stool Routine	Stool Routine
Lipid Profile	Lipid Profile
Total Cholesterol	Total Cholesterol
HDL	HDL
LDL	LDL
VLDL	VLDL
Triglycerides	Triglycerides
HDL / LDL ratio	HDL / LDL ratio
Liver Profile	Liver Profile
AST	AST
ALT	ALT
GGT	GGT
Bilirubin (total, direct, indirect)	Bilirubin (total, direct, indirect)
ALP	ALP
Proteins (T, Albumin, Globulin)	Proteins (T, Albumin, Globulin)
Kidney Profile	Kidney Profile
Serum creatinine	Serum creatinine
Blood Urea Nitrogen	Blood Urea Nitrogen
Uric Acid	Uric Acid
HBA1C	HBA1C
Routine urine analysis	Routine urine analysis
USG Whole Abdomen	USG Whole Abdomen
General Tests	General Tests
X Ray Chest	X Ray Chest
ECG	ECG
2D/3D ECHO / TMT	2D/3D ECHO / TMT
Stress Test	Thyroid Profile (T3, T4, TSH)
PSA Male (above 40 years)	Mammography (above 40 years) and Pap Smear (above 30 years).
Thyroid Profile (T3, T4, TSH)	Dental Check-up consultation
Dental Check-up consultation	Physician Consultation
Physician Consultation	Eye Check-up consultation
Eye Check-up consultation	Skin/ENT consultation
Skin/ENT consultation	Gynaec Consultation

CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

of Bindhysvashini Twaraj on 27/2/24

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	<input checked="" type="checkbox"/>
<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. Review after _____ recommended• Unfit	

Dr. Neenu
Medical Officer
The Apollo Clinic, Uppal

This certificate is not meant for medico-legal purposes



PREVENTIVE HEALTH CARE SUMMARY

NAME :- Bindhya Vaishini Tiwari	UHID No: 18436
AGE / GENDER :- 47yif	RECEIPT No :-
PANEL :- Aragam	EXAMINED ON :- 27/2/24

Lef/od Hypothyroidism on 4
Strong
LSCS

Chief Complaints:

Past History:

DM	:	Nil	CVA	:	Nil
Hypertension	:	Nil	Cancer	:	Nil
CAD	:	Nil	Other	:	Nil

Personal History:

Alcohol	:	Nil	Activity	:	Active
Smoking	:	Nil	Allergies	:	Nil

Family History:

DM

General Physical Examination:

Height	160	:	cms	Pulse	56/rif	bpm
Weight	68.3	:	Kgs	BP	110/80	mmHg

Rest of examination was within normal limits.

Systemic Examination:

CVS	:	Normal
Respiratory system	:	Normal
Abdominal system	:	Normal
CNS	:	Normal
Others	:	Normal

PREVENTIVE HEALTH CARE SUMMARY

NAME :- Bindhyaashini	UHID No :	
AGE :-	SEX :	RECEIPT No :-
PANEL :	EXAMINED ON :-	

Investigations:

- All the reports of tests and investigations are attached herewith

HbA1c 6

Tcholesterol 228 TG 166

TSH 45.630

Recommendation:

- Endo cronologist opinion
- Sugar free / low fat diet
- Cap Absolute woman 100% 1-2 months
- My vite D₃ 60k once a week 2 months


Dr. Navneet Kaur
Consultant Physician

Dr. Prachi Sharma

BDS, MDS - Prosthodontics and Crown & Bridge
DDC No: A-14151



For Appointment: +91 11 4046 5555
Mob: +91 9910995018
Email: drusha.maheshwari@apollospectra.com

27/02/2024


Mrs. Bindhya Vasini Tiwary,
47 Y / F.

C/C:- Regular Dental Check-up


M/H:- Under Medication for Thyroid

P/DH:- N.R.

O/E:- Calculus +

Carious wet 

Advised:- X-Ray wet 

Rx: Warm Saline Rinses  7/1 month

Ph.

Apollo Spectra Hospitals: Plot No. A-2, Chirag Enclave, Greater Kailash -1, New Delhi -110048.
Ph: 011-40465555, 9910995018 | www.apollospectra.com

Apollo Specialty Hospital Pvt. Ltd.

