



भारत सरकार
Government of India



आधार

Issue Date: 04/01/2014



नेथु क एम्
Neethu K M
ಜನ. ದಿನಾಂಕ / DOB : 20/07/1989
ಸ್ತ್ರೀ / Female



आधार पहचान का प्रमाण है, कारागार का नहीं।
Aadhaar is a proof of identity, not of citizenship.



2254 6039 4121

मेरा आधार, मेरी पहचान

Infinix NOTE

Health Check up Booking Confirmed Request(bobE4959),Package Code-PKG10000475,
Beneficiary Code-304255

Mediwheel <wellness@mediwheel.in>

Fri, 1/12/2024 4:34 PM

To:Vidyavardhaka College Of Engineering Branch , Mysuru Region <VJVIDY@bankofbaroda.com >
Cc:customercare@mediwheel.in <customercare@mediwheel.in>

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



011-41195959

Dear MS. M NEETHU K,

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

Booking Date : 10-01-2024
Hospital Package Name : Mediwheel Full Body Health Checkup Female Below 40
Patient Package Name : Mediwheel Full Body Health Checkup Female Below 40
Name of Diagnostic/Hospital : Dfdf
Address of Diagnostic/Hospital- : Apollo Clinic, 23, Kalidasa Road, VV Mohalla, Mysore -570002
City : Mysore
State :
Pincode : 110045
Appointment Date : 13-01-2024
Confirmation Status : Booking Confirmed
Preferred Time : 8:30am-9:00am
Booking Status : Booking Confirmed

Member Information		
Booked Member Name	Age	Gender
MS. M NEETHU K	34 year	Female

Note - Please note to not pay any amount .

Instructions to undergo Health Check:

- Please ensure you are on complete fasting for 10-To-12-Hours prior to check.

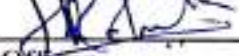
CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

of Mr. Neetu. K.M on 13-1-24

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. <p>Review after _____ recommended</p>	
<ul style="list-style-type: none"> • Unfit 	

Dr. 
 Medical Officer
 The Apollo Clinic, Mysore.

Apollo Health and Lifestyle Limited

APOLLO HEALTH AND LIFESTYLE LIMITED

APOLLO CLINIC, 1st Floor, Kalidasa Road, Mysore (Karnataka, India) | Phone: 0821 250 7788 | Email: info@apolloclinic.com | www.apolloclinic.com

APOLLO CLINICS NETWORK KARNATAKA

Bangalore | Tumkur | Mysore | Srirangapatna | Electronic City | Fraser Town | HSR Layout | Indira Nagar | JP Nagar | Kundly

Krishna Nagar | Industrial Road | Mysore | VV Mohalla

Online appointments: www.apolloclinic.com

This certificate is not meant for medico-legal purposes.

Apollo Clinic

23, 1st Floor,

Kalidasa Road, Mysore - 0821 250 7788

Ph : 0821 250 7788

Date : 13-01-2024
MR NO : CMYS 0000059228

Department : GENERAL
Doctor : P. QUITHAN K.

Name : Mrs. NEETHU K M

Registration No :

Age/ Gender : 33 Y / Female

Qualification :

Consultation Timing: 08:58

Height : 158	Weight : 51.3	BMI :	Waist Circum :
Temp :	Pulse :	Resp :	B.P : 120/70

General Examination /
Allergies History

Clinical Diagnosis & Management Plan

Pt came for Annual Health check up
No fresh complaints
No h/o DM/HTN.

Follow up date :

Doctor Signature

Apollo Clinic
23, K. S. Road,
Kalidasa Road, Mysore - 02
Ph : 0822-4005040/41

Date : 13-01-2024
MR NO : CMYS.0000059228

Department : GENERAL
Doctor :

Name : Mrs. NEETHU K M

Registration No :

Age/ Gender : 33 Y / Female

Qualification :

Consultation Timing: 08:58

Height : 1.58	Weight : 54.3	BMI :	Waist Circum :
Temp :	Pulse :	Resp :	B.P : 96/70

General Examination /
Allergies History

Clinical Diagnosis & Management Plan

Near
vum.

