





Patient Name : Mrs.SATULURI CHAITANYA

Age/Gender : 35 Y 7 M 13 D/F
UHID/MR No : CELE.0000131150
Visit ID : CELEOPV346191

Ref Doctor : Dr.SELF Emp/Auth/TPA ID : bobE13079 Collected : 29/Mar/2024 07:55AM Received : 29/Mar/2024 11:39AM

Reported : 29/Mar/2024 02:57PM Status : Final Report

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

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	12.3	g/dL	12-15	Spectrophotometer
PCV	36.70	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.42	Million/cu.mm	3.8-4.8	Electrical Impedence
MCV	83.2	fL	83-101	Calculated
MCH	27.8	pg	27-32	Calculated
MCHC	33.4	g/dL	31.5-34.5	Calculated
R.D.W	14.4	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	6,470	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)			
NEUTROPHILS	57.1	%	40-80	Electrical Impedance
LYMPHOCYTES	28.7	%	20-40	Electrical Impedance
EOSINOPHILS	7.6	%	1-6	Electrical Impedance
MONOCYTES	6.2	%	2-10	Electrical Impedance
BASOPHILS	0.4	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	3694.37	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	1856.89	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	491.72	Cells/cu.mm	20-500	Calculated
MONOCYTES	401.14	Cells/cu.mm	200-1000	Calculated
BASOPHILS	25.88	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	1.99		0.78- 3.53	Calculated
PLATELET COUNT	356000	cells/cu.mm	150000-410000	Electrical impedence
ERYTHROCYTE SEDIMENTATION RATE (ESR)	37	mm at the end of 1 hour	0-20	Modified Westergrer
ERIPHERAL SMEAR				

RBCs: are normocytic normochromic

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

Page 1 of 16



SIN No:BED240086370

THE PRINCE LANGARD REPORT OF THE PRINCE PRIN







: Mrs.SATULURI CHAITANYA

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: 35 Y 7 M 13 D/F

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WBCs: are normal in total number with mild increase in eosinophils.

PLATELETS: appear adequate in number.

HEMOPARASITES: negative

IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE WITH MILD EOSINOPHILIA.

Dr. Vidya Aniket Gore M.B.B.S,M.D(Pathology) Consultant Pathologist Dr Priya Murthy M.B.B.S,M.D(Pathology) Consultant Pathologist Page 2 of 16



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Test Name	Result	Unit	Bio. Ref. Range	Method
BLOOD GROUP ABO AND RH FAC	TOR , WHOLE BLOOD EDT	Ā		
BLOOD GROUP TYPE	0			Microplate Hemagglutination
Rh TYPE	Positive			Microplate Hemagglutination

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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
GLUCOSE, FASTING , NAF PLASMA	177	mg/dL	70-100	HEXOKINASE
Comment:				

As per American Diabetes Guidelines, 2023

This per rimerican biabetes Guidennes, 2025	T , , , ,
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)	213	mg/dL	70-140	HEXOKINASE

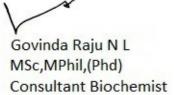
Comment:

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), W	/HOLE BLOOD EDTA			
HBA1C, GLYCATED HEMOGLOBIN	8.6	%		HPLC

Page 4 of 16



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



SIN No:EDT240039912

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Apollo Health and Lifestyle Limited (CIN-U85110TG2000PLC115819)

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

ESTIMATED AVERAGE GLUCOSE	200	mg/dL	Calculated
(eAG)			

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)

Govinda Raju N L MSc,MPhil,(Phd) Consultant Biochemist Dr Priva Murthy M.B.B.S,M.D(Pathology) Consultant Pathologist Page 5 of 16