CIN - U85100TG2009PTC099414

Regd. Office: 7-1-617/A, 615 & 616, Imperial Towers, 7th Floor, Ameerpet, Hyderabad, Telangana - 500038
Ph No: 040-4904 7777 | www.apollohl.com

ID: 18436

27-02-2024 11:50:57

Binalkavashmi Truora
~~Female~~ 45 Years

Req. No. :

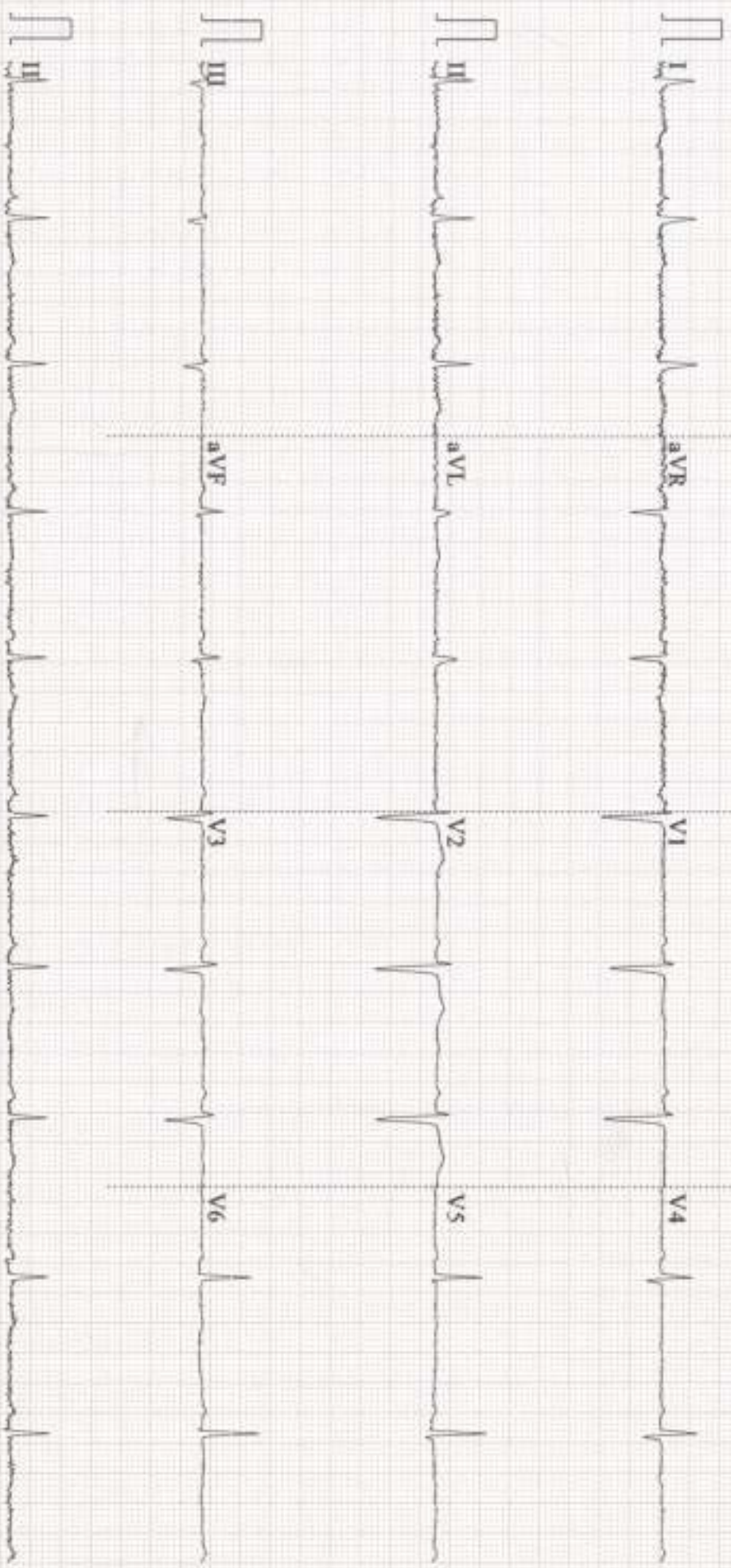
HR	: 59	bpm
P	: 111	ms
PR	: 167	ms
QRS	: 87	ms
QT/QTcBz	: 421/420	ms
PQRST	: 45/14/24	ms
RV5/SV1	: 0.865/0.973	mV

