

Name : Mrs. Binita Murati

Age: 47 Y

Sex: F

Address: Bangaiore

Plan

: ARCOFEMI MEDIWHEEL FEMALE AHC CREDIT PAN

INDIA OF AGREEMENT

UHID:CINR.0000162569

OP Number:CFNROPV218565

Bill No :CINR-OCR-93753 Date : 10.02.2024 08:34

Sno	Scrive Type/ServiceName	Department
1	ARCOFEMI - MEDIWHBEL - FULL BODY ANNUAL PLUS CHECK ADVANCED	- FEMALE - 2D ECHO - PAN INDIA - FY2324
1	GAMMA GLUTAMYL TRANFERASE (GGT)	
2	2 D ECHO 2 /37 2 1/202 CO 1/3 TO 1/202	
3	LIVER FUNCTION TEST (LFT)	
. 4	GLUCOSE, FASTING	
5	HEMOGRAM - PERIPHERAL SMEAR	
6	GYNAECOLOGY CONSULTATION	
7	DIET CONSULTATION	
8	COMPLETE URINE EXAMINATION	
	URINE GLUCOSE(POST PRANDIAL)	
	PERIPHERAL SMBAR	
	BCG - D	
	LBC PAP TEST- PAPSURE	
	RENAL PROFILE/RENAL PUNCTION TEST (RFT/KFT)	
	DENTAL CONSULTATION	-
تلير	GEOCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL)	
- 16	URING GLUCOSE(FASTING)	
17	SONO MAMOGRAPHY - SCREENING	
18	UbA (c, GLYCATED HEMOGLOBIN	
19	K-RAY CHEST PA	
20	ENT CONSULTATION	
2i	FIENESS BY GENERAL PHYSICIAN	
22	BLOOD GROUP ABO AND RH FACTOR	
23	EIPID PROFILE	
24	BODY MASS INDEX (BMI)	
25	OPTUAL BY GENERAL PHYSICIAN 5	
26	ULTRASOUND - WHOLE ABDOMEN	- 121-
2.7	THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)	***************************************

Ando -5

wellow -o

12.18 TALS

10-02-2024

MR NO

CINR.0000162569

Department

: GENERAL

Doctor

Dr Praikans

Name

Mrs. Binita Murari

Registration No.

The Swigton

Age/ Gender

47 Y / Female Qualification

Consultation Timing:

08:33

Height: 154 へん Wolght: 6 Vr 6 Waist Circum : $\Re \zeta \sim \zeta$ وا کاآ' ؛ Puise Resp : 19 են Temp : 🖳 ሂርር

General Examination / Allergles

History

Clinical Diagnosis & Management Plan

Ble rest (1) NORTH (1)

Throat - (15)