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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		
LIPID PROFILE , SERUM						
TOTAL CHOLESTEROL	198	mg/dL	<200	CHO-POD		
TRIGLYCERIDES	88	mg/dL	<150	GPO-POD		
HDL CHOLESTEROL	33	mg/dL	40-60	Enzymatic Immunoinhibition		
NON-HDL CHOLESTEROL	165	mg/dL	<130	Calculated		
LDL CHOLESTEROL	147	mg/dL	<100	Calculated		
VLDL CHOLESTEROL	17.6	mg/dL	<30	Calculated		
CHOL / HDL RATIO	5.99		0-4.97	Calculated		
ATHEROGENIC INDEX (AIP)	0.07		<0.11	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
ATHEROGENIC INDEX(AIP)	<0.11	0.12 - 0.20	>0.21	

Note:

1) Measurements in the same patient on different days can show physiological and analytical variations.

Page 6 of 16

Govinda Raju N L MSc,MPhil,(Phd) Consultant Biochemist Dr Priya Murthy
M.B.B.S,M.D(Pathology)
Consultant Pathologist



SIN No:SE04679747

This test has been performed at Apollo Health & Lifestyle Ltd, RRL BANGALORE Laboratory this test has been performed at apollo health and lifstyle limited- rrl bangalore

Apollo Health and Lifestyle Limited (CIN-U85110TG2000PLC115819)

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

- 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 400 mg/dl. When

Triglycerides are more than 400 mg/dl LDL cholesterol is a direct measurement.

7) Triglycerides and HDL-cholesterol in Atherogenic index (AIP) reflect the balance between the atherogenic and protective lipoproteins. Clinical studies have shown that AIP (log (TG/HDL) & values used are in mmol/L) predicts cardiovascular risk and a useful measure of response to treatment (pharmacological intervention).

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Test Name	Result	Unit	Bio. Ref. Range	Method
LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.35	mg/dL	0.3–1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.09	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.26	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	11	U/L	<35	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	13.0	U/L	<35	IFCC
ALKALINE PHOSPHATASE	98.00	U/L	30-120	IFCC
PROTEIN, TOTAL	7.79	g/dL	6.6-8.3	Biuret
ALBUMIN	4.41	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.38	g/dL	2.0-3.5	Calculated
A/G RATIO	1.3		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.

Govinda Raju N L MSc,MPhil,(Phd) Consultant Biochemist Dr Priya Murthy M.B.B.S,M.D(Pathology) Consultant Pathologist Page 8 of 16



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Test Name	Result	Unit	Bio. Ref. Range	Method
RENAL PROFILE/KIDNEY FUNCTION	TEST (RFT/KFT) , SER	RUM		
CREATININE	0.58	mg/dL	0.51-0.95	Jaffe's, Method
UREA	22.80	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	10.6	mg/dL	8.0 - 23.0	Calculated
URIC ACID	3.94	mg/dL	2.6-6.0	Uricase PAP
CALCIUM	9.80	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	3.56	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	137	mmol/L	136–146	ISE (Indirect)
POTASSIUM	4.8	mmol/L	3.5–5.1	ISE (Indirect)
CHLORIDE	106	mmol/L	101–109	ISE (Indirect)
PROTEIN, TOTAL	7.79	g/dL	6.6-8.3	Biuret
ALBUMIN	4.41	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.38	g/dL	2.0-3.5	Calculated
A/G RATIO	1.3		0.9-2.0	Calculated

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Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	17.00	U/L	<38	IFCC

Govinda Raju N L MSc,MPhil,(Phd) Consultant Biochemist

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Page 10 of 16



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DEPARTMENT OF IMMUNOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
THYROID PROFILE TOTAL (T3, T4, TSH)	, SERUM			
TRI-IODOTHYRONINE (T3, TOTAL)	1.4	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	13.2	μg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	4.457	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	Т3	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

Govinda Raju N L MSc,MPhil,(Phd) Consultant Biochemist Dr Priya Murthy M.B.B.S,M.D(Pathology) Consultant Pathologist Page 11 of 16