Distant
vum.

Glour
vum.

Rt eye

lf eye

N/B

N/B

6/6

6/6

(N)

(N)

Follow up date :


Doctor Signature

Apollo Clinic
23, 1st Floor,
Kalidasa Road, Mysore - 02
Ph : 0821-406040/41

Date : 13-01-2024
MR NO : CMYS.0000059228

Department : GENERAL
Doctor :

Name : Mrs. NEETHU K M

Registration No :
Qualification :

Age/ Gender : 33 Y / Female

Consultation Timing: 08:58

Height : 158	Weight : 54.3	BMI :	Waist Circum :
Temp :	Pulse :	Resp :	B.P : 90/70

General Examination /
Allergies History
HT - renal stones +

Clinical Diagnosis & Management Plan

MI - 8 1/2 yrs

Bili -
5 - 7 yrs.
FTND.

HT - OS.

HT regular menses
LMP - 10 days back.

uterus & ovaries @. O/E - breasts - NAD.

Scan - left renal calculus

↓
uric acid optimum

Adv: regular walk.
Plenty of fluids.
avoid junk foods.

Follow up date :

Dr. S.
Doctor Signature

2024

Apollo Clinic
23, 1st Floor,
Kalidasa Road : Mysore - 02
Ph : 0821-4006040/41

Date : 13-01-2024
MR NO : CMYS.0000059228

Department : GENERAL Dietetics
Doctor : Madhura. B.P

Name : Mrs. NEETHU K M
Age/ Gender : 33 Y / Female

Registration No :
Qualification : M.Sc Nutrition & Dietetics
PhD⁺

Consultation Timing: 08:58

Height : 1.58	Weight : 54.3	BMI : 21.60	Waist Circum : 100
Temp :	Pulse :	Resp : 16	B.P : 90/70

General Examination /
Allergies History

Triglycerides - 500
HDL - 52
VLDL - 60.01

Clinical Diagnosis & Management Plan

- Advised low fat diet with fiber rich foods.
- Regular exercise is important.
- Advised for physiotherapy.
- ~~chem~~

Follow up date :

Doctor Signature - P.P
13/01/2024
Apollo Clinic
23, 1st Floor,
Kalidasa Road, Mysore - 02
Ph : 0821-4006040/41

Date : 13-01-2024
MR NO : CMYS.0000059228

Department : GENERAL
Doctor :

Name : Mrs. NEETHU K M

Registration No : Dr Praan Kumar R
Qualification : M.D. (ENT)

Age/ Gender : 33 Y / Female

Consultation Timing: 08:58

Height : 158	Weight : 54.3	BMI :	Waist Circum :
Temp :	Pulse :	Resp :	B.P : 90/70

General Examination /
Allergies History

Clinical Diagnosis & Management Plan

Come for nasal issues

Eos bilateral PM - nasal

rhinorrhoea - nasal mucus @

nasal cavity & antrum. @

nasal @

As

nasal

Follow up date :