Diagnosis Information:

Sinus Bradycardia
Low T Wave(V4,V5,V6)

Report Confirmed by:

Dr. Anil Kumar



DIGITAL X-RAY REPORT

NAME: BINDHYAVASHINI TIWARY	DATE: 27.02.2024
UHID NO : 18436	AGE: 47YRS/ SEX: FEMALE

X-RAY CHEST PA VIEW

Both the lung fields show no active parenchymal pathology.

Both the costophrenic angles are clear.

Heart size is normal.

Both the domes of diaphragm are normal.

Bony thorax appears normal.

IMPRESSION: NO SIGNIFICANT ABNORMALITY

Please correlate clinically and with lab investigations.


DR. MONICA CHHABRA
Consultant Radiologist

Dr. MONICA CHHABRA
Consultant Radiologist
DMC No. 18744
Apollo Spectra Hospitals
New Delhi-110019

NAME :	MRS. BINDHYAVASHINI TIWARY	AGE/SEX	47	YRS. /F
UHID :	187436			
REF BY :	APOLLO SPECTRA	DATE:-	27.02.2024	

USG BOTH BREAST

Both breast shows normal parenchymal pattern.

No obvious architectural distortion or micro-calcification seen.

No abnormal ductal dilatation seen.

Skin and subcutaneous tissues are normal.

No evidence of significantly enlarged intramammary / axillary lymphadenopathy seen on both sides.

No abnormal vascularity seen on both sides.

Bilateral subareolar regions are unremarkable.

IMPRESSION: USG breast reveals:

No significant abnormality

Advise: Clinical Correlation.

DR. MONICA CHHABRA
CONSULTANT RADIOLOGIST

Dr. MONICA CHHABRA
Consultant Radiologist
DMC No. 18744
Apollo Spectra Hospitals
New Delhi-110019

Name :	BINDHYAVASHINI TIWARY	Age/Sex	47	Yrs/ F
UHID :	18436			
Ref By :	APOLLO SPECTRA	Date:-	27.02.2024	

ULTRASOUND WHOLE ABDOMEN

Liver: Appears normal in size and shows increased parenchymal echogenicity which is most likely due to mild fatty changes. Intrahepatic biliary radicles are not dilated. CBD and portal vein are normal in calibre.

Gall Bladder: normally distended with clear lumen and normal wall thickness. No calculus or sludge is seen.

Pancreas and Spleen: Appears normal in size and echotexture.

Both Kidneys: are normal in size, shape, and echopattern. The parenchymal thickness is normal and cortico-medullary differentiation is well maintained. Pelvicalyceal systems are not dilated. No calculus or mass lesion is seen. Ureter is not dilated.

Urinary Bladder: is moderately distended and shows no obvious calculus or sediments. Bladder wall thickness is normal.

Uterus is antverted and normal in size . It measures 7.5x3.3 cm. Outline is smooth. Myometrium is normal. Endometrial echoes are normal and measures 6.4 mm

Both ovaries are normal in size ,shape and echotexture.

Right ovary: 3.3x2 cm

Left ovary: 2.9x1.6 cm

No obvious adenexal mass is seen. No free fluid seen.

IMPRESSION: MILD FATTY CHANGES IN LIVER

Please correlate clinically and with lab. Investigations.


DR. MONICA CHHABRA
CONSULTANT RADIOLOGIST

Dr. MONICA CHHABRA
Consultant Radiologist
DMC No. 18744
Apollo Spectra Hospitals
New Delhi-110019

Patient Name: Mrs. BINDHYA VASHINI TIWARI Age: 47 Yr
 UHID: SCHI 0000018436 EP Visit No: SC1103PV26726
 Conducted By: Dr. MUKESH K GUPTA Conducted Date: 27-10-2024 16:09
 Referred By: SELF