SIN No:SPL24058387

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Age/Gender

: 35 Y 7 M 13 D/F

UHID/MR No

: CELE.0000131150 : CELEOPV346191

Visit ID Ref Doctor

: Dr.SELF

Emp/Auth/TPA ID

: bobE13079

Collected

: 29/Mar/2024 07:55AM

Received

: 29/Mar/2024 12:13PM

Reported

: 29/Mar/2024 01:38PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF IMMUNOLOGY

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

Govinda Raju N L MSc,MPhil,(Phd) Consultant Biochemist

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

Page 12 of 16



SIN No:SPL24058387

This test has been performed at Apollo Health & Lifestyle Ltd, RRL BANGALORE Laboratory this test has been performed at apollo health and lifstyle limited- rrl bangalore

Apollo Health and Lifestyle Limited (CIN-U85110TG2000PLC115819)

Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telang www.apollohl.com | Email ID: enquiry@apollohl.com, Ph No: 040-4904 7777, Fax No: 4904 7744 na - 500 016 | APOLLO CLINICS NETWORK









Patient Name : Mrs.SATULURI CHAITANYA

Age/Gender : 35 Y 7 M 13 D/F
UHID/MR No : CELE.0000131150
Visit ID : CELEOPV346191

Ref Doctor : Dr.SELF Emp/Auth/TPA ID : bobE13079 Collected : 29/Mar/2024 07:55AM Received : 29/Mar/2024 12:44PM

Reported : 29/Mar/2024 03:12PM

Status : Final Report

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

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
рН	5.5		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	1.025		1.002-1.030	Bromothymol Blue
BIOCHEMICAL EXAMINATION				
URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	POSITIVE +		NEGATIVE	GLUCOSE OXIDASE
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING REACTION
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	SODIUM NITRO PRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	MODIFED EHRLICH REACTION
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

Page 13 of 16

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:UR2319278

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

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









: Mrs.SATULURI CHAITANYA

Age/Gender

: 35 Y 7 M 13 D/F

UHID/MR No

: CELE.0000131150

Visit ID

: CELEOPV346191

Ref Doctor Emp/Auth/TPA ID : Dr.SELF : bobE13079 Collected

: 29/Mar/2024 10:37AM

Received

: 29/Mar/2024 04:23PM

Reported

: 29/Mar/2024 06:55PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

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

Dr. Vidya Aniket Gore M.B.B.S,M.D(Pathology) Consultant Pathologist Dr Priya Murthy M.B.B.S,M.D(Pathology) Consultant Pathologist Page 14 of 16



SIN No:UPP017429

THE PRINCE LANGARD REPORT OF THE PRINCE PRIN







: Mrs.SATULURI CHAITANYA

Age/Gender

: 35 Y 7 M 13 D/F

UHID/MR No

: CELE.0000131150

Visit ID

: CELEOPV346191

Ref Doctor Emp/Auth/TPA ID : bobE13079

: Dr.SELF

Reported

: 29/Mar/2024 07:55AM

: 29/Mar/2024 12:44PM

: 29/Mar/2024 01:47PM

Status

Collected

Received

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

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
URINE GLUCOSE(FASTING)	POSITIVE (+)		NEGATIVE	Dipstick

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

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

Page 15 of 16

SIN No:UF011491

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

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









: Mrs.SATULURI CHAITANYA

Age/Gender

: 35 Y 7 M 13 D/F

UHID/MR No

: CELE.0000131150

Visit ID

: CELEOPV346191

Ref Doctor Emp/Auth/TPA ID : Dr.SELF : bobE13079 Collected

: 29/Mar/2024 07:55AM

Received

: 30/Mar/2024 11:00AM

Reported

: 02/Apr/2024 07:29PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF CYTOLOGY