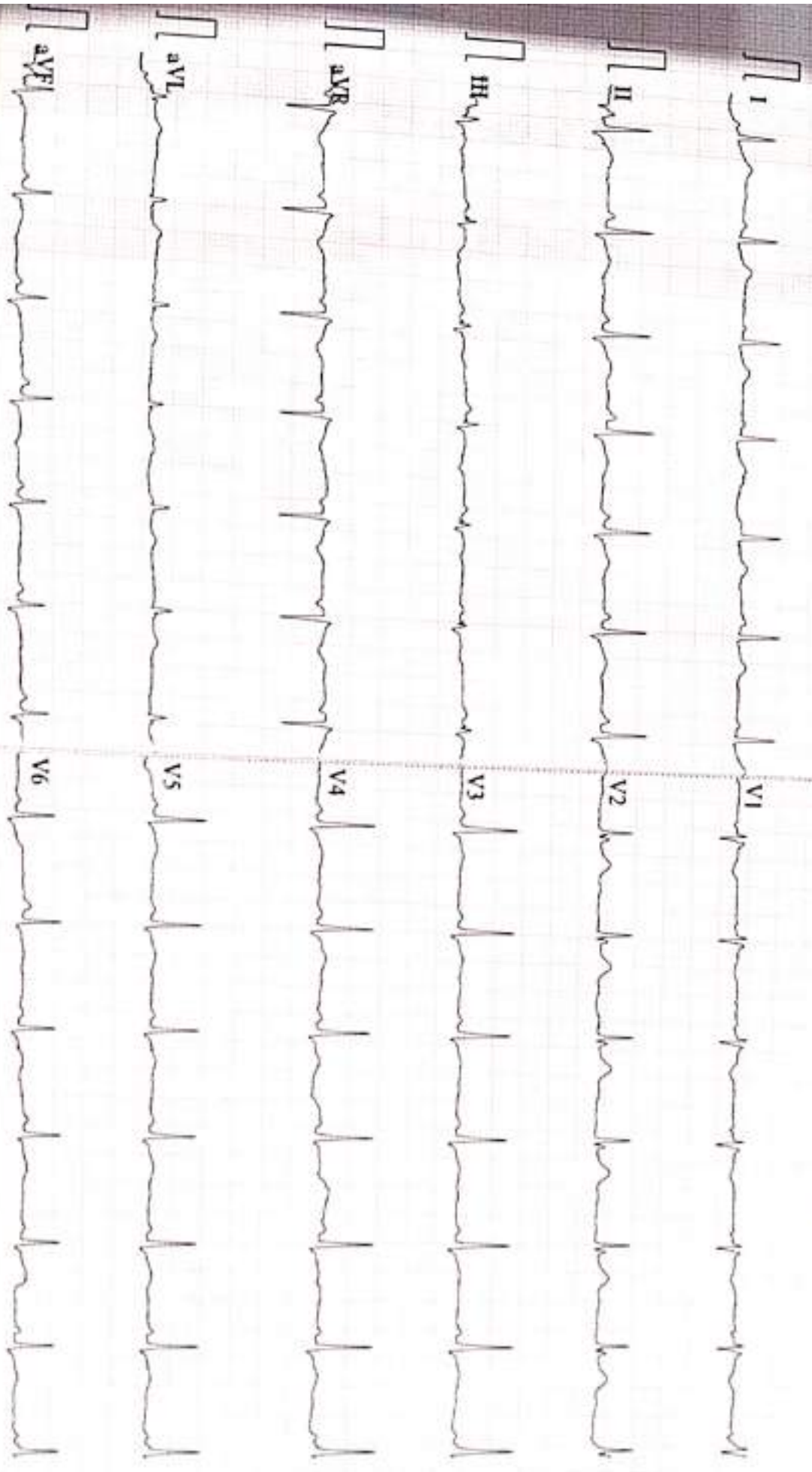
Doctor Signature
Apollo Clinic
23, 1st Floor,
Kalidasa Road, Mysore - 02
Ph : 0821-4008040/41

ID: 59228
MRS NEETHU K M
Male 33Years
158cm 54kg 90/70 mmHg

Diagnosis Information:

Unconfirmed Report.

Apollo Clinic
23, 1st Floor,
Kallidasa Road, Mysore - 02
Ph : 0821-4006040/41



25mm/s 10mm/mV 2*5.0s 81 CARDIART

D V1.43 Glasgow V28.60 APOLLO CLINIC MYSURU

Patient Name: Mrs. Neethu K M	Date : 13.01.2024	Referring Doctor: Dr .Self
Age / Sex: 33Yrs/Female	UHID NO: 59228	Location : OP
ULTRASONOGRAPHY- ABDOMEN & PELVIS		

LIVER: It is normal in size and echotexture. No focal lesions seen. IHBR are not dilated. CBD and Portal vein are normal.

GALL BLADDER: It is well distended and normal. No calculi seen.

SPLEEN: It is normal in size, outline and echopattern. No e/o focal lesions.

PANCREAS: It is normal.

RIGHT KIDNEY: It measures 98x38 mm with parenchymal thickness of 15 mm. It is normal in size, outline and echotexture. No e/o calculus or hydronephrosis seen.