No de No lymphadenopathy

Inp Christy in nose thout extends within mornel bout

DI PRATHIMA COMCESSACI

Reg No. 99241

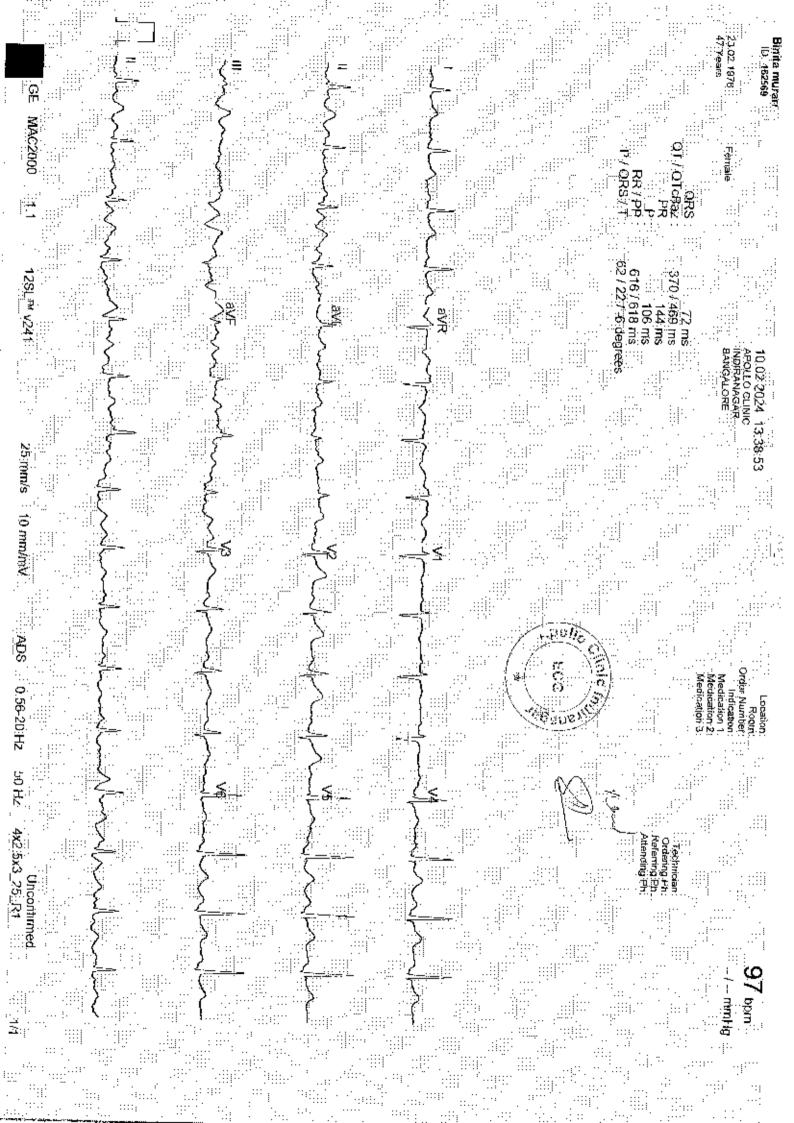
Follow up date:

Doctor Signature

ΒΟΌΚ ΥΌΣΗ ΑΡΡΟΙΝΤΜΕΝ ΤΟ ΓΟΡΑΥΣ Whatsapp Number : 970 100 3333

Toll Number Website

: 1860 500 7788 : www.apośloclinic.com







NAME: MRS BINITA	A MURARI	AGE/SEX	: 47Y/F	OP NU	 MBER: 16256	 9
Ref By : SELF		DATE: 1	0-02-2024	! .		
M mode and dop	oler measi	uramente.		•		
cM	. !	CM	M/sec			
AO: 2.7	iVS(D)		MV: E Vel: 0.9	<u>.</u>	A Vel : 0.7	
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Descriptive finding	; ;s:				··· -··· .	. 1
Left Ventricle		·· ·· .	Normal		- ·	
Right Ventricle:		· ·	Normal			···
Left Atrium:			Normal			:
Right Atrium: Mitral Valve:			Normal			
Aortic Valve:			Normal			
Tricuspid Valve:			Normal Normal			!
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IVS:		· <u></u>	j Normal			



Others



	worma	ı		
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IMPRESSION:

