





Method

	ARCOFEMI - MEDIWHEEL - FUL	L BODY HC STARTER FEM	IALE - PAN INDIA - FY2324			
	DEPARTMENT OF HAEMATOLOGY					
Emp/Auth/TPA ID	: UBOI1371					
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED			
Visit ID	: CKOROPV368642	Status	: Final Report			
UHID/MR No	: CKOR.0000242434	Reported	: 24/Jun/2023 02:54PM			
Age/Gender	: 55 Y 9 M 4 D/F	Received	: 24/Jun/2023 12:12PM			
Patient Name	: Mrs.NIRMALA DINAKAR	Collected	: 24/Jun/2023 08:03AM			

Test Name	Result	Unit	Bio. Ref. Range	

HAEMOGLOBIN	11.6	g/dL	12-15	Spectrophotometer
PCV	34.40	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.1	Million/cu.mm	3.8-4.8	Electrical Impedence
MCV	83.9	fL	83-101	Calculated
MCH	28.4	pg	27-32	Calculated
MCHC	33.8	g/dL	31.5-34.5	Calculated
R.D.W	15.2	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	6,950	cells/cu.mm	4000-10000	Electrical Impedanc
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)			
NEUTROPHILS	54.2	%	40-80	Electrical Impedance
LYMPHOCYTES	37.2	%	20-40	Electrical Impedance
EOSINOPHILS	2	%	1-6	Electrical Impedance
MONOCYTES	6.1	%	2-10	Electrical Impedance
BASOPHILS	0.5	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	3766.9	Cells/cu.mm	2000-7000	Electrical Impedance
LYMPHOCYTES	2585.4	Cells/cu.mm	1000-3000	Electrical Impedance
EOSINOPHILS	139	Cells/cu.mm	20-500	Electrical Impedance
MONOCYTES	423.95	Cells/cu.mm	200-1000	Electrical Impedance
BASOPHILS	34.75	Cells/cu.mm	0-100	Electrical Impedance
PLATELET COUNT	272000	cells/cu.mm	150000-410000	Electrical impedence
ERYTHROCYTE SEDIMENTATION RATE (ESR)	66	mm at the end of 1 hour	0-20	Modified Westegrer method

RBCs: are normocytic hypochromic

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

PLATELETS: appear adequate in number.

HEMOPARASITES: negative

IMPRESSION: NORMOCYTIC HYPOCHROMIC ANEMIA

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Address: The Apollo Medical Centre,51, Jyoti Nivas College Road, 5th Block, Koramangala, Bengaluru, Karnataka, India - 560095









5	: 55 Y 9 M 4 D/F		Received		
UHID/MR No :	01/00 0000040404		Received	: 24/Jun/2023 12:12PM	
	CKOR.0000242434		Reported	: 24/Jun/2023 02:54PM	
Visit ID :	CKOROPV368642		Status	: Final Report	
Ref Doctor :	Dr.SELF		Sponsor Name	: ARCOFEMI HEALTHCARI	ELIMITED
Emp/Auth/TPA ID :	: UBOI1371				
A		EPARTMENT OF		Y ALE - PAN INDIA - FY232	24
Test	t Name	Result	Unit	Bio. Ref. Range	Method

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SIN No:BED230144689

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Т	est Name	Result	Unit	Bio. Ref. Range	Method	
	ARCOFEMI - MEDIWHEI	EL - FULL BODY HO	STARTER FEM	IALE - PAN INDIA - FY232	24	
DEPARTMENT OF HAEMATOLOGY						
Emp/Auth/TPA ID	: UBOI1371					
Ref Doctor	: Dr.SELF		Sponsor Name	: ARCOFEMI HEALTHCAR	E LIMITED	
Visit ID	: CKOROPV368642		Status	: Final Report		
UHID/MR No	: CKOR.0000242434		Reported	: 24/Jun/2023 10:25PM		
Age/Gender	: 55 Y 9 M 4 D/F		Received	: 24/Jun/2023 12:12PM		
Patient Name	: Mrs.NIRMALA DINAKAR		Collected	: 24/Jun/2023 08:03AM		

BLOOD GROUP ABO AND RH FACTOR, WHOLE BLOOD-EDTA

BLOOD GROUP TYPE	A	Microplate Hemagglutination]
Rh TYPE	Positive	Microplate	1
		Hemagglutination	

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Patient Name	: Mrs.NIRMALA DINAKAR		Collected	: 24/Jun/2023 08:03AM	
Age/Gender	: 55 Y 9 M 4 D/F		Received	: 24/Jun/2023 12:25PM	
UHID/MR No	: CKOR.0000242434		Reported	: 24/Jun/2023 02:37PM	
Visit ID	: CKOROPV368642		Status	: Final Report	
Ref Doctor	: Dr.SELF		Sponsor Name	: ARCOFEMI HEALTHC	ARE LIMITED
Emp/Auth/TPA ID	: UBOI1371				
	ſ	DEPARTMENT OF	BIOCHEMISTR	Y	
	ARCOFEMI - MEDIWHEEL	- FULL BODY HO	STARTER FEM	IALE - PAN INDIA - FY	2324
Т	est Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, FAST	ING , NAF PLASMA	141	mg/dL	70-100	HEXOKINASE
Commente					
Comment:					
Comment: As per America	n Diabetes Guidelines				
As per America	nn Diabetes Guidelines e Values in mg/d L	Interpretation	1		
As per America		Interpretatior Normal	1		
As per America Fasting Glucos		-	1		

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SIN No:PLF01989453

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	DEPA	RTMENT OF BIOCHEMISTR	Y
Emp/Auth/TPA ID	: UBOI1371		
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Visit ID	: CKOROPV368642	Status	: Final Report
UHID/MR No	: CKOR.0000242434	Reported	: 25/Jun/2023 02:20AM
Age/Gender	: 55 Y 9 M 4 D/F	Received	: 24/Jun/2023 12:26PM
Patient Name	: Mrs.NIRMALA DINAKAR	Collected	: 24/Jun/2023 08:03AM

ABOOFFINE MEDINALEEL FULL BODY LO OTABTED FEMALE BANKINDIA EVOLO		
ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324	ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324	

Test Name	Result	Unit	Bio. Ref. Range	Method

HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD-EDTA	6.6	%	HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD-EDTA	143	mg/dL	Calculated

Comment:

Reference Range as per American Diabetes Association (ADA):

REFERENCE GROUP	HBA1C IN %
NON DIABETIC ADULTS >18 YEARS	<5.7
AT RISK (PREDIABETES)	5.7-6.4
DIAGNOSING DIABETES	\geq 6.5
DIABETICS	
· EXCELLENT CONTROL	6-7
· FAIR TO GOOD CONTROL	7 - 8
· UNSATISFACTORY CONTROL	8-10
· POOR CONTROL	>10

Note: Dietary preparation or fasting is not required.