BC PA	AP TEST (PAPSURE) , CERVICAL BRUSH SAI	MPLE
	CYTOLOGY NO.	8050/24
I	SPECIMEN	
a	SPECIMEN ADEQUACY	ADEQUATE
b	SPECIMEN TYPE	LIQUID-BASED PREPARATION (LBC)
	SPECIMEN NATURE/SOURCE	CERVICAL SMEAR
c	ENDOCERVICAL-TRANSFORMATION ZONE	PRESENT WITH ENDOCERVICAL CELLS
d	COMMENTS	SATISFACTORY FOR EVALUATION
II	MICROSCOPY	Superficial and intermediate squamous epithelial cells with benign morphology.
		Negative for intraepithelial lesion/ malignancy.
III	RESULT	
a	EPITHEIAL CELL	· ·
	SQUAMOUS CELL ABNORMALITIES	NOT SEEN
	GLANDULAR CELL ABNORMALITIES	NOT SEEN
b	ORGANISM	NIL
IV	INTERPRETATION	NEGATIVE FOR INTRAEPITHELIAL LESION OR MALIGNANCY

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

*** End Of Report ***

Result/s to Follow: PERIPHERAL SMEAR







SIN No:CS078071

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

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





Patient Name : Mrs. SATULURI CHAITANYA Age/Gender : 35 Y/F

 UHID/MR No.
 : CELE.0000131150
 OP Visit No
 : CELEOPV346191

 Sample Collected on
 : 31-03-2024 15:10

Ref Doctor : SELF **Emp/Auth/TPA ID** : bobE13079

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

LIVER: appear normal in size and shows increased increased echogenicity. No focal lesion seen. The intra hepatic biliary and portal venous radicals are normal. Portal vein and CBD is normal

GALL BLADDER:moderately distended and shows a few calculi largest measuring 6.5mm.No abnormal wall thickening / pericholecystic fluid seen.

Pancreas: normal to the extend visualized.

SPLEEN: Normal in size and echo texture. No focal lesion noted

KIDNEYS: Both kidneys are normal in position, size and echo texture. Normal cortico-medullary differentiation is maintained. No calculus/hydronephrosis on both sides.

PELVIC ORGANS:

Urinary bladder well distended and appears normal in size, contour and wall thickness.

Uterus appear retroverted and normal in size and echo texture . Myometrial echoes appear normal.

ET measures ~ 10 mm.

Bilateral ovaries are normal in size, shape and echo texture.

No free fluid in the abdomen and pelvis.

IMPRESSION:

- Cholelithiasis.
- Fatty liver grade I.

 ${\it To~correlate~clinically~\&~with~other~investigations}.$

Not for medico-legal purpose

Perlat



Name : Mrs. SATULURI CHAITANYA

Age: 35 Y

Sex: F

Address: ecity

Plan

: ARCOFEMI MEDIWHEEL FEMALE AHC CREDIT PAN

INDIA OP AGREEMENT

UHID:CELE.0000131150

OP Number: CELEOPV346191 Bill No :CELE-OCR-56318

Date : 29.03.2024 07:47

	l Di	ite : 29,03.2024 07.47
Sno	Serive Type/ServiceName	Department
1	ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - F.	EMALE - 2D ECHO - PAN INDIA - FY2324
1	GAMMA GLUTAMYL TRANFERASE (GGT)	
ثر	2 DECHO - 12 10 30 AM	
3	LIVER FUNCTION TEST (LFT)	
کر	ocucose, fasting 1 2	
4	HEMOGRAM + PERIPHERAL SMEAR	
	GYNAECOLOGY CONSULTATION - 16 11:30 - 12:	30/
	DIET CONSULTATION - 21 by Physican	
	COMPLETE URINE EXAMINATION	
ي	PURINE GLUCOSE(POST PRANDIAL)	
	PERIPHERAL SMEAR	
	HECG - 1'S X	
	ZLBC PAP TEST-PAPSURE — 16 11:130 5 V21.0	<u></u>
-	3 RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)	
-	4 DENTAL CONSULTATION — \	
	5 GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL)	
-	GURINE GLUCOSE(FASTING)	
	ZHbA1c, GLYCATED HEMOGLOBIN	
	8 X-RAY CHEST PA C	•
	PENT CONSULTATION 6 6130 Pm	
-	OPITNESS BY GENERAL PHYSICIAN — 25 9130 Am	
-	T BLOOD GROUP ABO AND RH FACTOR	
-	2 LIPTO PROFILE	
	BODY MASS INDEX (BMI)	
	4 OPTHAL BY GENERAL PHYSICIAN 5	
	FULTRASOUND - WHOLE ABDOMEN - 8 9 30 AV	2
2	6 PHYROID PROFILE (TOTAL T3, TOTAL T4, TSH)	