Normal cardiac chamber and valves

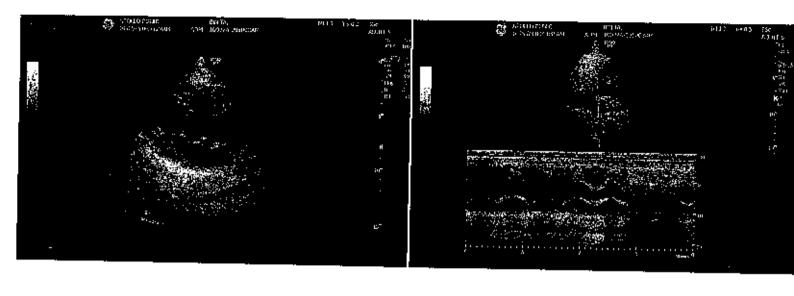
No Regional wall motion abnormality

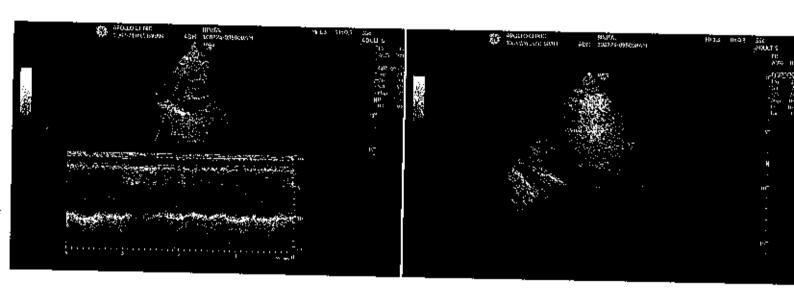
Normal PA Pressure

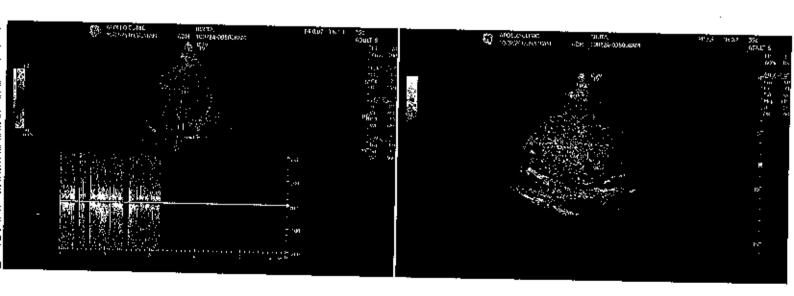
No clot/vegetation/pericardial effusion

Normal LV systolic function - LVEF= 60%

DR JAGADEESH H V MD,DM
CONSULTANT CARDIOLOGIST







OPTHAL PRESCRIPTION

PATIENT NAME ;	Binita	mauri
----------------	--------	-------

DATE: 10 12 12 L

UHID NO: 162569

AGE: 1+7-

OPTOMETRIST NAME: Ms.Swathi

GENDER: #

This is to certify that I have examined

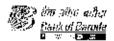
years and findings of his/her eye examination are as follows,

	RIGHT EYE					L	EFT EYE	
	SPH	CYL	AXIS	BCVA	SPH	CYL	AXIS	BCVA
Distance	150	1.75	18	116	1:25	1.75	10	6/6
Add	2 3 35			N6_	2175			- N1

Colour Vision: Colour Vision vision nonmy

Remarks: Prognessive glass

Apotto cliffic Indiranagar



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	BINITA MURARI			
DATE OF BIRTH	23-02-1976			
PROPOSED DATE OF HEALTH	10-02-2024			
CHECKUP FOR EMPLOYEE				
SPOUSE				
BOOKING REFERENCE NO.	23M167251100086292S			
	SPOUSE DETAILS			
EMPLOYEE NAME	MR. MURARI BIPIN CHANDRA			
EMPLOYEE EC NO.	167251			
EMPLOYEE DESIGNATION	SINGLE WINDOW OPERATOR A			
EMPLOYEE PLACE OF WORK	BANGALORE, SANJAYNAGAR			
EMPLOYEE BIRTHDATE	02-07-1971			

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 27-01-2024 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.

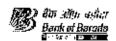
We solicit your co-operation in this regard.

Yours faithfully,

Sd/-

Chief General Manager HRM Department Bank of Baroda

(Note: This is a computer generated letter. No Signature required, For any ctarification, please contact Madiwheel (Arcofem: Healthcare Limited))



Fw: Health Check up Booking Confirmed Request(bobE6853), Package Code-PKG10000367, Beneficiary Code-248384

bipin murari <bipinmurari@rediffmail.com>

Thu 2024-02-08 12:50

To:Sanjaynagar , Berigaluru North Region < VJSNGR@bankofbaroda.com>

You don't often get email from bipinmurari@rediffmail.com. <u>Learn why this is important</u>

ल बैंक डोमेन के बाहर से आया है. अगर आप प्रेषक को नहीं जानते तो मेल में दी गयी लिंक पर क्लिक ना व HS MAIL IS ORIGINATED FROM OUTSIDE OF THE BANK'S DOMAIN, DO NOT CLICK ON LINK

From: wellness@mediwheel.in. Sent: Thu, 01 Feb 2024 17:59:59 To: bipinmurari@rediffmail.com Cc: customercare@mediwheel.in

Subject: Health Check up Booking Confirmed Request(bobE6853),Package Code-PKG10000367,

Beneficiary Code-248384

Name of

Address of

MedSave

We couldn't so its the sender of this email.