- 1. A1C test should be performed at least two times a year in patients who are meeting treatment goals (and who have stable glycemic control).
- 2. Lowering A1C to below or around 7% has been shown to reduce microvascular and neuropathic complications of type 1 and type 2 diabetes. When mean annual HbA1c is <1.1 times ULN (upper limit of normal), renal and retinal complications are rare, but complications occur in >70% of cases when HbA1c is >1.7 times ULN.
- 3. Falsely low HbA1c (below 4%) may be observed in patients with clinical conditions that shorten erythrocyte life span or decrease mean erythrocyte age. HbA1c may not accurately reflect glycemic control when clinical conditions that affect erythrocyte survival are present. Fructosamine may be used as an alternate measurement of glycemic control









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Visit ID	: CKOROPV368642	Status	: Final Report		
UHID/MR No	: CKOR.0000242434	Reported	: 24/Jun/2023 03:08PM		
Age/Gender	: 55 Y 9 M 4 D/F	Received	: 24/Jun/2023 12:05PM		
Patient Name	: Mrs.NIRMALA DINAKAR	Collected	: 24/Jun/2023 08:03AM		

ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324					
Test Name	Result	Unit	Bio. Ref. Range	Method	

LIPID PROFILE, SERUM TOTAL CHOLESTEROL 219 <200 CHO-POD mg/dL TRIGLYCERIDES GPO-POD 180 mg/dL <150 HDL CHOLESTEROL 45 mg/dL 40-60 Enzymatic Immunoinhibition NON-HDL CHOLESTEROL 174 mg/dL <130 Calculated LDL CHOLESTEROL 137.7 mg/dL <100 Calculated VLDL CHOLESTEROL <30 36 mg/dL Calculated CHOL / HDL RATIO 4.86 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	\geq 240	
TRIGLYCERIDES	<150	150 - 199	200 - 499	\geq 500
LDL	Optimal < 100 Near Optimal 100-129	130 - 159	160 - 189	≥ 190
HDL	\geq 60			
NON-HDL CHOLESTEROL	Optimal <130; Above Optimal 130-159	160-189	190-219	>220

Measurements in the same patient can show physiological and analytical variations. NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.



SIN No:SE04403855

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DEPARTMENT OF BIOCHEMISTRY ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324					
Emp/Auth/TPA ID	: UBOI1371				
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Age/Gender	: 55 Y 9 M 4 D/F	Received	: 24/Jun/2023 12:05PM		
Patient Name	: Mrs.NIRMALA DINAKAR	Collected	: 24/Jun/2023 08:03AM		

Test Name	Result	Unit	Bio. Ref. Range	Method

LIVER FUNCTION TEST (LFT), SERUM				
BILIRUBIN, TOTAL	0.66	mg/dL	0.3–1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.09	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.57	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	15	U/L	<35	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	15.0	U/L	<35	IFCC
ALKALINE PHOSPHATASE	68.00	U/L	30-120	IFCC
PROTEIN, TOTAL	6.86	g/dL	6.6-8.3	Biuret
ALBUMIN	3.70	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.16	g/dĹ	2.0-3.5	Calculated
A/G RATIO	1.17		0.9-2.0	Calculated

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Т	est Name	Result	Unit	Bio. Ref. Range	Method
	ARCOFEMI - MEDIWHEI	EL - FULL BODY HC	STARTER FEM	IALE - PAN INDIA - FY2	324
		DEPARTMENT OF	BIOCHEMISTR	Y	
Emp/Auth/TPA ID	: UBOI1371				
Ref Doctor	: Dr.SELF		Sponsor Name	: ARCOFEMI HEALTHCA	RE LIMITED
Visit ID	: CKOROPV368642		Status	: Final Report	
UHID/MR No	: CKOR.0000242434		Reported	: 24/Jun/2023 03:08PM	
Age/Gender	: 55 Y 9 M 4 D/F		Received	: 24/Jun/2023 12:05PM	
Patient Name	: Mrs.NIRMALA DINAKAR		Collected	: 24/Jun/2023 08:03AM	

RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT), SERUM						
CREATININE	0.73	mg/dL	0.72 – 1.18	JAFFE METHOD		
UREA	24.70	mg/dL	17-43	GLDH, Kinetic Assay		
BLOOD UREA NITROGEN	11.5	mg/dL	8.0 - 23.0	Calculated		
URIC ACID	5.23	mg/dL	2.6-6.0	Uricase PAP		
CALCIUM	9.10	mg/dL	8.8-10.6	Arsenazo III		
PHOSPHORUS, INORGANIC	4.48	mg/dL	2.5-4.5	Phosphomolybdate Complex		
SODIUM	139	mmol/L	136–146	ISE (Indirect)		
POTASSIUM	4.4	mmol/L	3.5–5.1	ISE (Indirect)		
CHLORIDE	105	mmol/L	101–109	ISE (Indirect)		

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Patient Name			Collected	: 24/Jun/2023 08:03AM	
Age/Gender	: 55 Y 9 M 4 D/F		Received	: 24/Jun/2023 12:05PN	1
UHID/MR No	: CKOR.0000242434		Reported	: 24/Jun/2023 03:08PN	1
Visit ID	: CKOROPV368642		Status	: Final Report	
Ref Doctor	: Dr.SELF		Sponsor Name	: ARCOFEMI HEALTHO	CARE LIMITED
Emp/Auth/TPA ID	: UBOI1371				
		DEPARTMENT OF	BIOCHEMISTR	Y	
	ARCOFEMI - MEDIWHEE	EL - FULL BODY HO	C STARTER FEM	IALE - PAN INDIA - FY	/2324
Т	est Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAN	IYL TRANSPEPTIDASE	15.00	U/L	<38	IFCC

(GGT), SERUM

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1860 500

7788

SIN No:SE04403855

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Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED			
Visit ID	: CKOROPV368642	Status	: Final Report			
UHID/MR No	: CKOR.0000242434	Reported	: 24/Jun/2023 03:34PM			
Age/Gender	: 55 Y 9 M 4 D/F	Received	: 24/Jun/2023 12:45PM			
Patient Name	: Mrs.NIRMALA DINAKAR	Collected	: 24/Jun/2023 08:03AM			

ARGOLEMI - MEDIWITELE - TOLE BODT TIG STARTERT EMALE - PAR INDIA - 172324					
Test Name	Result	Unit	Bio. Ref. Range	Method	

