

Patient Name : Mrs.SREEJA P U	Collected : 09/Nov/2024 09:48AM
Age/Gender : 31 Y 10 M 12 D/F	Received : 09/Nov/2024 11:54AM
UHID/MR No : CIND.0000173156	Reported : 09/Nov/2024 12:58PM
Visit ID : CINDOPV244843	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22E36982	

DEPARTMENT OF HAEMATOLOGY

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

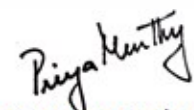
Test Name	Result	Unit	Bio. Ref. Interval	Method
HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	12.5	g/dL	12-15	Spectrophotometer
PCV	37.20	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.81	Million/cu.mm	3.8-4.8	Electrical Impedance
MCV	77.4	fL	83-101	Calculated
MCH	25.9	pg	27-32	Calculated
MCHC	33.5	g/dL	31.5-34.5	Calculated
R.D.W	14.8	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	8,430	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYtic COUNT (DLC)				
NEUTROPHILS	53.9	%	40-80	Electrical Impedance
LYMPHOCYTES	37.9	%	20-40	Electrical Impedance
EOSINOPHILS	1.3	%	1-6	Electrical Impedance
MONOCYTES	6.5	%	2-10	Electrical Impedance
BASOPHILS	0.4	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	4543.77	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	3194.97	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	109.59	Cells/cu.mm	20-500	Calculated
MONOCYTES	547.95	Cells/cu.mm	200-1000	Calculated
BASOPHILS	33.72	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	1.42		0.78- 3.53	Calculated
PLATELET COUNT	503000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	34	mm at the end of 1 hour	0-20	Modified Westegren method
PERIPHERAL SMEAR				

RBCs: are normocytic hypochromic with few microcytes seen.

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



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Consultant Pathologist



Dr Priya Murthy
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PLATELETS: appear mildly increased in number.

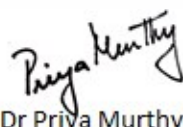
HEMOPARASITES: negative

IMPRESSION: NORMOCYTIC HYPOCHROMIC BLOOD PICTURE WITH MILD THROMBOCYTOSIS.

Note: Kindly evaluate for iron deficiency status.



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Patient Name : Mrs.SREEJA P U	Collected : 09/Nov/2024 09:48AM
Age/Gender : 31 Y 10 M 12 D/F	Received : 09/Nov/2024 12:28PM
UHID/MR No : CIND.0000173156	Reported : 09/Nov/2024 04:34PM
Visit ID : CINDOPV244843	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22E36982	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, FASTING , NAF PLASMA	82	mg/dL	70-100	HEXOKINASE


Comment:

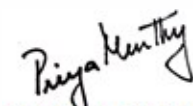
As per American Diabetes Guidelines, 2023

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:

- 1.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.
- 2. Very high glucose levels (>450 mg/dL in adults) may result in Diabetic Ketoacidosis & is considered critical.


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Patient Name : Mrs.SREEJA P U	Collected : 09/Nov/2024 01:48PM
Age/Gender : 31 Y 10 M 12 D/F	Received : 09/Nov/2024 05:42PM
UHID/MR No : CIND.0000173156	Reported : 09/Nov/2024 06:18PM
Visit ID : CINDOPV244843	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
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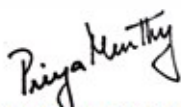
DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	106	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.



Dr Priya Murthy
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 Consultant Pathologist



Patient Name : Mrs.SREEJA P U	Collected : 09/Nov/2024 09:48AM
Age/Gender : 31 Y 10 M 12 D/F	Received : 09/Nov/2024 11:55AM
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Visit ID : CINDOPV244843	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
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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. Interval	Method
HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA				
HBA1C, GLYCATED HEMOGLOBIN	6.1	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	128	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 glycaemic 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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SIN No:IRA241100981

Apollo Health and Lifestyle Limited

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

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APOLLO CLINIC'S NETWORK

Telangana: Hyderabad | Andhra Pradesh: Visakhapatnam | Karnataka: Bangalore | Kerala: Kochi | Maharashtra: Mumbai | Gujarat: Ahmedabad | Odisha: Bhubaneswar | West Bengal: Kolkata | Tamil Nadu: Chennai | Punjab: Chandigarh | Haryana: Gurgaon | Rajasthan: Jaipur | Uttar Pradesh: Lucknow | Bihar: Patna | Jharkhand: Ranchi | Assam: Dispur | Manipal: Imphal | Mizoram: Aizawl | Nagaland: Kohima | Arunachal Pradesh: Itanagar | Meghalaya: Shillong | Tripura: Agartala | Assam: Dispur | Mizoram: Aizawl | Nagaland: Kohima | Arunachal Pradesh: Itanagar | Meghalaya: Shillong | Tripura: Agartala