011-41195959

Dear BIPIN CHANDRA MURARI,

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

Booking Date : 28-01-2024

Hospital Package

: Mediwheel Full Body Annual Plus Above 50 Male Name

Patient Package : Mediwheel Full Body Health Checkup Male Above 40

Name

Diagnostic/Hospital : Apollo Clinic 2012,1st floor, Above vision express, Next to Starbucks, 100

Diagnostic/Hospital- feet road. HAL 2nd stage, Indiranagar - 560038







Breast Health Report Thermalytix® 180

Patient ID: CINR_162569

General Details

Name: Binita Murari Centre: Apollo Clinic Indiranagar

Age: 47 Report Generation Date: Feb 10, 2024, 4:27 PM

 Gender:
 Female
 Scan Date:
 Feb 10, 2024, 10:59 AM

Clinical Details

Age at Menopause: 43 years. Hormone Therapy: None.

Pregnant/Lactating: No. Number of children breast-fed: 2

Patient Complaints: Treatment: Uterus removed

Cancer History: No patient cancer history. No family cancer history.

Surgeries: None.

Thermalytix Scores

Body Temperature: 30.97 °C to 36.33 °C

Hotspot Score: 0.23 Hotspot Symmetry: 0 %

Areolar Score: 0.02 Areolar Symmetry: 100 %

Vascular Score: 0.14 Ensemble Score: 0.07

B Score: 2

Thermal Analysis

Thermal Parameters	Right Breast	Left Breast	
Number of Hotspots	0	1	
Extent	N/A	Hot spots seen in 2.8% of region of interest.	
Hotspot Shape	N/A	8 irregular, 5 distorted	
Temperature	N/A	1.23°C increase wrt surrounding region	
Areolar Hotspot Detected	No	No	
Lump Detected	N/A	N/A	







Breast Health Report Thermalytix® 180

Patient ID: CINR_162569

Impression

Right Breast	No focal thermal increase is seen. Multiple Warm thermal patterns are noted.
Left Breast	Focal thermal pattern is noted. Slightly distorted and highly spiculated margins are observed. Asymmetrical thermal pattern is observed.

Recommendation

Thermal patterns with low level of concern. Monthly self breast examination and annual screening with Thermalytix recommended.

Dr.H.V.RAMPRAKASH MBBS.DMRD.,MD.
Cli.Thermography (ACCT.,usa)
IMAGING SPECIALIST

Write to **support@niramai.com** for detailed report. Additional charges may apply.





Breast Health Report Thermalytix® 180

Patient ID: CINR_162569

About Niramai

Indication of Use:

Thermalytix ® is a medical device intended to be used for screening and early diagnosis of breast cancer in women above 18 years in a hospital, healthcare practitioner facilities, or in an environment where patient care is provided by healthcare personnel. It can also be used as an adjunct to screening mammography or breast ultrasound. Women who are found to be suspicious for malignancy by Thermalytix ® should be referred for a confirmatory diagnostic test. Primary diagnostic and patient management decisions are made by a qualified healthcare professional.

Intended Use:

Thermalytix ® is a medical device for the detection of breast lesions with suspected malignancy. The device is intended to assist a trained healthcare professional in risk assessment, screening, and early diagnosis of breast cancer in both asymptomatic and symptomatic women.



No Touch



No Pain



No See



No Radiation

This report has been generated using novel algorithm developed by Niramai which uses artificial intelligence for quantitative analysis of thermal images.

NIRAMAI is a health tech company with a mission to save lives by enabling early detection of breast cancer, Thermalytix* is an AI-based computer-aided diagnostic engine developed by Niramai that detects breast abnormalities in privacy aware manner.

Thermalytix* uses a high resolution thermal sensing device and an intelligent software solution for analysing thermal images for reliable, early and accurate breast cancer screening.

To know more about Thermalytix* https://www.niramai.com/about/thermalytix/



Patient Name : Mrs. Binita Murari Age/Gender : 47 Y/F

 UHID/MR No.
 : CINR.0000162569
 OP Visit No
 : CINROPV218565

 Sample Collected on
 : 10-02-2024 17:05

Ref Doctor : SELF

Emp/Auth/TPA ID : 9611547255

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

LIVER: Appears **enlarged** in size(18.0cm), shape and echopattern **mildly increased**. 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.