THYROID PROFILE TOTAL (T3, T4, TSH), SERUM

	TRI-IODOTHYRONINE (T3, TOTAL)	0.73	ng/mL	0.7-2.04	CLIA	
	THYROXINE (T4, TOTAL)	11.73	µg/dL	6.09-12.23	CLIA	
	THYROID STIMULATING HORMONE (TSH)	3.331	µIU/mL	0.34-5.60	CLIA	

Comment:

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

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

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

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SIN No:SPL23091021

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	DEPARTMENT OF CLINICAL PATHOLOGY				
Emp/Auth/TPA ID	: UBOI1371				
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED		
Visit ID	: CKOROPV368642	Status	: Final Report		
UHID/MR No	: CKOR.0000242434	Reported	: 24/Jun/2023 01:31PM		
Age/Gender	: 55 Y 9 M 4 D/F	Received	: 24/Jun/2023 12:40PM		
Patient Name	: Mrs.NIRMALA DINAKAR	Collected	: 24/Jun/2023 08:03AM		

ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324					
Test Name	Result	Unit	Bio. Ref. Range	Method	

COMPLETE URINE EXAMINATION (C	UE), URINE			
PHYSICAL EXAMINATION				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
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
GLUCOSE	NEGATIVE		NEGATIVE	GLUCOSE OXIDASE
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING REACTION
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	SODIUM NITRO PRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	MODIFED EHRLICH REACTION
BLOOD	NEGATIVE		NEGATIVE	Peroxidase
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	LEUCOCYTE ESTERASE
CENTRIFUGED SEDIMENT WET MO	UNT AND MICROSCOPY			
PUS CELLS	2-3	/hpf	0-5	Microscopy
EPITHELIAL CELLS	3-4	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY

*** End Of Report ***

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

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	ARCOFEMI - MEDIWHEI	EL - FULL BODY HC	STARTER FEM	IALE - PAN INDIA - FY2	324
	DI	EPARTMENT OF CLI	NICAL PATHOL	.OGY	
Emp/Auth/TPA ID	: UBOI1371				
Ref Doctor	: Dr.SELF		Sponsor Name	e : ARCOFEMI HEALTHCARE LIMITED	
Visit ID	: CKOROPV368642		Status	: Final Report	
UHID/MR No	: CKOR.0000242434		Reported	: 24/Jun/2023 01:31PM	
Age/Gender	: 55 Y 9 M 4 D/F		Received	: 24/Jun/2023 12:40PM	
Patient Name	: Mrs.NIRMALA DINAKAR		Collected	: 24/Jun/2023 08:03AM	

and Dr. Prasanna

M.B.B.S, M.D **Consultant Pathologist**

APOI Dr.Anita Shobha Flynn

M.B.B.S MD(Pathology) **Consultant Pathologist**

Shoot

DR.SPOORTHY GURAJALA M.B.B.S,M.D(PATHOLOGY)/DNB,DipRCPath(UK) Consultant Pathologist

DR.SHIVARAJA SHETTY M.B.B.S.M.D(Biochemistry M.B.B.S.MD(Pathology) CONSULTANT BIOCHEMIST Consultant Pathologist

Dr.Anita Shobha Flynn

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SIN No:UR2133854

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The Apollo Medical Centre, 51, Jyoti Nivas College Road, 5th Block, Koramangala, Bengaluru, Karnataka, India - 560095





	e : Mrs. Nirmala Dinakar ess : koramangala : ARCOFEMI MEDIWHEEL FEMALE AHC CREDIT PAN INDIA OP AGREEMENT	Age: 55 Y Sex: F	UHID:CKOR.0000242434	
Sno	Serive Type/ServiceName		Depar	tment
1	ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEM	ALE - PAN IND		
-1	GAMMA GLUTAMYL TRANFERASE (GGT)			
	HDA1c, GLYCATED HEMOGLOBIN			
	LIVER FUNCTION TEST (LFT)			
-4	GLUCOSE, FASTING			
	HEMOGRAM + PERIPHERAL SMEAR			
6	ENT CONSULTATION - from no 2 3	Dr. migan	rh	
	FITNESS BY GENERAL PHYSICIAN			
	GYNAECOLOGY CONSULTATION			
	DIET CONSULTATION			
	COMPLETE URINE EXAMINATION			
	PERIPHERAL SMEAR			
	ECG W W			
	BLOOD GROUP ABO AND RH FACTOR			
	LIPID PROFILE			
	BODY MASS INDEX (BMI)			
	LBC PAP TEST- PAPSURE N			
	OPTHAL BY GENERAL PHYSICIAN	no 20		
	RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFP)			
	ULTRASOUND - WHOLE ABDOMEN 24 (7)		5	5:00 PM
	THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)			
-21	DENTAL CONSULTATION			

physic Room no29

8:45 - 40:45

Ht - 163 cm tot - 70.5 kg Hip - 40 cm waist - 101 cm BP - 123/63 pulse - 76 Room NO:7





vate : 24/6/23 MRNO : Wormala Name M : Wormala Age/Gender: 55M

Department :OBSTERICS&GYNAECOLOGY Consultant :DR JYOTHI RAJESH **KMC NO-42823 Qualification** :DGO(DNB) Consultation Timings:9.30pm to12.00pm PHONE NO:9972044580

de

Height :	Weight :	BMI :	Waist Circum :
Temp ;	Pulse :	Resp :	B.P :
General Examination	on / Allergies Clinical Diagn	nosis & Management Plan <i>Management Plan</i> <i>Management Plan</i> <i>Management Plan</i> <i>Management Plan</i> <i>Management Plan</i>	sonplands - sym 20 b
	Kornid Ole PU-	Ala-soll- Co de la	solyp D por Eaters
*	t. plu.	VE Gull	Ber .
			7

Apollo Medical Centre, Koramangala

#51, Jyoti Nivas College Road, 5th Block, Koramangala - 560095 Phone: (080) 2563 3833/823 Follow us SAPOlloClinicIndia CAPolloClinics

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DR. MAHABALESHWAR.M MBBS.(MYS), MD(AIIMS DELHI)FICS D.O (JIPMER) **REG.NO:KMC:9748**

THE APOLLO MEDICAL CENTER KORAMANGALA

wirmale. Denahen NAME: AGE : TT GENDER:

OPTHALMIC REPORT

RIGHT EYE

LEFT EYE

GENERAL APPEARANCE

VISION - DISTANCE

WITHOUT GLASS

WITH GLASS

GLASS POWER

NEAR

WITHOUT GLASS

WITH GLASS

GLASS POWER

COLOUR

ANTERIOR SEGMENT:-

FUNDUS

1.O.P: DIGITAL

Pres 51 one

DOCTOR SIGNATURE

NL

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HEALTH CHECK- ENT



DR VIJAYA LAKSHMI M M.B.B.S, D.L.O, D.N.B(ENT) Phone No.9972044580,080-25633823/24/23

ollo

AGE: SSTR

NAME: Nim	ele Direkee	AGE: 55
EAR:	RE:	LE:
EXTERNAL EAR	7	
MIDDLE EAR	volanel	
INNER EAR (FN)		
HEARING ASSESSM	MENT: RE:	LE:
RHINNE	7	
WEBER	/ volmal	
ABC		
NOSE	THROAT	0
AIRWAY	ORAL CAVITY)
SEPTUM	OROPHARYNX	Nelmel
TURBINATES	vernele PHARYNX	Nerra
OTHERS	LARYNX /	
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NECK NODES)	
OTHER	voland	
AUDIOMETRY		^
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IMPRESSION	velnel	SIGNATURE:

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1.1.1



Age

: Mrs. Nirmal Dialtar



:24.06.2023

Date

Referring Doctor : H/C

ULTRASOUND ABDOMEN AND PELVIS

Liver is normal in size and shows increased echo pattern. No dilatation .No focal lesion

Portal vein is normal in size, course and caliber. CBD is not dilated.

:55Year(s)

Gall bladder partially distended

Pancreas to the extent visualized, appears normal in size, contour and echogenicity

Spleen is normal in size, shape, contour and echopattern. No evidence of mass or focal lesion.

Right kidney is normal in size, position, shape and echopattern. Corticomedullary differentiation is maintained. No evidence of calculi or hydronephrosis.

Left kidney is normal in size, position, shape and echopattern.corticomedullary differentiation is maintained. No evidence of calculi or hydronephrosis.

Retroperitoneum: obscured by bowel gas. No significant lymphadenopathy.

Urinary Bladder is well distended. wall thickness is normal. No evidence of calculi, mass or mural lesion.

Uterus: is anteverted and normal in size, measures7.0 x 4.5 x 3.2 cms.

Endometrium: appears thicken measures 16mm.

Right ovary: normal

Left ovary: not visualized.

Both adnexa: Normal, no mass seen.

There is no ascites.

A Subcutaneous lipoma noted in the left hypochondriac region measuring 9 x 5mm.

IMPRESSION:

- FATTY LIVER GRADE-I
- THINKEND ENDOMETRIUM

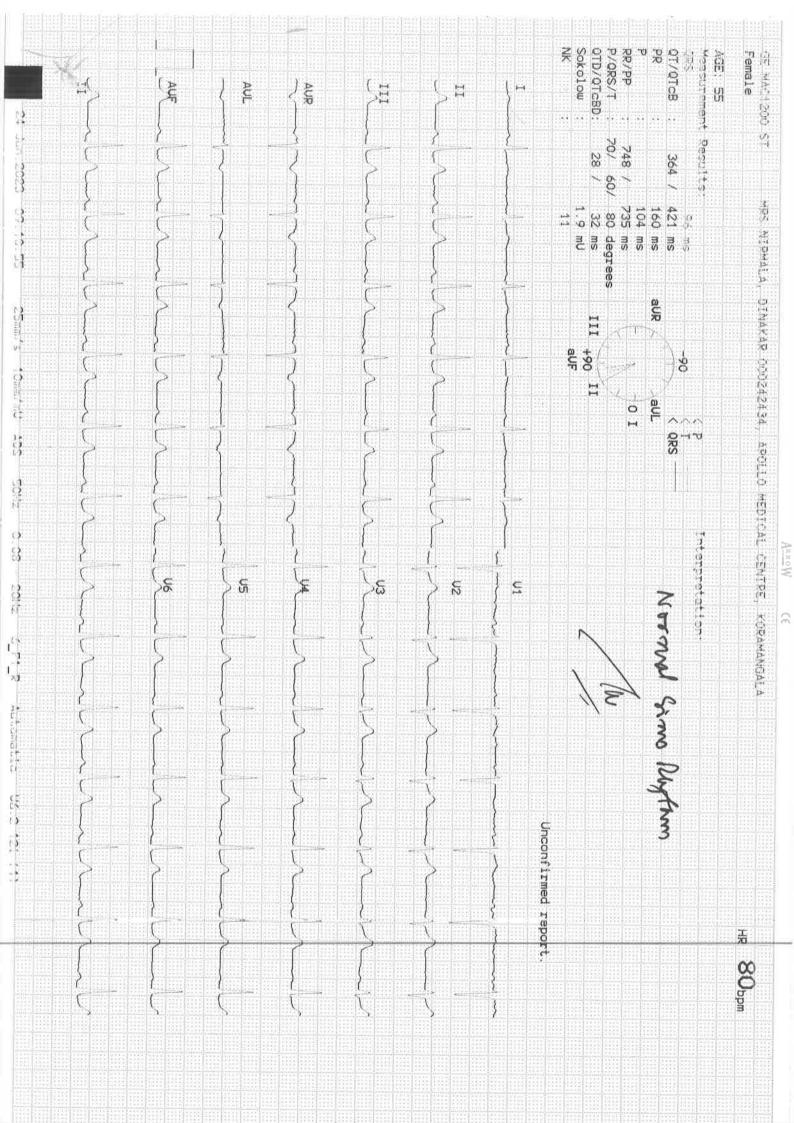
DR SAM K GEORGE RADIOLOGIST

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Patient Name UHID Reported By: Referred By Mrs. Nirmala Dinakar CKOR.0000242434 Dr. TOBY ABRAHAM THOMAS SELF Age OP Visit No Conducted Date 55 Y/F CKOROPV368642 25-06-2023 09:41

ECG REPORT

Observation :-

- 1. Normal Sinus Rhythm.
- 2. Heart rate is 80beats per minutes.
- 3. No pathological Q wave or S-T,T changes seen.
- 4. Normal P,Q,R,S,T waves and axis.
- 5. No evidence of chamber, hypertrophy or enlargement seen.

Impression:

NORMAL RESTING ECG.

ره Dr. TOBY ABRAHAM THOMAS CONSULTANT

NOTE: KINDLY TAKE A PHOTOCOPY OF THE GRAPH FOR FUTURE REFERENCE IF NEEDED.