Andre -3





2-D ECHO-CARDIOGRAPHY DOPPLER & COLOUR DOPPLER REPORT

NAME: MRS SATULURI CHAITANYA

DATE:29/03/2024

AGE/SEX: 35Y/ F

REF: ARCOFEMI

UHID:131150/03/126

*** MEASUREMENTS & FLOW VELOCITIES AS DEPICTED IN IMAGES OVERLEAF.

- 1. NORMAL VALVES.
- 2. NORMAL FLOW ACROSS ALL VALVES.
- 3. NO MR/ AR/ TR.
- 4. NORMAL GREAT VESSELS.
- 5. NORMAL SYSTEMIC VEINS & AT LEAST 3 PULMONARY VEINS SEEN DRAINING INTO LA.
- 6. NORMAL SIZED CHAMBERS.
- 7. NO REGIONAL WALL MOTION ABNORMALITIES.
- 8. INTACT SEPTAE (IVS & IAS).
- 9. GOOD LV & RV SYSTOLIC FUNCTION.
- 10. PERICARDIUM: NORMAL
- 11. NO OBVIOUS VEGETATION / CLOTS.

DR (CAPT.)S.V KRISHNA RAO

MD (PGI), DNB (Card)

Senior Consultant - Cardiologist

Reg No: ANP 19780000746KTK

To correlate with clinical findings & other relevant investigations .

Apollo Health and Lifestyle Limited

(CIN - U85110TG2000PLC115819)

 $Regd. Of fice: 1-10-60/62, A shoka\ Raghupathi\ Chambers, 5th\ Floor, Begumpet, Hyderabad, Telangana-500\ 016.$

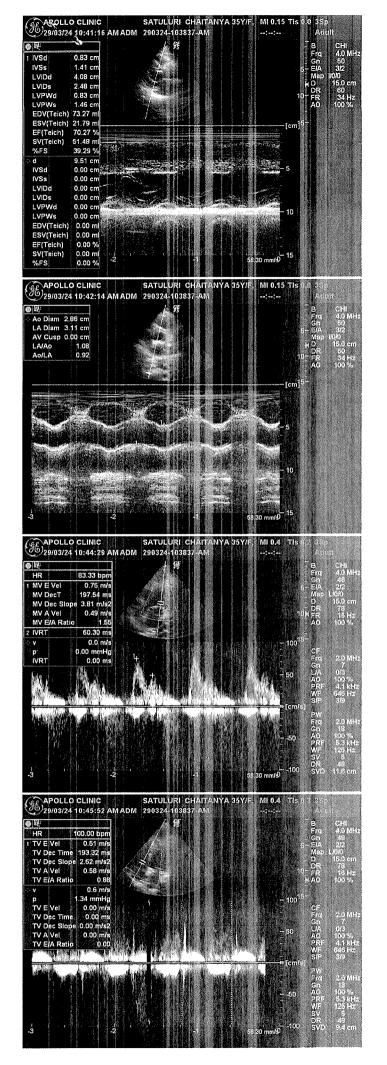
Ph No: 040-4904 7777, Fax No: 4904 7744 | Email ID: enquiry@apollohl.com | www.apollohl.com