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.

Right kidney measuring 9.8x4.4 cm.

Left kidney measuring 10.4x4.8 cm.

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

UTERUS: Surgically removed.

OVARIES: Both ovary not seen.

No free fluid is seen.

IMPRESSION:

- 1. HEPATOMEGALY WITH GRADE I FATTY LIVER.
- 2. UTERUS SURGICALLY REMOVED.

Dr. RAMESH G
MBBS DMRD
RADIOLOGY



Patient Name : Mrs. Binita Murari Age/Gender : 47 Y/F

UHID/MR No. : CINR.0000162569

OP Visit No : CINROPV218565 Sample Collected on Reported on : 10-02-2024 19:24

LRN# : RAD2231495 Specimen

Emp/Auth/TPA ID : 9611547255

DEPARTMENT OF RADIOLOGY

SONO MAMOGRAPHY - SCREENING

THERMAL SONO MAMMOGRAPHY DONE.

: SELF

Ref Doctor

Dr. DHANALAKSHMI B MBBS, DMRD

Radiology



Patient Name : Mrs. Binita Murari Age/Gender : 47 Y/F

UHID/MR No.

: CINR.0000162569

OP Visit No

: CINROPV218565

Sample Collected on

: RAD2231495

Reported on

: 10-02-2024 16:11

Ref Doctor

LRN#

: SELF

Emp/Auth/TPA ID : 9611547255

Specimen

:

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Both lung fields and hila are normal.

No obvious active pleuro-parenchymal lesion seen.

Both costophrenic and cardiophrenic angles are clear.

Both diaphragms are normal in position and contour.

Thoracic wall and soft tissues appear normal.

CONCLUSION:

No obvious abnormality seen

Dr. DHANALAKSHMI B MBBS, DMRD

Radiology







Patient Name : Mrs.BINITA MURARI

Age/Gender : 47 Y 11 M 16 D/F

UHID/MR No : CINR.0000162569

Visit ID : CINROPV218565

Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 9611547255 Collected : 10/Feb/2024 09:04AM

Received : 10/Feb/2024 11:18AM Reported : 10/Feb/2024 12:38PM

Status : Final Report

: ARCOFEMI HEALTHCARE LIMITED Sponsor Name

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
IEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	12.1	g/dL	12-15	Spectrophotometer
PCV	36.30	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.39	Million/cu.mm	3.8-4.8	Electrical Impedence
MCV	82.6	fL	83-101	Calculated
MCH	27.5	pg	27-32	Calculated
MCHC	33.2	g/dL	31.5-34.5	Calculated
R.D.W	14.8	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	6,290	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (I	DLC)			
NEUTROPHILS	70	%	40-80	Electrical Impedance
LYMPHOCYTES	21.8	%	20-40	Electrical Impedance
EOSINOPHILS	1.6	%	1-6	Electrical Impedance
MONOCYTES	6.3	%	2-10	Electrical Impedance
BASOPHILS	0.3	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	4403	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	1371.22	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	100.64	Cells/cu.mm	20-500	Calculated
MONOCYTES	396.27	Cells/cu.mm	200-1000	Calculated
BASOPHILS	18.87	Cells/cu.mm	0-100	Calculated
PLATELET COUNT	145000	cells/cu.mm	150000-410000	Electrical impedence
ERYTHROCYTE SEDIMENTATION RATE (ESR)	52	mm at the end of 1 hour	0-20	Modified Westegren method
PERIPHERAL SMEAR				

RBCs: are normocytic normochromic

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

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

Page 1 of 14



SIN No:BED240033156

THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFSTYLE LIMITED- RRE BANGALORE

123/100/123, Doddathangur Village, Neeladri Main Road Noeladri Nagar, Electronic city, Dengalanu. Kamataka-560034









: Mrs.BINITA MURARI

Age/Gender

: 47 Y 11 M 16 D/F

UHID/MR No

: CINR.0000162569

Visit ID

: CINROPV218565

Ref Doctor

: Dr.SELF

Emp/Auth/TPA ID

: 9611547255

Collected

: 10/Feb/2024 09:04AM

Received

: 10/Feb/2024 11:18AM

Reported

: 10/Feb/2024 12:38PM

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

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

PLATELETS: appear adequate in number. Many macroplatelets are seen.