LEFT KIDNEY: It measures 97x42 mm with parenchymal thickness of 13 mm. It is normal in size, outline and echotexture. **Calculus measuring 4 mm seen in midpole**

URINARY BLADDER: It is well distended. The UB wall is normal. No calculi seen.

UTERUS: It is anteverted and measures 74x33x49 mm with ET= 7mm. It is normal in size, outline and echotexture. No mass lesion.

Rt. OVARY: It measures 27x26 mm. It is normal. No mass lesion seen.

Lt. OVARY: It measures 30x27 mm. It is normal. No mass lesion seen.

RIF: No evidence of focal collection or mass lesion seen. Appendix is not visualized.

OTHERS: No e/o free fluid in the abdomen. No e/o lymphadenopathy. No e/o gut wall thickening. No mass lesion seen in the abdomen.

IMPRESSION: LEFT RENAL CALCULUS.

Pradeep
Dr. Pradeep Kumar C N, DNB
Consultant Radiologist.

Patient's Name : Mrs. Neethu K M	Age & Sex; 31Yrs /Female
Date : 13.01.2024	UHID No:59228

2D ECHOCARDIOGRAPHY STUDY

Impression:

- Normal chambers and valves
- No regional wall motion abnormality
- Normal left ventricular systolic function. EF 65 %
- No clots. No pericardial effusion

Findings

Left Ventricle:	No RWMA
Right Ventricle	Normal
Left Atrium	Normal
Right Atrium	Normal
Aorta	Normal
Pulmonary Artery	Normal
IAS	Intact
IVS	Intact
Valves	Normal
Pericardium	Normal
Doppler	Normal

Apollo Health and Lifestyle Limited

CIN: U65110TG2000PL115819

Regd Office: 1-10-60 E2, Ashoka Raghupathi-Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016

Ph. No: 464 404 7777 Fax No: 4604 7744 | Email ID: enquiry@apolloh.com | www.apolloh.com

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Online appointments: www.apolloclinics.com

TO BOOK AN APPOINTMENT

1860 500 7788

Patient's Name : Mrs. Neethu K M	Age & Sex; 31Yrs / Female
Date : 13.01.2024	UHD No:59228

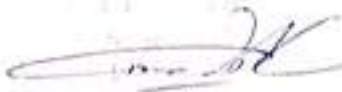
Measurements

AO : 2.2 cm
LA : 2.7 cm

RV : 2.5 cm
LVIDd : 3.49 cm
LVIDs : 2.25 cm
IVSd : 0.83 cm
IVSs : 1.27 cm
PWd : 0.89 cm
PWs : 1.11 cm
EF : 65.0 %
FS : 35.0 %

Doppler

	MV		TV		AV		PV	
E	0.77 m/s	E	---	m/s	V max	1.10 m/s	V max	0.91 m/s
A	0.38 m/s	A	---	m/s				