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Collected : 09/Nov/2024 09:48AM
Received : 09/Nov/2024 11:30AM
Reported : 09/Nov/2024 12:22PM
Status : Final Report
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. Interval	Method
LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.55	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.12	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.43	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	15	U/L	<35	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	16.0	U/L	<35	IFCC
AST (SGOT) / ALT (SGPT) RATIO (DE RITIS)	1.1		<1.15	Calculated
ALKALINE PHOSPHATASE	89.00	U/L	30-120	IFCC
PROTEIN, TOTAL	7.52	g/dL	6.6-8.3	Biuret
ALBUMIN	4.52	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.00	g/dL	2.0-3.5	Calculated
A/G RATIO	1.51		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:

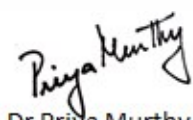
*AST – Elevated levels can be seen. However, it is not specific to liver and can be raised in cardiac and skeletal injuries.*ALT – Elevated levels indicate hepatocellular damage. It is considered to be most specific lab test for hepatocellular injury. Values also correlate well with increasing BMI. Disproportionate increase in AST, ALT compared with ALP. 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 Patten:*ALP – Disproportionate increase in ALP compared with AST, ALT. ALP elevation also seen in pregnancy, impacted by age and sex.*Bilirubin elevated- predominantly direct , To establish the hepatic origin correlation with elevated GGT helps.

3. Synthetic function impairment:*Albumin- Liver disease reduces albumin levels, Correlation with PT (Prothrombin Time) helps.

4. Associated tests for assessment of liver fibrosis - Fibrosis-4 and APRI Index.


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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. Interval	Method
RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	0.92	mg/dL	0.66 - 1.09	Modified Jaffe, Kinetic
UREA	13.90	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	6.5	mg/dL	8.0 - 23.0	Calculated
URIC ACID	5.44	mg/dL	2.6-6.0	Uricase PAP
CALCIUM	9.90	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	4.22	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	137	mmol/L	136–146	ISE (Indirect)
POTASSIUM	4.4	mmol/L	3.5–5.1	ISE (Indirect)
CHLORIDE	109	mmol/L	101–109	ISE (Indirect)
PROTEIN, TOTAL	7.52	g/dL	6.6-8.3	Biuret
ALBUMIN	4.52	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.00	g/dL	2.0-3.5	Calculated
A/G RATIO	1.51		0.9-2.0	Calculated

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SIN No:IRA241100977



Patient Name : Mrs.SREEJA P U	Collected : 09/Nov/2024 09:48AM
Age/Gender : 31 Y 10 M 12 D/F	Received : 09/Nov/2024 11:27AM
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Visit ID : CINDOPV244843	Status : Final Report
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DEPARTMENT OF IMMUNOLOGY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM				
TRI-iodOTHYRONINE (T3, TOTAL)	1.1	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	8.9	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	1.738	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

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SIN No:IRA241100980

Patient Name : Mrs.SREEJA P U	Collected : 09/Nov/2024 09:48AM
Age/Gender : 31 Y 10 M 12 D/F	Received : 09/Nov/2024 03:16PM
UHID/MR No : CIND.0000173156	Reported : 09/Nov/2024 03:44PM
Visit ID : CINDOPV244843	Status : Final Report
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Emp/Auth/TPA ID : 22E36982	

DEPARTMENT OF CLINICAL PATHOLOGY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
COMPLETE URINE EXAMINATION (CUE) , URINE				
PHYSICAL EXAMINATION				
COLOUR	YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Physical Measurement
pH	5.5		5-7.5	Double Indicator
SP. GRAVITY	1.025		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
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	POSITIVE ++		NEGATIVE	Leucocyte Esterase
CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY				
PUS CELLS	10-15	/hpf	0-5	Microscopy
EPITHELIAL CELLS	2-3	/hpf	<10	Microscopy
RBC	6-8	/hpf	0-2	Microscopy
CASTS	NIL		0-2 Hyaline Cast	Microscopy
CRYSTALS	ABSENT		ABSENT	Microscopy

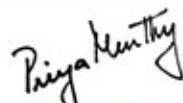
Result is rechecked. Kindly correlate clinically.

Comment:

All urine samples are checked for adequacy and suitability before examination. All abnormal chemical examination are rechecked and verified by manual methods. Microscopy findings are reported as an average of 10 high power fields.