HEMOPARASITES: negative

IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE.

Kindly correlate clinically.

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

Dr Priya Murthy
M.B.B.S,M.D(Pathology)
Consultant Pathologist

SIN No:BED240033156

Page 2 of 14









: Mrs.BINITA MURARI

Age/Gender

: 47 Y 11 M 16 D/F

UHID/MR No

: CINR.0000162569

Visit ID

: CINROPV218565

Ref Doctor

: Dr.SELF

Emp/Auth/TPA ID : 9611547255

Collected

: 10/Feb/2024 09:04AM

Received

: 10/Feb/2024 11:18AM

Reported

: 10/Feb/2024 01:59PM

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	
BLOOD GROUP ABO AND RH FACTOR, WHOLE BLOOD EDTA					
BLOOD GROUP TYPE	0			Microplate Hemagglutination	
Rh TYPE	Positive			Microplate Hemagglutination	

Dr. Chinki Anupam M.B.B.S,M.D(Pathology) Consultant Pathologist Dr Priya Murthy M.B.B.S,M.D(Pathology) Consultant Pathologist Page 3 of 14



SIN No:BED240033156









Patient Name : Mrs.BINITA MURARI

Age/Gender : 47 Y 11 M 16 D/F

UHID/MR No : CINR.0000162569

Visit ID : CINROPV218565

Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 9611547255 Collected : 10/Feb/2024 09:04AM

Received : 10/Feb/2024 11:17AM Reported : 10/Feb/2024 12:19PM

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
GLUCOSE, FASTING , NAF PLASMA	139	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
- 2. 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)	236	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

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), V	VHOLE BLOOD EDTA			
HBA1C, GLYCATED HEMOGLOBIN	6.9	%		HPLC

Page 4 of 14



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

SIN No:EDT240014544

THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFSTYLE LIMITED- RRE BANGALORE

123/100/123, Doddathungur Village, Neeladri Main R edri Nagar, Electro









Patient Name : Mrs.BINITA MURARI

Age/Gender : 47 Y 11 M 16 D/F

UHID/MR No : CINR.0000162569

Visit ID : CINROPV218565

Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 9611547255 Collected : 10/Feb/2024 09:04AM

Received : 10/Feb/2024 11:17AM

Reported : 10/Feb/2024 12:19PM

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

ESTIMATED AVERAGE GLUCOSE (eAG)	151	mg/dL	Calculated

Comment:

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

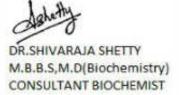
REFERENCE GROUP	HBA1C %
NON DIABETIC	<5.7
PREDIABETES	5.7 – 6.4
DIABETES	≥ 6.5
DIABETICS	
EXCELLENT CONTROL	6 – 7
FAIR TO GOOD CONTROL	7 – 8
UNSATISFACTORY CONTROL	8 - 10
POOR CONTROL	>10

Note: Dietary preparation or fasting is not required.

- 1. HbA1C is recommended by American Diabetes Association for Diagnosing Diabetes and monitoring Glycemic Control by American Diabetes Association guidelines 2023.
- 2. Trends in HbA1C values is a better indicator of Glycemic control than a single test.
- 3. 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.
- 4. 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.
- 5. 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 5 of 14





SIN No:EDT240014544









Patient Name : Mrs.BINITA MURARI

Age/Gender : 47 Y 11 M 16 D/F

UHID/MR No : CINR.0000162569

Visit ID : CINROPV218565

Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 9611547255 Collected : 10/Feb/2024 09:04AM

Received : 10/Feb/2024 11:34AM

Reported : 10/Feb/2024 12:33PM 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				
LIPID PROFILE , SERUM	LIPID PROFILE, SERUM							
TOTAL CHOLESTEROL	218	mg/dL	<200	CHO-POD				
TRIGLYCERIDES	157	mg/dL	<150	GPO-POD				
HDL CHOLESTEROL	42	mg/dL	40-60	Enzymatic Immunoinhibition				
NON-HDL CHOLESTEROL	176	mg/dL	<130	Calculated				
LDL CHOLESTEROL	144.7	mg/dL	<100	Calculated				
VLDL CHOLESTEROL	31.4	mg/dL	<30	Calculated				
CHOL / HDL RATIO	5.19		0-4.97	Calculated				

Comment:

Reference Interval as per National Cholesterol Education Program (NCEP) Adult Treatment Panel III Report.