----- END OF THE REPORT -----

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Emp/Auth/TPA ID	UB011371		
Ref Doctor	Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Visit ID	: CKOROPV368642	Status	: Final Report
UHID/MR No	: CKOR.0000242434	Reported	: 24/Jun/2023 02:54PM
Age/Gender	: 55 Y 9 M 4 D/F	Received	: 24/Jun/2023 12:12PM
Patient Name	: Mrs.NIRMALA DINAKAR	Collected	EXPORTISO, Closor IC : 24/Jun/2023 08:03AM

	DEPARIMENT OF	HAEMATOLOG	GY	
ARCOFEMI - MEDIV	VHEEL - FULL BODY HO	STARTER FE	MALE - PAN INDIA - FY23	24
Test Name	Result	Unit	Bio. Ref. Range	Method
		ARCOFEMI - MEDIWHEEL - FULL BODY HO	ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FE	ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY23 Test Name Result Unit Bio. Ref. Range

HEMOGRAM , WHOLE BLOOD-EDTA

HAEMOGLOBIN	11.6	g/dL	12-15	Spectrophotometer
PCV	34.40	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.1	Million/cu.mm	3.8-4.8	Electrical Impedence
MCV	83.9	fL	83-101	Calculated
MCH	28.4	pg	27-32	Calculated
MCHC	33.8	g/dL	31.5-34.5	Calculated
R.D.W	15.2	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	6,950	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (D	LC)			
NEUTROPHILS	54.2	%	40-80	Electrical Impedance
LYMPHOCYTES	37.2	%	20-40	Electrical Impedance
EOSINOPHILS	2	%	1-6	Electrical Impedance
MONOCYTES	6.1	%	2-10	Electrical Impedance
BASOPHILS	0.5	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				*
NEUTROPHILS	3766.9	Cells/cu.mm	2000-7000	Electrical Impedance
LYMPHOCYTES	2585.4	Cells/cu.mm	1000-3000	Electrical Impedance
EOSINOPHILS	139	Cells/cu.mm	20-500	Electrical Impedance
MONOCYTES	423.95	Cells/cu.mm	200-1000	Electrical Impedance
BASOPHILS	34.75	Cells/cu.mm	0-100	Electrical Impedance
PLATELET COUNT	272000	cells/cu.mm	150000-410000	Electrical impedence
ERYTHROCYTE SEDIMENTATION RATE (ESR)	66	mm at the end of 1 hour	0-20	Modified Westegren method
PERIPHERAL SMEAR				

RBCs: are normocytic hypochromic

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

PLATELETS: appear adequate in number.

HEMOPARASITES: negative

IMPRESSION: NORMOCYTIC HYPOCHROMIC ANEMIA

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Apollo	ALS	Central Hour	1054		lo Medico Centre	
Patient Name	: Mrs.NIRMALA DINAKAR		Collected	: 24/Jun/2023 08:03AM	adamanan ana an io 10	
Age/Gender	: 55 Y 9 M 4 D/F		Received	: 24/Jun/2023 12:12PM		
JHID/MR No	: CKOR.0000242434		Reported	: 24/Jun/2023 02:54PM		
/Isit ID	: CKOROPV368642	Status	: Final Report		: Final Report	
Ref Doctor	: Dr.SELF		Sponsor Name	: ARCOFEMI HEALTHCARE	ELIMITED	
Emp/Auth/TPA ID	: UBOI1371					
	C	EPARTMENT (OF HAEMATOLOG	Y		
	ARCOFEMI - MEDIWHEEL	- FULL BODY	HC STARTER FEM	ALE - PAN INDIA - FY232	24	
T	est Name	Result	Unit	Blo. Ref. Range	Method	
Result Rechecked						

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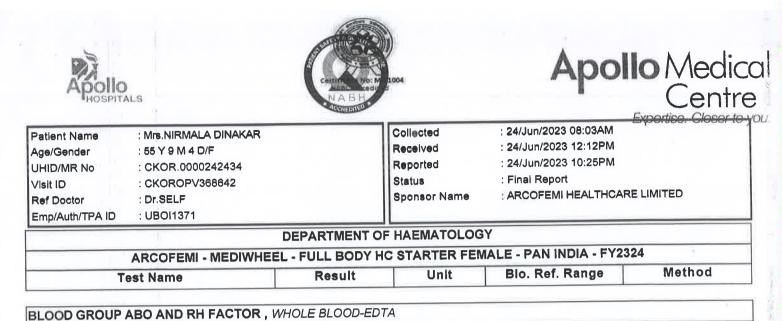
SIN No:BED230144689

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BLOOD GROUP TYPE	A ,	Microplate Hemagglutination
Rh TYPE	Positive	Microplate Hemagglutination

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1860 500

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SIN No:BED230144689

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Apollo	Carry Vo: NABH Creation	1004	Арс	ollo Medica Centre
Patient Name : Mrs.NIRMALA DINAKAR Age/Gender : 55 Y 9 M 4 D/F JHID/MR No : CKOR.0000242434 /Isit ID : CKOROPV368642 Ref Doctor : Dr.SELF Emp/Auth/TPA ID : UBOI1371		Collected Received Reported Status Sponsor Name	: 24/Jun/2023 08:03AM : 24/Jun/2023 12:25PM : 24/Jun/2023 02:37PM : Final Report : ARCOFEMI HEALTHO	
	DEPARTMENT	OF BIOCHEMISTR	Y	
ARCOFEMI - MEDIWHE	EL - FULL BODY	HC STARTER FEM	ALE - PAN INDIA - FY	/2324
Test Name	Result	Unit	Blo. Ref. Range	Method
LUCOSE, FASTING , NAF PLASMA	141	mg/dL	70-100	HEXOKINASE
Comment: As per American Diabetes Guidelines				
Fasting Glucose Values in mg/d L	Interpreta	tion		
<100 mg/dL	Normal			
100-125 mg/dL	Prediabete	es		
≥126 mg/dL	Diabetes			

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SIN No:PLF01989453

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					Expertise. Closer to
Patient Name	: Mrs.NIRMALA DINAKAR		Collected	: 24/Jun/2023 08:03AM	Dyb01100. 010001 ((
Age/Gender	: 55 Y 9 M 4 D/F		Received	: 24/Jun/2023 12:26PM	
UHID/MR No	: CKOR.0000242434		Reported	: 25/Jun/2023 02:20AM	
Visit ID	: CKOROPV368642		Status	: Final Report	
Ref Doctor	: Dr.SELF		Sponsor Name	ARCOFEMI HEALTHCAR	RELIMITED
Emp/Auth/TPA ID	: UBQI1371				
		DEPARTMENT OF	BIOCHEMISTR	Y	
	ARCOFEMI - MEDIWH	EEL - FULL BODY HO	STARTER FEM	ALE - PAN INDIA - FY23	24
	Test Name	Result	Unit	Blo. Ref. Range	Method

HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD-EDTA	6.6	%	HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD-EDTA	143	mg/dL	Calculated

Comment:

Reference Range as per American Diabetes Association (ADA):

REFERENCE GROUP	HBA1C IN %
NON DIABETIC ADULTS >18 YEARS	<5.7
AT RISK (PREDIABETES)	5.7 - 6.4
DIAGNOSING DIABETES	≥ 6.5
DIABETICS	
· EXCELLENT CONTROL	6 – 7
FAIR TO GOOD CONTROL	7 – 8
· UNSATISFACTORY CONTROL	8 - 10
POOR CONTROL	>10
POURCONTROL	-10

Note: Dietary preparation or fasting is not required.