MITRAL VALVE

Morphology: AML- **Normal** Thickening/Calcification/Flap/ Vegetation/Prolapse/ SAM/ Doming
 PML- **Normal** Thickening/Calcification/Prolapse/Paradoxical motion/ Fixed
 Subvalvular deformity: Present/ **Absent** Score: _____

Doppler: **Normal/Abnormal** E/A: _____ E/A: _____
 Mitral Stenosis: Present/ **Absent** RR Interval: _____ msec
 EDG: _____ mmHg MDG: _____ mmHg MVA: _____ cm²
 Mitral Regurgitation: **Absent** Trivial/Mild/Moderate/Severe

TRICUSPID VALVE

Morphology: **Normal** Atresia/Thickening/Calcification/Prolapse/ Vegetation/ Doming
 Doppler: **Normal/Abnormal**
 Tricuspid stenosis: Present/ **Absent** RR interval: _____ msec
 EDD: _____ mmHg MDG: _____ mmHg
 Tricuspid regurgitation: **Absent** Trivial/Mild/Moderate/Severe/ Fragmental signals
 Velocity: _____ msec Pred. RVSP/RAP: _____ mmHg

PULMONARY VALVE

Morphology: **Normal** Atresia/Thickening/ Doming/ Vegetation
 Doppler: **Normal/Abnormal**
 Pulmonary stenosis: Present/ **Absent** Level: _____
 PSG: _____ mmHg Pulmonary annulus: _____ mm
 Pulmonary regurgitation: **Absent** Trivial/Mild/Moderate/Severe
 Early diastolic gradient: _____ mmHg End diastolic gradient: _____ mmHg

AORTIC VALVE

Morphology: **Normal** Thickening/Calcification/Restricted opening/Flap/ Vegetation
 No. of cusps: 1/2/3/4
 Doppler: **Normal/Abnormal**
 Aortic stenosis: Present/ **Absent** Level: _____
 PSG: _____ mmHg Aortic annulus: _____ mm
 Aortic regurgitation: **Absent** Trivial/Mild/Moderate/Severe

Measurements	Normal Values	Measurements	Normal Values
Aorta	2.7 (2.0 - 3.7cm)	LA as	2.9 (3.9 - 4.0cm)
LV as	3.0 (2.2 - 4.0cm)	LV ed	4.3 (3.7 - 5.6cm)
IVS ad	0.8 (0.6 - 1.1cm)	PW (LV)	0.8 (0.6 - 1.1cm)
RV ad	(0.7 - 2.6cm)	RV Anterior wall	supra 3 mm
LVVd (ml)		LVVs (ml)	
EF	60% (54%-70%)	IVS motion	Normal Flat/Paradoxical

CHAMBERS:

LV: **Normal** Enlarged/ **Clear** Thrombus/ Hypertrophy
 Contraction: **Normal** Reduced

Regional wall motion abnormality: **Absent**

LA: **Normal** Enlarged/ **Clear** Thrombus

RA: **Normal** Enlarged/ **Clear** Thrombus

RV: **Normal** Enlarged/ **Clear** Thrombus

Apollo Spectra Hospitals: Plot No. A-2, Chirag Enclave, Greater Kailash -1, New Delhi -110048

Ph: 011-40465555, 9910995018 | www.apollospectra.com

Apollo Specialty Hospital Pvt. Ltd.

CIN - U85100TG2009PTC099414

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Ph No: 040-4904 7777 | www.apollohl.com

PERICARDIUM

COMMENTS & SUMMARY

- ✓ Normal LV systolic function
- ✓ No RWMA, LVEF=60%
- ✓ No AR,PR,MR & TR
- ✓ No DC abn or mass
- ✓ Good RV function
- ✓ Normal pericardium
- ✓ No pericardial effusion



Dr. M K Gupta
M.B.B.S. MD.FIACM
Senior Consultant Cardiologist

Apollo Spectra Hospitals: Plot No. A-2, Chirag Enclave, Greater Kailash -1, New Delhi -110048

Ph: 011-40465555, 9910995018 | www.apollospectra.com

Apollo Specialty Hospital Pvt. Ltd.