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

SIN No:SE04624731









Patient Name : Mrs.BINITA MURARI

Age/Gender : 47 Y 11 M 16 D/F

UHID/MR No : CINR.0000162569

Visit ID : CINROPV218565

Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 9611547255 Collected : 10/Feb/2024 09:04AM

Received : 10/Feb/2024 11:34AM

: 10/Feb/2024 12:33PM Reported

: Final Report : ARCOFEMI HEALTHCARE LIMITED Sponsor Name

DEPARTMENT OF BIOCHEMISTRY

Status

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		'	1	
BILIRUBIN, TOTAL	0.62	mg/dL	0.3–1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.09	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.53	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	67	U/L	<35	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	83.0	U/L	<35	IFCC
ALKALINE PHOSPHATASE	64.00	U/L	30-120	IFCC
PROTEIN, TOTAL	7.65	g/dL	6.6-8.3	Biuret
ALBUMIN	4.42	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.23	g/dL	2.0-3.5	Calculated
A/G RATIO	1.37		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:

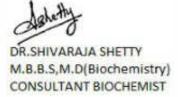
- AST Elevated levels can be seen. However, it is not specific to liver and can be raised in cardiac and skeletal injuries.
- ALT Elevated levels indicate hepatocellular damage. It is considered to be most specific lab test for hepatocellular injury. Values also correlate well with increasing BMI .• Disproportionate increase in AST, ALT compared with ALP. • Bilirubin may be elevated.
- AST: ALT (ratio) In case of hepatocellular injury AST: ALT > 1In Alcoholic Liver Disease AST: ALT usually >2. This ratio is also seen to be increased in NAFLD, Wilsons'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.

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SIN No:SE04624731

THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFSTYLE LIMITED- RRE BANGALORE

323/100/123, Doddathangur Village, Neeludri Main Road Noeladri Nagar, Electronic city, Be Kamataka-560034









Patient Name : Mrs.BINITA MURARI

Age/Gender : 47 Y 11 M 16 D/F

UHID/MR No : CINR.0000162569

Visit ID : CINROPV218565

Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 9611547255 Collected : 10/Feb/2024 09:04AM

Received : 10/Feb/2024 11:34AM Reported : 10/Feb/2024 12:33PM

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	0.62	mg/dL	0.51-0.95	Jaffe's, Method			
UREA	17.00	mg/dL	17-43	GLDH, Kinetic Assay			
BLOOD UREA NITROGEN	7.9	mg/dL	8.0 - 23.0	Calculated			
URIC ACID	5.45	mg/dL	2.6-6.0	Uricase PAP			
CALCIUM	9.80	mg/dL	8.8-10.6	Arsenazo III			
PHOSPHORUS, INORGANIC	2.87	mg/dL	2.5-4.5	Phosphomolybdate Complex			
SODIUM	136	mmol/L	136–146	ISE (Indirect)			
POTASSIUM	4.6	mmol/L	3.5–5.1	ISE (Indirect)			
CHLORIDE	105	mmol/L	101–109	ISE (Indirect)			

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

SIN No:SE04624731







: Mrs.BINITA MURARI

Age/Gender UHID/MR No : 47 Y 11 M 16 D/F : CINR.0000162569

Visit ID

: CINROPV218565

Ref Doctor

: Dr.SELF

Emp/Auth/TPA ID : 9611547255 Collected

: 10/Feb/2024 09:04AM

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: 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
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	30.00	U/L	<38	IFCC

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

SIN No:SE04624731









Patient Name : Mrs.BINITA MURARI

Age/Gender : 47 Y 11 M 16 D/F

UHID/MR No : CINR.0000162569

Visit ID : CINROPV218565

Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 9611547255 Collected : 10/Feb/2024 09:04AM