- 1. A1C test should be performed at least two times a year in patients who are meeting treatment goals (and who have stable glycemic control).
- Lowering A1C to below or around 7% has been shown to reduce microvascular and neuropathic complications of type 1 and type 2 diabetes. When mean annual HbA1c is <1.1 times ULN (upper limit of normal), renal and retinal complications are rare, but complications occur in >70% of cases when HbA1c is >1.7 times ULN.
- 3. Falsely low HbA1c (below 4%) may be observed in patients with clinical conditions that shorten erythrocyte life span or decrease mean erythrocyte age. HbA1c may not accurately reflect glycemic control when clinical conditions that affect erythrocyte survival are present. Fructosamine may be used as an alternate measurement of glycemic control

	Page 5 of 12
SIN No:EDT230057574	直於現於 最

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Patient Name Age/Gender	: Mrs.NIRMALA DINAKAR : 55 Y 9 M 4 D/F : CKOR.0000242434	Collected Received Reported	: 24/Jun/2023 08:03AM : 24/Jun/2023 12:05PM : 24/Jun/2023 03:08PM
UHID/MR No Visit ID Ref Doctor	: CKOROPV368642 : Dr.SELF	Status Sponsor Name	: Final Report : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: UBOI1371		

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324					
est Name Result Unit		Unit	Blo. Ref. Range	Method	
, SERUM					
ESTEROL	219	mg/dL	<200	CHO-POD	
ES	180	mg/dL	<150	GPO-POD	
TEROL	45	mg/dL	40-60	Enzymatic Immunoinhibition	
DLESTEROL	174	mg/dL	<130	Calculated	
	137.7	mg/dL	<100	Calculated	
STEROL	36	mg/dL	<30	Calculated	
ATIO	4.86		0-4.97	Calculated	
	Test Name , SERUM ESTEROL ES TEROL DLESTEROL TEROL STEROL	Test NameResult, SERUMESTEROLESTEROLES180TEROL45DLESTEROL174TEROL137.7STEROL36	Test NameResultUnit, SERUMESTEROL219mg/dLES180mg/dLTEROL45mg/dLDLESTEROL174mg/dLTEROL137.7mg/dLSTEROL36mg/dL	Test Name Result Unit Bio. Ref. Range , SERUM	

Comment:

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

	Desirable	Borderline High	High	Very High
TOTAL CHOLESTEROL	< 200	200 - 239	≥ 240	
TRIGLYCERIDES	<150	150 - 199	200 - 499	≥ 500
LDL	Optimal < 100 Near Optimal 100-129	130 - 159	160 - 189	≥ 190
HDL	≥ 60			
NON-HDL CHOLESTEROL	Optimal <130; Above Optimal 130-159	160-189	190-219	>220

Measurements in the same patient can show physiological and analytical variations. NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.

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Patient Name	: Mrs.NIRMALA DINAKAR	Collected	: 24/Jun/2023 08:03AM
Age/Gender	: 55 Y 9 M 4 D/F		: 24/Jun/2023 12:05PM
UHID/MR No Visit ID Ref Doctor Emp/Auth/TPA ID	CKOR.0000242434 CKOROPV368642 Dr.SELF UBOI1371	Reported Status Sponsor Name	: 24/Jun/2023 03:08PM : Final Report : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unlt	Blo. Ref. Range	Method
IVER FUNCTION TEST (LFT), SERUM				
BILIRUBIN, TOTAL	0.66	mg/dL	0.3–1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.09	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.57	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	15	U/L	<35	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	15.0	U/L	<35	IFCC
ALKALINE PHOSPHATASE	68.00	U/L	30-120	IFCC
PROTEIN, TOTAL	6.86	g/dL	6.6-8.3	Biuret
ALBUMIN	3.70	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.16	g/dL	2.0-3.5	Calculated
A/G RATIO	1.17		0.9-2.0	Calculated

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UHID/MR No Visit ID Ref Doctor		: CKOR.0000242434 : CKOROPV368642 : Dr.SELF	Repor Status Spons		: 24/Jun/2023 03:08PM : Final Report : ARCOFEMI HEALTHCAR	E LIMITED	
Emp/Auth/TPA	D	: UBOI1371 DEF	PARTMENT OF BIO	HEMISTR	Y		
	+	ARCOFEMI - MEDIWHEEL - F	ULL BODY HC STA	RTER FEM	ALE - PAN INDIA - FY23	24	

CREATININE	0.73	mg/dL	0.72 – 1.18	JAFFE METHOD
UREA	24.70	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	11.5	mg/dL	8.0 - 23.0	Calculated
URIC ACID	5.23	mg/dL	2.6-6.0	Uricase PAP
CALCIUM	9.10	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	4.48	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	139	mmol/L	136–146	ISE (Indirect)
POTASSIUM	4.4	mmol/L	3.5-5.1	ISE (Indirect)
CHLORIDE	105	mmol/L	101-109	ISE (Indirect)

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SIN No:SE04403855

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Apol	lo PITALS	NA B H	A A	Арс	ollo Medica Centre
Patient Name Age/Gender UHID/MR No Visit ID Ref Doctor Emp/Auth/TPA ID	: Mrs.NIRMALA DINAKAR : 55 Y 9 M 4 D/F : CKOR.0000242434 : CKOROPV368642 : Dr.SELF : UBOI1371		Collected Received Reported Status Sponsor Name	: 24/Jun/2023 08:03AM : 24/Jun/2023 12:05PM : 24/Jun/2023 03:08PM : Final Report : ARCOFEMI HEALTHC/	Expenise. Closer to you ARE LIMITED
	1		OF BIOCHEMISTR		
	ARCOFEMI - MEDIWHEEL	- FULL BODY H	IC STARTER FEN	IALE - PAN INDIA - FY	2324
	Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTA	MYL TRANSPEPTIDASE	15.00	U/L	<38	IFCC