Dr. Vidya Aniket Gore
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Patient Name : Mrs.SREEJA P U	Collected : 09/Nov/2024 09:48AM
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DEPARTMENT OF CLINICAL PATHOLOGY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
URINE GLUCOSE(POST PRANDIAL)	NEGATIVE		NEGATIVE	GOD-POD

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APOLLO HEALTH AND LIFESTYLE LIMITED (RRL) BANGALORE LABORATORY
SIN.No:RA241100978

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A97/100/10, Doddanahalli, Old Bangalore Road, Rajarajeshwari, Bangalore - 560025.
Mumbai, Nagpur, Hyderabad, Chennai.

 **1860 500 7788**
www.apolloclinic.com

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

APOLLO CLINIC'S NETWORK

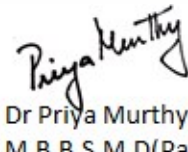
Telangana: Hyderabad (AS Rao Nagar) | Chanda Nagar | Kharajpur | Patacharya | Hyderabad | Upper 1/Andhra Pradesh: Vijay Deshpande Total Karmavaka Bangalore: Basavanagudi | Saranika | Electronic City | Frazer Town | HR Layout (India)
Kerala: Kollam | Kozhikode | Kottayam | Mysore: New Medical, Raja Rajalakshmi Road | Coimbatore: Kottayam | Kerala: Kollam | Karnataka: Bangalore | Chennai: Anna Nagar | Tiruvallur: Anna Nagar
Gujarat: Gandhinagar | Ahmedabad: Gulbarg | Faridkot: Anandpur | Chandigarh: Naraina Park | Haryana: Panipat | Punjab: Sector 14

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UHID/MR No : CIND.0000173156	Reported : 09/Nov/2024 03:40PM
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DEPARTMENT OF CLINICAL PATHOLOGY

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Test Name	Result	Unit	Bio. Ref. Interval	Method
URINE GLUCOSE(FASTING)	NEGATIVE		NEGATIVE	GOD-POD

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Consultant PathologistDr Priya Murthy
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Consultant Pathologist

Patient Name : Mrs.SREEJA P U	Collected : 09/Nov/2024 01:54PM
Age/Gender : 31 Y 10 M 12 D/F	Received : 10/Nov/2024 02:26PM
UHID/MR No : CIND.0000173156	Reported : 12/Nov/2024 05:01PM
Visit ID : CINDOPV244843	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
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DEPARTMENT OF CYTOLOGY

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

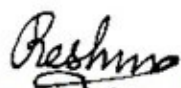
LBC PAP SMEAR , CERVICAL BRUSH SAMPLE

	CYTOLOGY NO.	24582/24
I	SPECIMEN	
a	SPECIMEN ADEQUACY	ADEQUATE
b	SPECIMEN TYPE	LIQUID-BASED PREPARATION (LBC)
	SPECIMEN NATURE/SOURCE	CERVICAL SMEAR
c	ENDOCERVICAL-TRANSFORMATION ZONE	ABSENT
d	COMMENTS	SATISFACTORY FOR EVALUATION
II	MICROSCOPY	Superficial and intermediate squamous epithelial cells with benign morphology. Inflammatory cells, predominantly neutrophils. Negative for intraepithelial lesion/malignancy.
III	RESULT	
a	EPITHELIAL CELL	
	SQUAMOUS CELL ABNORMALITIES	NOT SEEN
	GLANDULAR CELL ABNORMALITIES	NOT SEEN
b	ORGANISM	NIL
IV	INTERPRETATION	NEGATIVE FOR INTRAEPITHELIAL LESION OR MALIGNANCY

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

*** End Of Report ***

Result/s to Follow:
PERIPHERAL SMEAR



Dr. Reshma Stanly
M.B.B.S, DNB(Pathology)
Consultant Pathologist



APOLLO HEALTH & LIFESTYLE LTD. APOLLO HEALTH CARE TESTS CELL UNIT/FLD- 10TH BANGALORE

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

Regd. Office: 10th Floor, Apollo Building, 4th Cross, Rajarajpet, Hyderabad, Telangana - 500016
www.apollohospitals.com | Email ID: quality@apollohospitals.com, Ph: No: 944-9661 7777, Fax No: 4661 7766