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Ph No: 040-4904 7777 | www.apollohl.com

Bindhyavashini

Dr

— Lactacyd wash
alternate day

Dr

27.2.24

Dr. Pradyumn

Mr. Pradyumn

Therapy

47M

in p @ 4/6 → 3/3
① 4/6 → 3/3
(Unneeded)

No recent history
Problem
②

NC 19/10 u

Red p @ 4/6 → 3/3
① 4/6 → 3/3
could + 1/7/20/2
③

→ 4/6 → 3/3

A. Pradyumn

col history of ②

Dr. Pradyumn

Patient Name : Mrs.BINDHYAVASHINI TIWARY
Age/Gender : 47 Y 8 M 25 D/F
UHID/MR No : SCHI.0000018436
Visit ID : SCHIOPV26726
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : 789456123789

Collected : 27/Feb/2024 08:57AM
Received : 27/Feb/2024 09:20AM
Reported : 27/Feb/2024 01:52PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

PERIPHERAL SMEAR , WHOLE BLOOD EDTA



Dr. SHWETA GUPTA
MBBS,MD (Pathology)
Consultant Pathology

SIN No:BED240051115



Patient Name : Mrs.BINDHYAVASHINI TIWARY
Age/Gender : 47 Y 8 M 25 D/F
UHID/MR No : SCHI.0000018436
Visit ID : SCHIOPV26726
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Collected : 27/Feb/2024 08:57AM
Received : 27/Feb/2024 09:20AM
Reported : 27/Feb/2024 01:52PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	12.9	g/dL	12-15	CYANIDE FREE COLOUROMETER
PCV	40.60	%	40-50	PULSE HEIGHT AVERAGE
RBC COUNT	4.61	Million/cu.mm	3.8-4.8	Electrical Impedance
MCV	88	fL	83-101	Calculated
MCH	28	pg	27-32	Calculated
MCHC	31.8	g/dL	31.5-34.5	Calculated
R.D.W	15.5	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	4,910	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	51.5	%	40-80	Electrical Impedance
LYMPHOCYTES	37.2	%	20-40	Electrical Impedance
EOSINOPHILS	4.3	%	1-6	Electrical Impedance
MONOCYTES	6.1	%	2-10	Electrical Impedance
BASOPHILS	0.9	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	2528.65	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	1826.52	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	211.13	Cells/cu.mm	20-500	Calculated
MONOCYTES	299.51	Cells/cu.mm	200-1000	Calculated
BASOPHILS	44.19	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	1.38		0.78- 3.53	Calculated
PLATELET COUNT	247000	cells/cu.mm	150000-410000	IMPEDENCE/MICROSCOPY
ERYTHROCYTE SEDIMENTATION RATE (ESR)	05	mm at the end of 1 hour	0-20	Modified Westergren
PERIPHERAL SMEAR				

RBCs ARE NORMOCYTIC NORMOCHROMIC.

TLC , DLC WITHIN NORMAL LIMIT. NO IMMATURE CELLS ARE SEEN.
PLATELETS ARE ADEQUATE.

Page 2 of 13



Dr. SHWETA GUPTA
MBBS,MD (Pathology)
Consultant Pathology
SIN No:BED240051115



Patient Name : Mrs.BINDHYAVASHINI TIWARY
Age/Gender : 47 Y 8 M 25 D/F
UHID/MR No : SCHI.0000018436
Visit ID : SCHIOPV26726
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : 789456123789

Collected : 27/Feb/2024 08:57AM
Received : 27/Feb/2024 09:20AM
Reported : 27/Feb/2024 01:52PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

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

NO HEMOPARASITES SEEN



Dr. SHWETA GUPTA
MBBS, MD (Pathology)
Consultant Pathology

SIN No:BED240051115



Patient Name : Mrs.BINDHYAVASHINI TIWARY	Collected : 27/Feb/2024 08:57AM
Age/Gender : 47 Y 8 M 25 D/F	Received : 27/Feb/2024 09:20AM
UHID/MR No : SCHI.0000018436	Reported : 27/Feb/2024 01:52PM
Visit ID : SCHIOPV26726	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 789456123789	

DEPARTMENT OF HAEMATOLOGY

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

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



Dr. SHWETA GUPTA
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Consultant Pathology
SIN No:BED240051115