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Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF IMMUNOLOGY

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

Test Name	Test Name Result Unit			Method	
THYROID PROFILE TOTAL (T3, T4, TSH), SERUM				
TRI-IODOTHYRONINE (T3, TOTAL)	1	ng/mL	0.7-2.04	CLIA	
THYROXINE (T4, TOTAL)	9.20	μg/dL	5.48-14.28	CLIA	
THYROID STIMULATING HORMONE (TSH)	6.151	μIU/mL	0.34-5.60	CLIA	

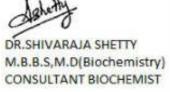
Comment:

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

- **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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SIN No:SPL24021789











: Mrs.BINITA MURARI

Age/Gender

: 47 Y 11 M 16 D/F

UHID/MR No

: CINR.0000162569

Visit ID

: CINROPV218565

Ref Doctor Emp/Auth/TPA ID : Dr.SELF : 9611547255 Collected

: 10/Feb/2024 09:04AM

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: 10/Feb/2024 11:33AM

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: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF IMMUNOLOGY

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

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

SIN No:SPL24021789









Patient Name : Mrs.BINITA MURARI

Age/Gender : 47 Y 11 M 16 D/F

UHID/MR No : CINR.0000162569

Visit ID : CINROPV218565

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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	PALE YELLOW		PALE YELLOW	Visual				
TRANSPARENCY	CLEAR		CLEAR	Visual				
рН	5.5		5-7.5	DOUBLE INDICATOR				
SP. GRAVITY	1.010		1.002-1.030	Bromothymol Blue				
BIOCHEMICAL EXAMINATION								
URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR				
GLUCOSE	NEGATIVE		NEGATIVE	GLUCOSE OXIDASE				
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING REACTION				
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	SODIUM NITRO PRUSSIDE				
UROBILINOGEN	NORMAL		NORMAL	MODIFED EHRLICH REACTION				
BLOOD	NEGATIVE		NEGATIVE	Peroxidase				
NITRITE	NEGATIVE		NEGATIVE	Diazotization				
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	LEUCOCYTE ESTERASE				
CENTRIFUGED SEDIMENT WET M	OUNT AND MICROSCOPY	1						
PUS CELLS	1-2	/hpf	0-5	Microscopy				
EPITHELIAL CELLS	2-3	/hpf	<10	MICROSCOPY				
RBC	NIL	/hpf	0-2	MICROSCOPY				
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY				
CRYSTALS	ABSENT		ABSENT	MICROSCOPY				

Dr.Shobha Emmanuel M.B.B.S,M.D(Pathology) Consultant Pathologist Dr Priya Murthy M.B.B.S,M.D(Pathology) Consultant Pathologist Page 12 of 14



SIN No:UR2279145









: Mrs.BINITA MURARI

Age/Gender

: 47 Y 11 M 16 D/F

UHID/MR No

: CINR.0000162569

Visit ID

: CINROPV218565

Ref Doctor Emp/Auth/TPA ID : Dr.SELF : 9611547255 Collected

: 10/Feb/2024 11:25AM

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: 10/Feb/2024 08:03PM

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: 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
URINE GLUCOSE(POST PRANDIAL)	POSITIVE +++		NEGATIVE	Dipstick

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

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SIN No:UPP016488









: Mrs.BINITA MURARI

Age/Gender

: 47 Y 11 M 16 D/F

UHID/MR No

: CINR.0000162569

Visit ID

: CINROPV218565

Ref Doctor

: Dr.SELF

Emp/Auth/TPA ID : 9611547255

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: 10/Feb/2024 09:04AM

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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
URINE GLUCOSE(FASTING)	NEGATIVE		NEGATIVE	Dipstick

*** End Of Report ***

Result/s to Follow: PERIPHERAL SMEAR

Dr.Shobha Emmanuel M.B.B.S,M.D(Pathology) Consultant Pathologist Dr Priya Murthy M.B.B.S,M.D(Pathology) Consultant Pathologist Page 14 of 14



SIN No:UF010497