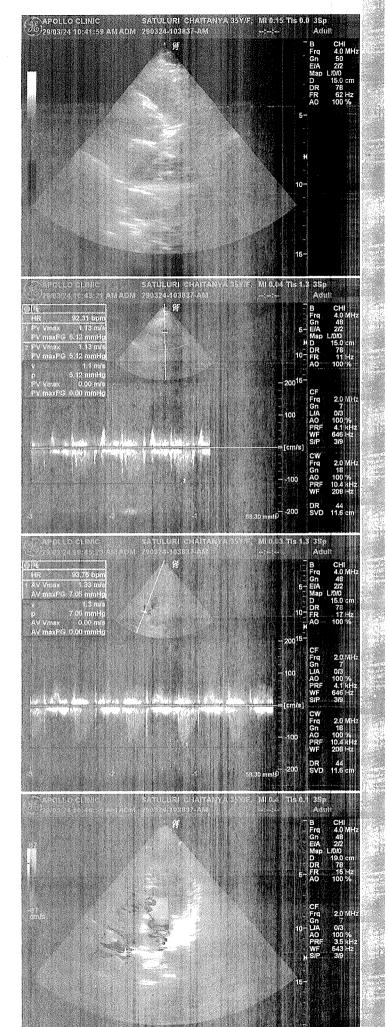
APOLLO CLINICS NETWORK KARNATAKA

Bangalore (Basavanagudi | Bellandur | Electronic City | Fraser Town | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli | Koramangala | Sarjapur Road) Mysore (VV Mohalla)

Online appointments: www.apolloclinic.com











NAME: Mrs. SATULURI CHAITANYA

AGE / SEX: 35YRS/ FEMALE

DATE: 29/03/2024

REFERRED BY: ARCOFEMI HEALTHCARE

ABDOMINAL ULTRASONOGRAPHY REPORT

LIVER: appear normal in size and shows increased increased echogenicity. No focal lesion seen. The intra hepatic biliary and portal venous radicals are normal. Portal vein and CBD is normal

GALL BLADDER: moderately distended and shows a few calculi largest measuring 6.5mm. No abnormal wall thickening / pericholecystic fluid seen.

Pancreas: normal to the extend visualized.

SPLEEN: Normal in size and echo texture. No focal lesion noted

KIDNEYS: Both kidneys are normal in position, size and echo texture. Normal cortico-medullary differentiation is maintained. No calculus/ hydronephrosis on both sides.

PELVIC ORGANS:

Urinary bladder well distended and appears normal in size, contour and wall thickness.

Uterus appear retroverted and normal in size and echo texture . Myometrial echoes appear normal.

ET measures ~ 10 mm.

Bilateral ovaries are normal in size, shape and echo texture.

No free fluid in the abdomen and pelvis.

IMPRESSION:

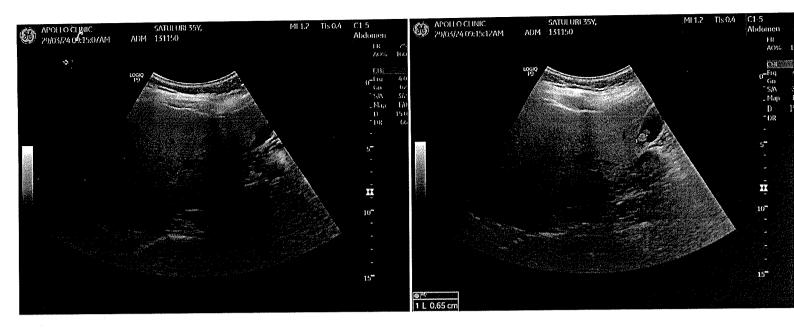
- Cholelithiasis.
- Fatty liver grade I.