APOLLO CLINIC'S NETWORK

Telangana: Hyderabad (45 Raaj Nagar) | Chandigarh: Sector 34 (Ganga Nagar) | Karnataka: Bangalore (Banashanuri) | Kerala: Kochi (Malaroad) | Andhra Pradesh: Vizag (Becharamma Nagar) | Gujarat: Gandhinagar (Gandhinagar) | Maharashtra: Pune (Baner) | Tamil Nadu: Chennai (Anna Nagar) | West Bengal: Kolkata (Park Road) | Odisha: Bhubaneswar (ICFSE) | Jharkhand: Ranchi (Sardar Vallabhbhai Patel Road) | Chhattisgarh: Raipur (Bhawani Nagar) | Madhya Pradesh: Bhopal (Bhawani Nagar) | Rajasthan: Jaipur (Bhawani Nagar) | Uttar Pradesh: Lucknow (Bhawani Nagar) | Bihar: Patna (Bhawani Nagar) | Assam: Dispur (Bhawani Nagar) | Punjab: Chandigarh (Bhawani Nagar)



Patient Name	: Mrs. Sreeja P U	Age	: 31Yrs 10Mths 13Days
UHID	: CIND.0000173156	OP Visit No.	: CINDOPV244843
Printed On	: 09-11-2024 08:49 AM	Advised/Pres Doctor	: --
Department	: Radiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employer Id	: 22E36982		

DEPARTMENT OF RADIOLOGY

ULTRASOUND ABDOMEN AND PELVIS

LIVER: Appears normal in size, **shape and show mild diffusely increased echogenicity**. No focal parenchymal lesions identified. No evidence of intra/extrahepatic biliary tree dilatation noted. Portal vein appears to be of normal size.

GALLBLADDER: Moderately distended. No definite calculi identified. No evidence of abnormal wall thickening noted.

SPLEEN: Appears normal in size, shape and echopattern. No focal parenchymal lesions identified.

PANCREAS: Obscured by bowel gas. However, the visualized portion appear normal.

KIDNEYS: Both kidneys appear normal in size, shape and echopattern. Corticomedullary differentiation appears maintained. No evidence of calculi or hydronephrosis on either side.

URINARY BLADDER: Distended and appears normal. No evidence of abnormal wall thickening noted.

UTERUS: Retroverted and appears normal in size. Myometrial echoes appear normal. The endometrial lining appears intact. Endometrium measures 7 mm.

OVARIES: Both ovaries appearing normal in size and **shows multiple follicles - suggested clinical and hormonal correlation**.

No free fluid is seen.

IMPRESSION:

GRADE I FATTY LIVER.

---End Of The Report---



Dr.DHANALAKSHMI B
MBBS, DMRD
29543
Radiology

Patient Name	: Mrs. Sreeja P U	Age	: 31Yrs 10Mths 15Days
UHID	: CIND.0000173156	OP Visit No.	: CINDOPV244843
Printed On	: 11-11-2024 11:47 AM	Advised/Pres Doctor	: --
Department	: Cardiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employer Id	: 22E36982		

DEPARTMENT OF CARDIOLOGY

M mode and doppler measurements:

CM CM M/sec

AO: 2.7 IVS(D): 1.0 MV: E Vel: 0.7 A Vel : 0.5

LA: 3.0 LVIDD(D): 4.5 AV Peak: 0.9

 LVPW(D): 1.1 PV peak: 0.7

 IVS(S): 1.5

 LVID(S): 2.3

 LVPW(S): 1.4

 LVEF: 60%

Descriptive findings:

Left Ventricle Normal
Right Ventricle: Normal
Left Atrium: Normal
Right Atrium: Normal
Mitral Valve: Normal
Aortic Valve: Normal
Tricuspid Valve: Normal
IAS: Normal

IVS: Normal
Pericardium: Normal
IVC: Normal
Others ---

IMPRESSION :

Normal cardiac chamber and valves
No Regional wall motion abnormality
Normal PA pressure
No clot/vegetation/pericardial effusion
Normal LV systolic function - LVEF= 60%

**DR JAGADEESH H V MD,DM
CONSULTANT CARDIOLOGIST**

---End Of The Report---



Dr.JAGADEESH H V

MBBS, MD, DM
86848
Cardiology

Patient Name	: Mrs. Sreeja P U	Age	: 31Yrs 10Mths 13Days
UHID	: CIND.0000173156	OP Visit No.	: CINDOPV244843
Printed On	: 09-11-2024 02:03 PM	Advised/Pres Doctor	: --
Department	: Radiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employee Id	: 22E36982		

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA VIEW

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 .

Thoracic wall and soft tissues appear normal.

CONCLUSION :

No obvious abnormality seen

For clinical correlation.