Dr. GURU PRASAD. B. V, MBBS, PGDCC
CONSULTANT - NON-INVASIVE CARDIOLOGY

Apollo Health and Lifestyle Limited

1E, PE, 30th Floor, 200009C, 1158191
Apollo Clinic - 1, 10, 10A, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100, 101, 102, 103, 104, 105, 106, 107, 108, 109, 110, 111, 112, 113, 114, 115, 116, 117, 118, 119, 120, 121, 122, 123, 124, 125, 126, 127, 128, 129, 130, 131, 132, 133, 134, 135, 136, 137, 138, 139, 140, 141, 142, 143, 144, 145, 146, 147, 148, 149, 150, 151, 152, 153, 154, 155, 156, 157, 158, 159, 160, 161, 162, 163, 164, 165, 166, 167, 168, 169, 170, 171, 172, 173, 174, 175, 176, 177, 178, 179, 180, 181, 182, 183, 184, 185, 186, 187, 188, 189, 190, 191, 192, 193, 194, 195, 196, 197, 198, 199, 200, 201, 202, 203, 204, 205, 206, 207, 208, 209, 210, 211, 212, 213, 214, 215, 216, 217, 218, 219, 220, 221, 222, 223, 224, 225, 226, 227, 228, 229, 230, 231, 232, 233, 234, 235, 236, 237, 238, 239, 240, 241, 242, 243, 244, 245, 246, 247, 248, 249, 250, 251, 252, 253, 254, 255, 256, 257, 258, 259, 260, 261, 262, 263, 264, 265, 266, 267, 268, 269, 270, 271, 272, 273, 274, 275, 276, 277, 278, 279, 280, 281, 282, 283, 284, 285, 286, 287, 288, 289, 290, 291, 292, 293, 294, 295, 296, 297, 298, 299, 300, 301, 302, 303, 304, 305, 306, 307, 308, 309, 310, 311, 312, 313, 314, 315, 316, 317, 318, 319, 320, 321, 322, 323, 324, 325, 326, 327, 328, 329, 330, 331, 332, 333, 334, 335, 336, 337, 338, 339, 340, 341, 342, 343, 344, 345, 346, 347, 348, 349, 350, 351, 352, 353, 354, 355, 356, 357, 358, 359, 360, 361, 362, 363, 364, 365, 366, 367, 368, 369, 370, 371, 372, 373, 374, 375, 376, 377, 378, 379, 380, 381, 382, 383, 384, 385, 386, 387, 388, 389, 390, 391, 392, 393, 394, 395, 396, 397, 398, 399, 400, 401, 402, 403, 404, 405, 406, 407, 408, 409, 410, 411, 412, 413, 414, 415, 416, 417, 418, 419, 420, 421, 422, 423, 424, 425, 426, 427, 428, 429, 430, 431, 432, 433, 434, 435, 436, 437, 438, 439, 440, 441, 442, 443, 444, 445, 446, 447, 448, 449, 450, 451, 452, 453, 454, 455, 456, 457, 458, 459, 460, 461, 462, 463, 464, 465, 466, 467, 468, 469, 470, 471, 472, 473, 474, 475, 476, 477, 478, 479, 480, 481, 482, 483, 484, 485, 486, 487, 488, 489, 490, 491, 492, 493, 494, 495, 496, 497, 498, 499, 500, 501, 502, 503, 504, 505, 506, 507, 508, 509, 510, 511, 512, 513, 514, 515, 516, 517, 518, 519, 520, 521, 522, 523, 524, 525, 526, 527, 528, 529, 530, 531, 532, 533, 534, 535, 536, 537, 538, 539, 540, 541, 542, 543, 544, 545, 546, 547, 548, 549, 550, 551, 552, 553, 554, 555, 556, 557, 558, 559, 560, 561, 562, 563, 564, 565, 566, 567, 568, 569, 570, 571, 572, 573, 574, 575, 576, 577, 578, 579, 580, 581, 582, 583, 584, 585, 586, 587, 588, 589, 590, 591, 592, 593, 594, 595, 596, 597, 598, 599, 600, 601, 602, 603, 604, 605, 606, 607, 608, 609, 610, 611, 612, 613, 614, 615, 616, 617, 618, 619, 620, 621, 622, 623, 624, 625, 626, 627, 628, 629, 630, 631, 632, 633, 634, 635, 636, 637, 638, 639, 640, 641, 642, 643, 644, 645, 646, 647, 648, 649, 650, 651, 652, 653, 654, 655, 656, 657, 658, 659, 660, 661, 662, 663, 664, 665, 666, 667, 668, 669, 670, 671, 672, 673, 674, 675, 676, 677, 678, 679, 680, 681, 682, 683, 684, 685, 686, 687, 688, 689, 690, 691, 692, 693, 694, 695, 696, 697, 698, 699, 700, 701, 702, 703, 704, 705, 706, 707, 708, 709, 710, 711, 712, 713, 714, 715, 716, 717, 718, 719, 720, 721, 722, 723, 724, 725, 726, 727, 728, 729, 730, 731, 732, 733, 734, 735, 736, 737, 738, 739, 740, 741, 742, 743, 744, 745, 746, 747, 748, 749, 750, 751, 752, 753, 754, 755, 756, 757, 758, 759, 760, 761, 762, 763, 764, 765, 766, 767, 768, 769, 770, 771, 772, 773, 774, 775, 776, 777, 778, 779, 780, 781, 782, 783, 784, 785, 786, 787, 788, 789, 790, 791, 792, 793, 794, 795, 796, 797, 798, 799, 800, 801, 802, 803, 804, 805, 806, 807, 808, 809, 810, 811, 812, 813, 814, 815, 816, 817, 818, 819, 820, 821, 822, 823, 824, 825, 826, 827, 828, 829, 830, 831, 832, 833, 834, 835, 836, 837, 838, 839, 840, 841, 842, 843, 844, 845, 846, 847, 848, 849, 850, 851, 852, 853, 854, 855, 856, 857, 858, 859, 860, 861, 862, 863, 864, 865, 866, 867, 868, 869, 870, 871, 872, 873, 874, 875, 876, 877, 878, 879, 880, 881, 882, 883, 884, 885, 886, 887, 888, 889, 890, 891, 892, 893, 894, 895, 896, 897, 898, 899, 900, 901, 902, 903, 904, 905, 906, 907, 908, 909, 910, 911, 912, 913, 914, 915, 916, 917, 918, 919, 920, 921, 922, 923, 924, 925, 926, 927, 928, 929, 930, 931, 932, 933, 934, 935, 936, 937, 938, 939, 940, 941, 942, 943, 944, 945, 946, 947, 948, 949, 950, 951, 952, 953, 954, 955, 956, 957, 958, 959, 960, 961, 962, 963, 964, 965, 966, 967, 968, 969, 970, 971, 972, 973, 974, 975, 976, 977, 978, 979, 980, 981, 982, 983, 984, 985, 986, 987, 988, 989, 990, 991, 992, 993, 994, 995, 996, 997, 998, 999, 1000