Patient Name : Mrs.BINDHYAVASHINI TIWARY	Collected : 27/Feb/2024 12:03PM
Age/Gender : 47 Y 8 M 25 D/F	Received : 27/Feb/2024 01:31PM
UHID/MR No : SCHI.0000018436	Reported : 27/Feb/2024 02:02PM
Visit ID : SCHIOPV26726	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 789456123789	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, FASTING , NAF PLASMA	111	mg/dL	70-100	GOD - POD

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)	96	mg/dL	70-140	GOD - POD

Comment:

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

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



Dr. SHWETA GUPTA
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SIN No:PLP1424583



Patient Name : Mrs.BINDHYAVASHINI TIWARY	Collected : 27/Feb/2024 08:57AM
Age/Gender : 47 Y 8 M 25 D/F	Received : 27/Feb/2024 01:35PM
UHID/MR No : SCHI.0000018436	Reported : 27/Feb/2024 04:05PM
Visit ID : SCHIOPV26726	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 789456123789	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA				
HBA1C, GLYCATED HEMOGLOBIN	6	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	126	mg/dL		Calculated

Comment:

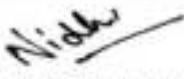
Reference Range as per American Diabetes Association (ADA) 2023 Guidelines:


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)

Page 6 of 13


Dr Nidhi Sachdev
M.B.B.S,MD(Pathology)
Consultant Pathologist


Dr.Tanish Mandal
M.B.B.S,M.D(Pathology)
Consultant Pathologist



SIN No:EDT240023066

Patient Name : Mrs.BINDHYAVASHINI TIWARY	Collected : 27/Feb/2024 08:57AM
Age/Gender : 47 Y 8 M 25 D/F	Received : 27/Feb/2024 09:20AM
UHID/MR No : SCHI.0000018436	Reported : 27/Feb/2024 12:59PM
Visit ID : SCHIOPV26726	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 789456123789	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	229	mg/dL	<200	CHE/CHO/POD
TRIGLYCERIDES	166	mg/dL	<150	Enzymatic
HDL CHOLESTEROL	56	mg/dL	>40	CHE/CHO/POD
NON-HDL CHOLESTEROL	173	mg/dL	<130	Calculated
LDL CHOLESTEROL	139.8	mg/dL	<100	Calculated
VLDL CHOLESTEROL	33.2	mg/dL	<30	Calculated
CHOL / HDL RATIO	4.09		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.


Dr. SHWETA GUPTA
MBBS, MD (Pathology)
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SIN No:SE04643146



Patient Name : Mrs.BINDHYAVASHINI TIWARY	Collected : 27/Feb/2024 08:57AM
Age/Gender : 47 Y 8 M 25 D/F	Received : 27/Feb/2024 09:20AM
UHID/MR No : SCHI.0000018436	Reported : 27/Feb/2024 12:59PM
Visit ID : SCHIOPV26726	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 789456123789	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	1.00	mg/dL	0.20-1.20	DIAZO METHOD
BILIRUBIN CONJUGATED (DIRECT)	0.10	mg/dL	0.0-0.3	Calculated
BILIRUBIN (INDIRECT)	0.90	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	50	U/L	<35	Visible with P-5-P
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	36.0	U/L	14-36	UV with P-5-P
ALKALINE PHOSPHATASE	90.00	U/L	38-126	p-nitrophenyl phosphate
PROTEIN, TOTAL	7.50	g/dL	6.3-8.2	Biuret
ALBUMIN	4.20	g/dL	3.5 - 5	Bromocresol Green
GLOBULIN	3.30	g/dL	2.0-3.5	Calculated
A/G RATIO	1.27		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'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.


Dr. SHWETA GUPTA
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SIN No:SE04643146



Patient Name : Mrs.BINDHYAVASHINI TIWARY
 Age/Gender : 47 Y 8 M 25 D/F
 UHID/MR No : SCHI.0000018436
 Visit ID : SCHIOPV26726
 Ref Doctor : Dr.SELF
 Emp/Auth/TPA ID : 789456123789