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SIN No:SE04403855

(GGT), SERUM

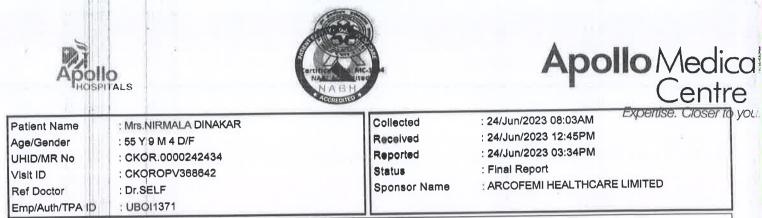
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DEPARTMENT OF IMMUNOLOGY

HEEL - FULL BODY HO	STARTER FE	MALE - PAN INDIA - FY23	24
Result	Unit	Bio. Ref. Range	Method
	1	1	HEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY23 Result Unit Bio. Ref. Range

THYROID PROFILE TOTAL (T3, T4, TSH), SERUM

TRI-IODOTHYRONINE (T3, TOTAL)	0.73	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	11.73	µg/dL	6.09-12.23	CLIA
THYROID STIMULATING HORMONE	3.331	µIU/mL	0.34-5.60	CLIA
(TSH)				

Comment:

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

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

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

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SIN No:SPL23091021

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Bangalore (Basavanagudi | Beilandur | Electronics City | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli | Koramangala | Sarjapur Road) **Mysore** (Kalidasa Road)

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Emp/Auth/TPA ID	UBOI1371		
Ref Doctor	Dr.\$ELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Visit ID	CKOROPV368642	Status	: Final Report
UHID/MR No	CKOR.0000242434	Reported	: 24/Jun/2023 01:31PM
Age/Gender	: 55 Y 9 M 4 D/F	Received	: 24/Jun/2023 12:40PM
Patient Name	: Mrs. NIRMALA DINAKAR	Collected	: 24/Jun/2023 08:03AM

	DEPARTMENT OF CL	INICAL PATHO		
RCOFEMI - MEDIV	VHEEL - FULL BODY HO	STARTER FE	MALE - PAN INDIA - FY23	24
t Name	Result	Unit	Bio. Ref. Range	Method
		RCOFEMI - MEDIWHEEL - FULL BODY HO	RCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FE	DEPARTMENT OF CLINICAL PATHOLOGY RCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY233 t Name Result Unit Bio. Ref. Range

COMPLETE URINE EXAMINATION (C PHYSICAL EXAMINATION				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
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 O
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			
PUS CELLS	2-3	/hpf	0-5	Microscopy
EPITHELIAL CELLS	3-4	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY

*** End Of Report ***

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

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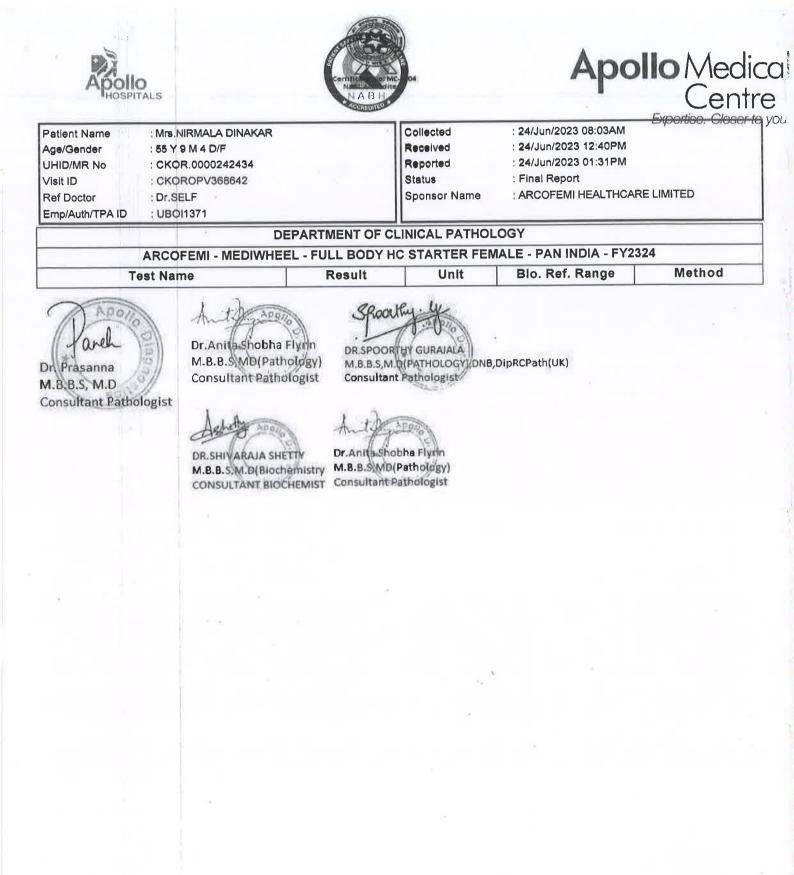
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Bangalore (Basavanagudi | Bellandur | Electronics City | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli | Koramangala | Sarjapur Road) Mysore (Kalidasa Road)

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1860 500 7788

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Bangalore (Basavanagudi | Bellandur | Electronics City | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli | Koramangala | Sarjapur Road) Mysore (Kalidasa Road)





Patient Name	: Mrs. NIRMALA DINAKAR	Collected	: 24/Jun/2023 04:35PM	LADENSE. Closer ld y
Age/Gender	: 55 Y 9 M 4 D/F	Received	: 24/Jun/2023 06:49PM	
UHID/MR No	: CKOR.0000242434	Reported	: 24/Jun/2023 07:32PM	
Visit ID	: CKOROPV368717	Status	: Final Report	
Ref Doctor	Dr.SELF			

DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS , NAF PLASMA	154	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.