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Kumarajaya | Sarjapur Road | Mysore (SV Mahalle)
Online appointment@ www.apollohospitals.com

TO BOOK AN APPOINTMENT

1860 500 7788

Informed Consent/Declaration For Test Exclusion

Patient Name: Mrs. Nisha Age: 33yrs.

UHID Number: 59228

Please tick and sign the relevant part

I certify that I will skip Pap test Next week Test from my own.

No refund is provided for the above excluded test and I have been informed about the same.

Patient signature: Nisha Date: 13/1/24

Witness signature: [Signature] Date: 13/1/24



Patient Name : Mrs. NEETHU K M

Age/Gender : 33 Y/F

UHID/MR No. : CMYS.0000059228

OP Visit No : CMYSOPV121313

Sample Collected on :

Reported on : 17-01-2024 13:11

LRN# : RAD2207402

Specimen :

Ref Doctor : SELF

Emp/Auth/TPA ID : 225460394121

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

PATIENT SKIP THE CHEST X RAY .

Patient Name : Mrs. NEETHU K M

Age/Gender : 33 Y/F

UHID/MR No. : CMYS.0000059228

OP Visit No : CMYSOPV121313

Sample Collected on :

Reported on : 16-01-2024 10:41

LRN# : RAD2207402

Specimen :

Ref Doctor : SELF

Emp/Auth/TPA ID : 225460394121

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

LIVER: It is normal in size and echotexture. No focal lesions seen. IHBR are not dilated. CBD and Portal vein are normal.

GALL BLADDER: It is well distended and normal. No calculi seen.

SPLEEN: It is normal in size, outline and echopattern. No e/o focal lesions.

PANCREAS: It is normal.

RIGHT KIDNEY: It measures 98x38 mm with parenchymal thickness of 15 mm. It is normal in size, outline and echotexture. No e/o calculus or hydronephrosis seen.

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URINARY BLADDER: It is well distended. The UB wall is normal. No calculi seen.

UTERUS: It is anteverted and measures 74x33x49 mm with ET= 7mm. It is normal in size, outline and echotexture. No mass lesion.

Rt. OVARY: It measures 27x26 mm. It is normal. No mass lesion seen.