Collected : 27/Feb/2024 08:57AM
 Received : 27/Feb/2024 09:20AM
 Reported : 27/Feb/2024 12:59PM
 Status : Final Report
 Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	0.80	mg/dL	0.5-1.04	Creatinine amidohydrolase
UREA	19.20	mg/dL	15-36	Urease
BLOOD UREA NITROGEN	9.0	mg/dL	8.0 - 23.0	Calculated
URIC ACID	5.80	mg/dL	2.5-6.2	Uricase
CALCIUM	8.40	mg/dL	8.4 - 10.2	Arsenazo-III
PHOSPHORUS, INORGANIC	4.30	mg/dL	2.5-4.5	PMA Phenol
SODIUM	140	mmol/L	135-145	Direct ISE
POTASSIUM	4.3	mmol/L	3.5-5.1	Direct ISE
CHLORIDE	99	mmol/L	98 - 107	Direct ISE
PROTEIN, TOTAL	7.50	g/dL	6.3-8.2	Biuret
ALBUMIN	4.20	g/dL	3.5 - 5	Bromocresol Green
GLOBULIN	3.30	g/dL	2.0-3.5	Calculated
A/G RATIO	1.27		0.9-2.0	Calculated



Dr. SHWETA GUPTA
 MBBS, MD (Pathology)
 Consultant Pathology
 SIN No:SE04643146



Patient Name : Mrs.BINDHYAVASHINI TIWARY	Collected : 27/Feb/2024 08:57AM
Age/Gender : 47 Y 8 M 25 D/F	Received : 27/Feb/2024 09:20AM
UHID/MR No : SCHI.0000018436	Reported : 27/Feb/2024 10:54AM
Visit ID : SCHIOPV26726	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 789456123789	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	22.00	U/L	12-43	Glycylglycine Nitoranalide



Dr. SHWETA GUPTA
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SIN No:SE04643146



Patient Name : Mrs.BINDHYAVASHINI TIWARY	Collected : 27/Feb/2024 08:57AM
Age/Gender : 47 Y 8 M 25 D/F	Received : 27/Feb/2024 09:20AM
UHID/MR No : SCHI.0000018436	Reported : 27/Feb/2024 05:45PM
Visit ID : SCHIOPV26726	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 789456123789	

DEPARTMENT OF IMMUNOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM				
TRI-IODOTHYRONINE (T3, TOTAL)	0.79	ng/mL	0.67-1.81	ELFA
THYROXINE (T4, TOTAL)	5.66	µg/dL	4.66-9.32	ELFA
THYROID STIMULATING HORMONE (TSH)	45.630	µIU/mL	0.25-5.0	ELFA

Comment:

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

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

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




Dr. SHWETA GUPTA
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SIN No: SPL24033773

Patient Name : Mrs.BINDHYAVASHINI TIWARY
 Age/Gender : 47 Y 8 M 25 D/F
 UHID/MR No : SCHI.0000018436
 Visit ID : SCHIOPV26726
 Ref Doctor : Dr.SELF
 Emp/Auth/TPA ID : 789456123789

Collected : 27/Feb/2024 08:57AM
 Received : 27/Feb/2024 12:15PM
 Reported : 27/Feb/2024 02:04PM
 Status : Final Report
 Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF CLINICAL PATHOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
COMPLETE URINE EXAMINATION (CUE) , URINE				
PHYSICAL EXAMINATION				
COLOUR	COLOURLESS		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pH	6.0		5-7.5	Bromothymol Blue
SP. GRAVITY	1.030		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	0-2	/hpf	0-5	Microscopy
EPITHELIAL CELLS	2-3	/hpf	<10	MICROSCOPY
RBC	ABSNET	/hpf	0-2	MICROSCOPY
CASTS	ABSENT		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSNET		ABSENT	MICROSCOPY


 Dr. SHWETA GUPTA
 MBBS,MD (Pathology)
 Consultant Pathology
 SIN No:UR2292398



Patient Name : Mrs.BINDHYAVASHINI TIWARY	Collected : 27/Feb/2024 08:57AM
Age/Gender : 47 Y 8 M 25 D/F	Received : 27/Feb/2024 12:15PM
UHID/MR No : SCHI.0000018436	Reported : 27/Feb/2024 02:03PM
Visit ID : SCHIOPV26726	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 789456123789	

DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - 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

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

Result/s to Follow:
LBC PAP TEST (PAPSURE)



Dr. SHWETA GUPTA
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SIN No:UF010828