---End Of The Report---



Dr.RAMESH G
MBBS, DMRD
27462
Radiology

Name : Mrs. Sreeja P U

Age : 31Y 10M 12D

UHID : CIND.0000173156

Address : Bangalore Air Port Bangalore Karnataka INDIA 560017

sex : Female



CIND.0000173156

Plan : ARCOFEMI MEDIWHEEL FEMALE AHC
CREDIT PAN INDIA OP AGREEMENT

OP No: CINDOPV244843

Bill No: CIND-OCR-103613

Date: Nov 9th, 2024, 9:22 AM

Sno.	Service Type/Service Name	Department	
1	ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324		
1	ULTRASOUND - WHOLE ABDOMEN <i>-9 after 11:30am</i>	Ultrasound Radiology	<input type="checkbox"/>
2	OPHTHAL BY GENERAL PHYSICIAN <i>-5</i>	Consultation	<input type="checkbox"/>
3	URINE GLUCOSE(POST PRANDIAL)	Clinical Pathology	<input type="checkbox"/>
4	GAMMA GLUTAMYL TRANFERASE (GGT)	Biochemistry	<input type="checkbox"/>
5	HbA1c, GLYCATED HEMOGLOBIN	Biochemistry	<input type="checkbox"/>
6	GYNAECOLOGY CONSULTATION <i>-3 after 11am</i>	Consultation	<input type="checkbox"/>
7	DIET CONSULTATION	General	<input type="checkbox"/>
8	BODY MASS INDEX (BMI) <i>-6</i>	General	<input type="checkbox"/>
9	EKG <i>-6</i>	Cardiology	<input type="checkbox"/>
10	THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)	Biochemistry	<input type="checkbox"/>
11	2 D ECHO <i>-9 after 9:30am</i>	Cardiology	<input type="checkbox"/>
12	BLOOD GROUP ABO AND RH FACTOR	Blood Bank	<input type="checkbox"/>
13	X-RAY CHEST PA <i>-10 after 10am</i>	X Ray Radiology	<input type="checkbox"/>
14	URINE GLUCOSE(FASTING)	Clinical Pathology	<input type="checkbox"/>
15	LBC PAP TEST- PAPSURE <i>-9 after 11am</i>	Histopathology	<input type="checkbox"/>
16	FITNESS BY GENERAL PHYSICIAN	Consultation	<input type="checkbox"/>
17	GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL)	Biochemistry	<input type="checkbox"/>
18	GLUCOSE, FASTING	Biochemistry	<input type="checkbox"/>
19	ENT CONSULTATION	Consultation	<input type="checkbox"/>
20	LIPID PROFILE	Biochemistry	<input type="checkbox"/>
21	DENTAL CONSULTATION <i>-1 after 10am</i>	Consultation	<input type="checkbox"/>
22	HEMOGRAM + PERIPHERAL SMEAR	Haematology	<input type="checkbox"/>
23	PERIPHERAL SMEAR	Haematology	<input type="checkbox"/>
24	COMPLETE URINE EXAMINATION	Clinical Pathology	<input type="checkbox"/>
25	RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)	Biochemistry	<input type="checkbox"/>
26	LIVER FUNCTION TEST (LFT)	Biochemistry	<input type="checkbox"/>

ms. Sujya P
31y/F

Height : 165cm	Weight : 91.7kg	BMI : 33.4kg/m ²	Waist Circum : 101cm
Temp : 96.8°F	Pulse : 82/min	Resp : 18/min	B.P : 124/80

General Examination / Allergies History

NOV 9 |
2024

Clinical Diagnosis & Management Plan

31y, Dec, LEB sys, mvd,
regular menses Oct 2nd + 40 spotting
cycles
LBC pap done P E

Adv

Use abt 2 pills

on 1st for irregular periods

PA soft mvd
PS - healthy
on hormonal Trt.

Follow up date:

Doctor Signature

OPHTHAL PRESCRIPTION

PATIENT NAME: Sreja PO

DATE: 09.11.24

UHID NO: 17356

AGE: 31Y

OPTOMETRIST NAME:

GENDER: F

This is to certify that I have examined

years and findings of his/her eye examination are as follows,

	RIGHT EYE				LEFT EYE			
	SPH	CYL	AXIS	BCVA	SPH	CYL	AXIS	BCVA
Distance	-3.00	-1.00	180	6/7	-2.00	-1.50	180	6/7
Add								

PD - RE: 32 - LE: 32 -

Colour Vision: Normal

Remarks: for glasses only

R - 2.75 - 1.00 x 180
L - 2.00 - 1.75 x 5

Apollo clinic Indiranagar

Mrs sreeja p u
ID: 173156

09.11.2024 12:20:36

APOLLO CLINIC
INDIRANAGAR
BANGALORE

APOLLO CLINIC
INDIRANAGAR
BANGALORE

Room: CC

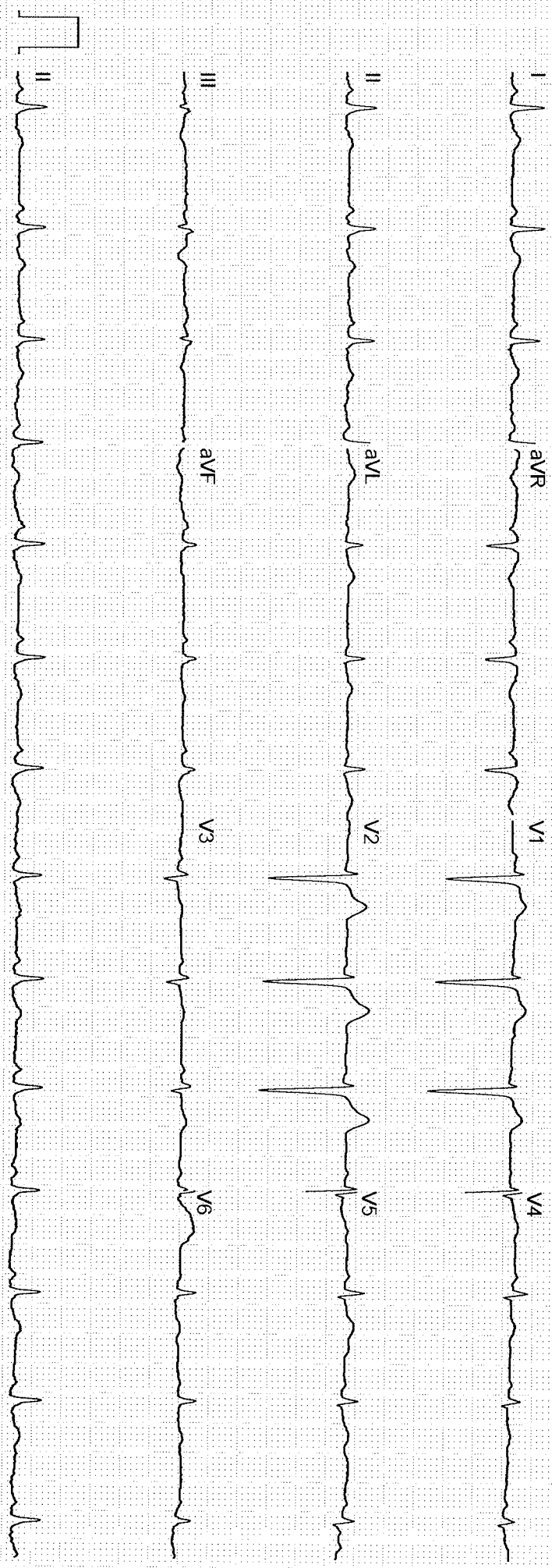
82 bpm
- / - mmHg

28.12.1992
31 Years
Female

QRS : 86 ms
QT / QTcBaz : 362 / 422 ms
PR : 108 ms
P : 64 ms
RR / PP : 728 / 731 ms
P / QRS / T : 39 / 26 / 10 degrees

Order Number:
Indication:
Medication 1:
Medication 2:
Medication 3:

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:



GE MAC2000 1.1 12SL™ V241 25 mm/s 10 mm/mV ADS 0.56-20 Hz 50 Hz 4x2.5x3.25_R1 1/1

Unconfirmed

NAME: Mrs. Sreeja P U	AGE/SEX: 32Y/F	OP NUMBER: 173156
Ref By : SELF	DATE: 09-11-2024	

M mode and doppler measurements:

CM	CM	M/sec	
AO: 2.7	IVS(D): 1.0	MV: E Vel: 0.7	A Vel : 0.5
LA: 3.0	LVIDD(D): 4.5	AV Peak: 0.9	
	LVPW(D): 1.1	PV peak: 0.7	
	IVS(S): 1.5		
	LVID(S): 2.3		
	LVPW(S): 1.4		
	LVEF: 60%		

Descriptive findings:

Left Ventricle	Normal
Right Ventricle:	Normal
Left Atrium:	Normal
Right Atrium:	Normal
Mitral Valve:	Normal
Aortic Valve:	Normal
Tricuspid Valve:	Normal
IAS:	Normal
IVS:	Normal
Pericardium:	Normal
IVC:	Normal
Others	---

IMPRESSION :