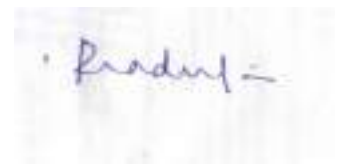
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RIF: No evidence of focal collection or mass lesion seen. Appendix is not visualized.

OTHERS: No e/o free fluid in the abdomen. No e/o lymphadenopathy. No e/o gut wall thickening. No mass lesion seen in the abdomen.

IMPRESSION: LEFT RENAL CALCULUS.

Pradeep Kumar C N, DNB
Consultant Radiologist.




Dr. PRADEEP KUMAR C N
MBBS DNB(RADIOLOGY)

Radiology

Patient Name : Mrs.NEETHU K M	Collected : 13/Jan/2024 09:04AM
Age/Gender : 33 Y 8 M 16 D/F	Received : 13/Jan/2024 11:27AM
UHID/MR No : CMYS.0000059228	Reported : 13/Jan/2024 01:36PM
Visit ID : CMYSOPV121313	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 225460394121	

DEPARTMENT OF HAEMATOLOGY

PERIPHERAL SMEAR , WHOLE BLOOD EDTA



Dr. PAVAN KUMAR M
M.B.B.S,M.D(Pathology)
Consultant Pathologist

SIN No:BED240009202



Patient Name : Mrs.NEETHU K M	Collected : 13/Jan/2024 09:04AM
Age/Gender : 33 Y 8 M 16 D/F	Received : 13/Jan/2024 11:27AM
UHID/MR No : CMYS.0000059228	Reported : 13/Jan/2024 01:36PM
Visit ID : CMYSOPV121313	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 225460394121	

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
HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	13.9	g/dL	12-15	Spectrophotometer
PCV	42.50	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.43	Million/cu.mm	3.8-4.8	Electrical Impedance
MCV	96	fL	83-101	Calculated
MCH	31.4	pg	27-32	Calculated
MCHC	32.8	g/dL	31.5-34.5	Calculated
R.D.W	11.5	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	6,200	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYtic COUNT (DLC)				
NEUTROPHILS	61.3	%	40-80	Electrical Impedance
LYMPHOCYTES	30.5	%	20-40	Electrical Impedance
EOSINOPHILS	1.9	%	1-6	Electrical Impedance
MONOCYTES	6	%	2-10	Electrical Impedance
BASOPHILS	0.3	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	3800.6	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	1891	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	117.8	Cells/cu.mm	20-500	Calculated
MONOCYTES	372	Cells/cu.mm	200-1000	Calculated
BASOPHILS	18.6	Cells/cu.mm	0-100	Calculated
PLATELET COUNT	325000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	14	mm at the end of 1 hour	0-20	Modified Westergren
PERIPHERAL SMEAR				

R.B.C: Majority are normocytic normochromic.

W.B.C: Are normal in number, morphology and distribution.



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SIN No:BED240009202



Patient Name	: Mrs.NEETHU K M	Collected	: 13/Jan/2024 09:04AM
Age/Gender	: 33 Y 8 M 16 D/F	Received	: 13/Jan/2024 11:27AM
UHID/MR No	: CMYS.0000059228	Reported	: 13/Jan/2024 01:36PM
Visit ID	: CMYSOPV121313	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 225460394121		

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Platelets: Adequate and are seen in singles and clumps.

Hemoparasites: Not seen.

IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE.



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Age/Gender : 33 Y 8 M 16 D/F	Received : 13/Jan/2024 11:27AM
UHID/MR No : CMYS.0000059228	Reported : 13/Jan/2024 03:40PM
Visit ID : CMYSOPV121313	Status : Final Report
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Test Name	Result	Unit	Bio. Ref. Range	Method
BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA				
BLOOD GROUP TYPE	A			Forward & Reverse Grouping with Slide/Tube Aggluti
Rh TYPE	POSITIVE			Forward & Reverse Grouping with Slide/Tube Agglutination



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Age/Gender : 33 Y 8 M 16 D/F	Received : 13/Jan/2024 01:25PM
UHID/MR No : CMYS.0000059228	Reported : 13/Jan/2024 02:01PM
Visit ID : CMYSOPV121313	Status : Final Report
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DEPARTMENT OF BIOCHEMISTRY

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Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, FASTING , NAF PLASMA	90	mg/dl	74-106	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)	81	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.