Ref: Marks medical biochemistry and clinical approach

*** End Of Report ***

Dr Anith S hobha Flyn

DR.SHIVARAJA SHETT M.B.B.S.M.D(Biochemistry M.B.B.S, MD(Pathology) CONSULTANT BIOCHEMIST Consultant Pathologist

Page 1 of 1



SIN No:PLP1342673

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Dy Rh Bengaluru North [Union Bank Of India]

From:
Sent:
To:
Subject:

kumar dinakar <kumardinakar@ymail.com> Friday, June 23, 2023 7:37 PM Dy Rh Bengaluru North [Union Bank Of India] Fw: Health Check up Booking Request(UBOI1371),Package Code(PKG10000472),Beneficiary Code()

कृपया सावधानी बरतें एवं ध्यान दें: यह ई- मेल बाहर से प्राप्त हुई है. कृपया प्रेषक के ई-मेल पते को पूर्ण रूप से जाँचे (केवल प्रेषक का नाम ही नही). प्रेषक की पहचान किए बिना लिंक पर क्लिक न करें एवं संलग्न को न खोले और पहचाने की दी गई सामग्री सुरक्षित है अथवा नहीं. संदिग्ध मेल के संबंध में, कृपया antiphishing[Dot]ciso[At the rate]unionbankofindia[Dot]bank पर रिपोर्ट करें

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Sent from Yahoo Mail on Android

----- Forwarded message -----From: "Mediwheel" <wellness@mediwheel.in> To: "kumardinakar@ymail.com" <kumardinakar@ymail.com> Cc: "mediwheelwellness@gmail.com" <mediwheelwellness@gmail.com> Sent: Tue, 20 Jun 2023 at 5:47 pm Subject: Health Check up Booking Request(UBOI1371),Package Code(PKG10000472),Beneficiary Code()

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Dear K DINAKAR,

Thanks for booking the following Health Check up.

Booking Date	: 20-06-2023
Health Check up Nam	e : Union Bank Executive Health Checkup Male For Self And Spouse
Health Check Code	: PKG10000472
Name of Diagnostic/Hospital	: Apollo Medical Centre
Address of Diagnostic/Hospital-	Apollo Medical centre, Plot 51, 5th Block, Opp. Jyothi Nivas College, Koramangala - 5600095
Appointment Date	: 24-06-2023



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 \leftarrow Reply \rightarrow Forward



Patient Name	: Mrs. Nirmala Dinakar	Age/Gender	: 55 Y/F
UHID/MR No.	: CKOR.0000242434	OP Visit No	: CKOROPV368642
Sample Collected on	:	Reported on	: 24-06-2023 18:03
LRN#	: RAD2029516	Specimen	:
Ref Doctor	: SELF		
Emp/Auth/TPA ID	: UBOI1371		

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

Liver is normal in size and shows increased echo pattern. No dilatation .No focal lesion **Portal vein** is normal in size, course and caliber. CBD is not dilated. **Gall bladder** partially distended

Pancreas to the extent visualized, appears normal in size, contour and echogenicity **Spleen** is normal in size, shape, contour and echopattern. No evidence of mass or focal lesion. **Right kidney** is normal in size, position, shape and echopattern. Corticomedullary differentiation is maintained. No evidence of calculi or hydronephrosis.

Left kidney is normal in size, position, shape and echopattern.corticomedullary differentiation is maintained. No evidence of calculi or hydronephrosis.

Retroperitoneum: obscured by bowel gas. No significant lymphadenopathy.

Urinary Bladder is well distended. wall thickness is normal. No evidence of calculi, mass or mural lesion.

Uterus: is anteverted and normal in size, measures 7.0 x 4.5 x 3.2 cms. Endometrial echoes are normal Endometrium: appears thicken measures 16mm.

Endometrium: appears thicken measures form

Right ovary: normal

Left ovary: not visualized.

Both adnexa: Normal, no mass seen.

There is no ascites.

A Subcutaneous lipoma noted in the left hypochondriac region measuring 9 x 5mm.

IMPRESSION:

- FATTY LIVER GRADE-I
- THINKEND ENDOMETRIUM

DR SAM K GEORGE RADIOLOGIST

Name: Mrs. Nirmala Dinakar Age/Gender: 55 Y/F Address: koramangala BANGALORE, KARNATAKA Location: Doctor: Department: GENERAL KORAMANGALA_06042023 Rate Plan: ARCOFEMI HEALTHCARE LIMITED Sponsor: Consulting Doctor: Dr. JYOTHI RAJESH

MR No: Visit ID: Visit Date: Discharge Date: Referred By: CKOR.0000242434 CKOROPV368642 24-06-2023 07:54

SELF

Name: Mrs. Nirmala Dinakar Age/Gender: 55 Y/F Address: koramangala BANGALORE, KARNATAKA Location: Doctor: Department: GENERAL KORAMANGALA_06042023 Rate Plan: ARCOFEMI HEALTHCARE LIMITED Sponsor: Consulting Doctor: Dr. MAHABALESWAR

MR No: Visit ID: Visit Date: Discharge Date: Referred By: CKOR.0000242434 CKOROPV368642 24-06-2023 07:54

SELF

Name: Mrs. Nirmala Dinakar Age/Gender: 55 Y/F Address: koramangala BANGALORE, KARNATAKA Location: Doctor: Department: GENERAL KORAMANGALA_06042023 Rate Plan: ARCOFEMI HEALTHCARE LIMITED Sponsor: Consulting Doctor: Dr. VIJAYA LAKSHMI M

MR No: Visit ID: Visit Date: Discharge Date: Referred By: CKOR.0000242434 CKOROPV368642 24-06-2023 07:54

SELF

Name: Mrs. Nirmala Dinakar 55 Y/F Age/Gender: Address: koramangala Location: BANGALORE, KARNATAKA Doctor: GENERAL Department: Rate Plan: KORAMANGALA_06042023 ARCOFEMI HEALTHCARE LIMITED Sponsor: Consulting Doctor: Dr. MV PRASANNA KUMAR

MR No: Visit ID: Visit Date: Discharge Date: Referred By: CKOR.0000242434 CKOROPV368642 24-06-2023 07:54

SELF

HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

SYSTEMIC REVIEW

**Weight

--->: Stable,

HT-HISTORY

Past Medical History

PAST MEDICAL HISTORY: Nil,

**Cancer: no,

PHYSICAL EXAMINATION

SYSTEMIC EXAMINATION

IMPRESSION

RECOMMENDATION

DISCLAIMER

Disclaimer: The health checkup examinations and routine investigations have certain limitations and may not be able to detect all the diseases. Any new or persisting symptoms should be brought to the attention of the consulting physician. Additional tests, consultations and follow up may be required in some cases.,

Name: Mrs. Nirmala Dinakar 55 Y/F Age/Gender: Address: koramangala Location: BANGALORE, KARNATAKA Doctor: GENERAL Department: Rate Plan: KORAMANGALA_06042023 ARCOFEMI HEALTHCARE LIMITED Sponsor: Consulting Doctor: Dr. GAZALA ANJUM

MR No: Visit ID: Visit Date: Discharge Date: Referred By: CKOR.0000242434 CKOROPV368642 24-06-2023 07:54

SELF

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SYSTEMIC REVIEW

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