Normal cardiac chamber and valves

No Regional wall motion abnormality

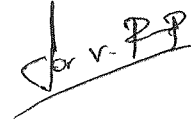
Normal PA preassure

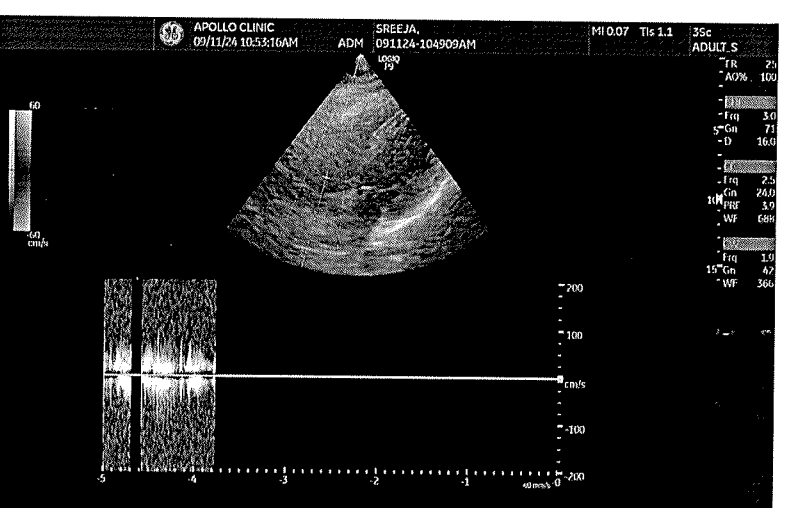
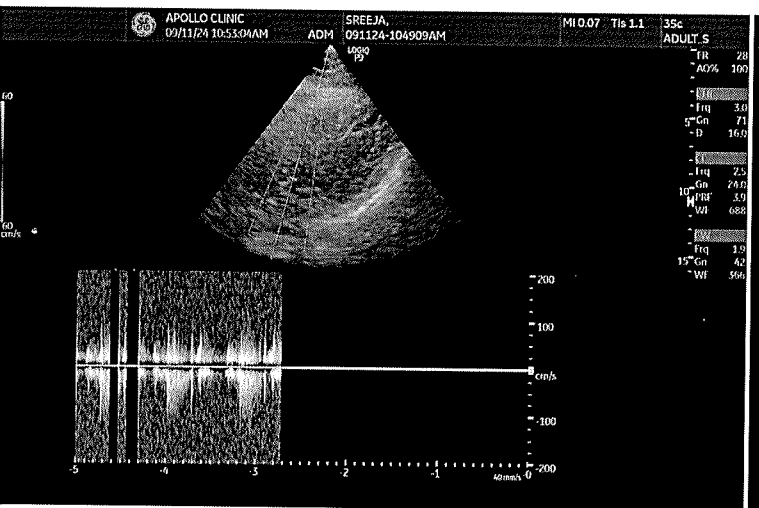
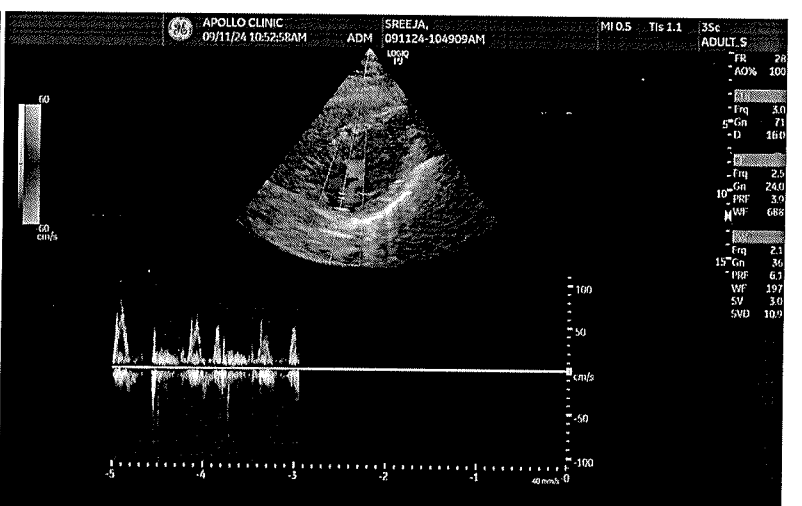
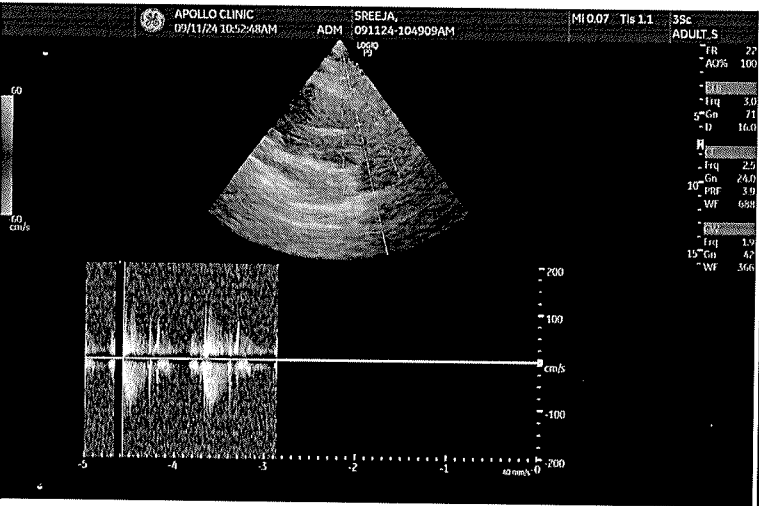
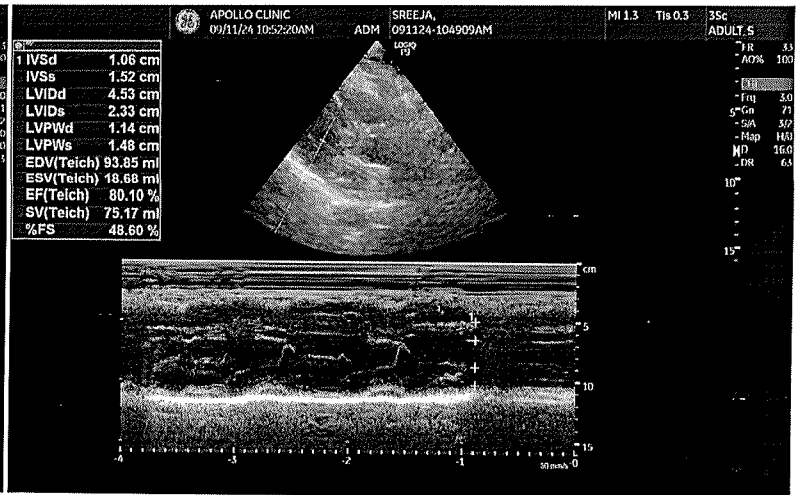
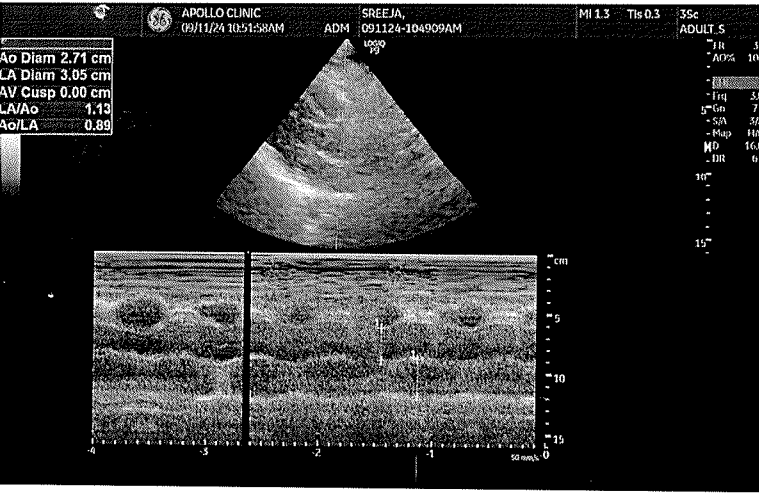
No clot/vegetation/pericardial effusion

Normal LV systolic function - LVEF= 60%

DR JAGADEESH H V MD,DM

CONSULTANT CARDIOLOGIST





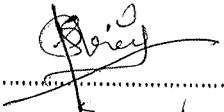
Apollo Clinic

CONSENT FORM

Patient Name: SREEJA P.U Age: 32
UHID Number: 173156 Company Name: Bank of Barod

I Mr/Mrs/Ms Sreeja. P.U Employee of Bank of Barod
(Company) Want to inform you that I am ~~not~~ interested in getting the consultation on
Tests done which is a part of my routine health check package. 16/11/24.

And I claim the above statement in my full consciousness.

Patient Signature:  Date: 16.11.2024

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 | Koramangala | Sarjapur Road) **Mysore** (VV Mohalla)

TO BOOK AN APPOINTMENT



Dear MS. U SREEJA P,

Greetings from Apollo Clinics,


Your corporate health check appointment is confirmed at **INDIRANAGAR clinic** on **2024-11-09** at **08:45-09:00**.

Payment Mode	
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]



SL.No.225

नाम श्रीजा पी यू
Name Sreeja P U
E.C. No 176982


जारीकर्ता प्राधिकारी
Issuing Authority


धारक के हस्ताक्षर
Signature of Holder