Test Name	Result	Unit	Bio. Ref. Range	Method
HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA				
HBA1C, GLYCATED HEMOGLOBIN	4.7	%		HPLC



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SIN No:EDT240003893



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Visit ID : CMYSOPV121313	Status : Final Report
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ESTIMATED AVERAGE GLUCOSE (eAG)	88	mg/dL	Calculated
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Comment:

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

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

Note: Dietary preparation or fasting is not required.

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



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Patient Name : Mrs.NEETHU K M	Collected : 13/Jan/2024 09:04AM
Age/Gender : 33 Y 8 M 16 D/F	Received : 13/Jan/2024 12:19PM
UHID/MR No : CMYS.0000059228	Reported : 13/Jan/2024 04:04PM
Visit ID : CMYSOPV121313	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
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DEPARTMENT OF BIOCHEMISTRY

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Test Name	Result	Unit	Bio. Ref. Range	Method
LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	146	mg/dl	0-200	CHOD
TRIGLYCERIDES	300	mg/dl	0-150	GPO, Trinder
HDL CHOLESTEROL	32	mg/dL	>40	CHE/CHO/POD
NON-HDL CHOLESTEROL	114	mg/dL	<130	Calculated
LDL CHOLESTEROL	54.33	mg/dL	<100	Calculated
VLDL CHOLESTEROL	60.01	mg/dL	<30	Calculated
CHOL / HDL RATIO	4.61		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

1. Measurements in the same patient on different days can show physiological and analytical variations.
2. NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.
3. Primary prevention algorithm now includes absolute risk estimation and lower LDL Cholesterol target levels to determine eligibility of drug therapy.
4. 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.
5. 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.
6. 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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SIN No:SE04599771



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UHID/MR No : CMYS.0000059228	Reported : 13/Jan/2024 04:04PM
Visit ID : CMYSOPV121313	Status : Final Report
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DEPARTMENT OF BIOCHEMISTRY

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



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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.60	mg/dl	0-1.2	NBD
BILIRUBIN CONJUGATED (DIRECT)	0.15	mg/dl	0-0.2	Diazotized sulfanilic acid
BILIRUBIN (INDIRECT)	0.45	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	14	U/l	0-45	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	18.0	U/l	0-31	IFCC
ALKALINE PHOSPHATASE	70.00	U/l	42-98	IFCC (AMP buffer)
PROTEIN, TOTAL	7.70	g/dl	6.4-8.3	Biuret
ALBUMIN	4.40	g/dl	3.5-5.2	Bromcresol Green
GLOBULIN	3.30	g/dL	2.0-3.5	Calculated
A/G RATIO	1.33		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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- Albumin- Liver disease reduces albumin levels.
- Correlation with PT (Prothrombin Time) helps.



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SIN No:SE04599771



Patient Name : Mrs.NEETHU K M	Collected : 13/Jan/2024 09:04AM
Age/Gender : 33 Y 8 M 16 D/F	Received : 13/Jan/2024 11:43AM
UHID/MR No : CMYS.0000059228	Reported : 13/Jan/2024 01:43PM
Visit ID : CMYSOPV121313	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 225460394121	

DEPARTMENT OF IMMUNOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM				
TRI-IODOTHYRONINE (T3, TOTAL)	1.03	ng/mL	0.64-1.52	CMIA
THYROXINE (T4, TOTAL)	7.77	µg/dL	4.87-11.72	CMIA
THYROID STIMULATING HORMONE (TSH)	1.740	µIU/mL	0.35-4.94	CMIA

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



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Age/Gender : 33 Y 8 M 16 D/F	Received : 13/Jan/2024 11:43AM
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DEPARTMENT OF IMMUNOLOGY

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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. Range	Method
COMPLETE URINE EXAMINATION (CUE) , URINE				
PHYSICAL EXAMINATION				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pH	5.0		5-7.5	Bromothymol Blue
SP. GRAVITY	1.010		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	3 - 4	/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



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