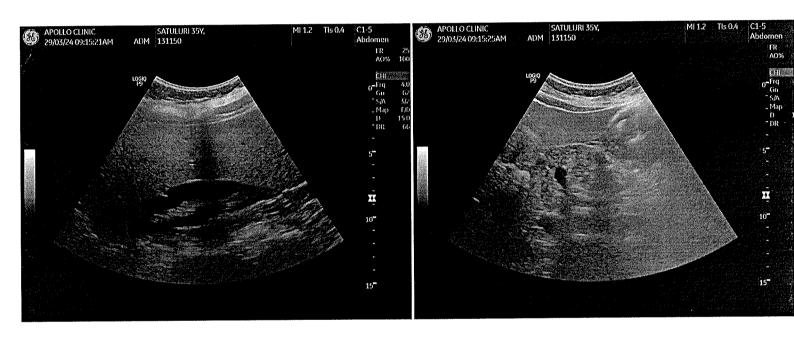
To correlate clinically & with other investigations. Not for medico-legal purpose

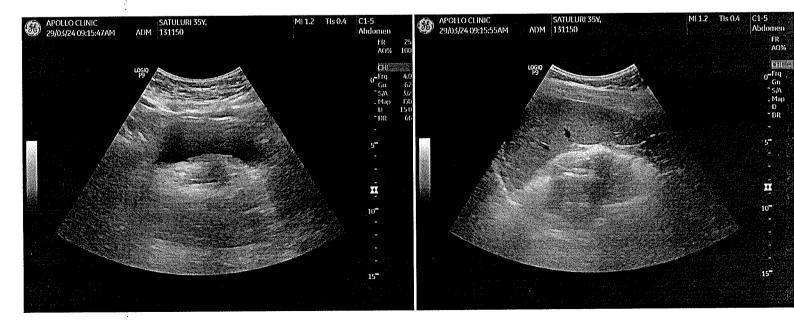
DR. VIGNESH K

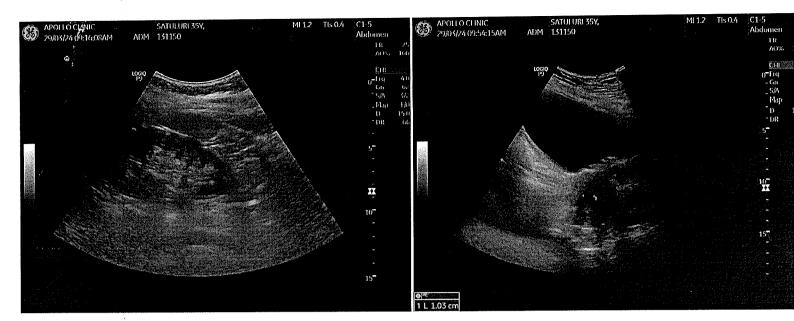
CONSULTANT RADIOLOGIST

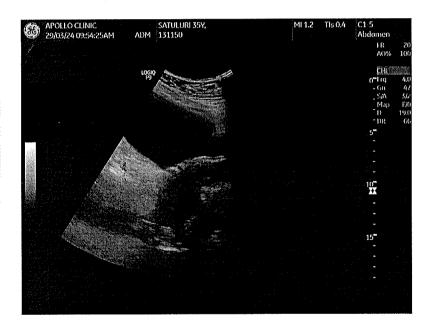
















: Mrs. SATULURI CHAITANYA

UHID

: CELE.0000131150

Reported on

: 29-03-2024 16:42

Adm/Consult Doctor

Age

: 35 Y F

OP Visit No

: CELEOPV346191

Printed on

: 29-03-2024 16:42

Ref Doctor

: SELF

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

Printed on:29-03-2024 16:42

--- End of the Report---

For Dr. VIGNESH K

MBBS, MD Radio-Diagnosis

Radiology

Apollo Health and Lifestyle Limited

(CIN - U85110TG2000PLC115819)

Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016. Ph No: 040-4904 7777, Fax No: 4904 7744 | Email ID: enquiry@apollohl.com | www.apollohl.com

APOLLO CLINICS NETWORK KARNATAKA

Bangalore (Basavanagudi | Bellandur | Electronic City | Fraser Town | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli | Koramangala | Sarjapur Road) **Mysore** (VV Mohalla)

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

1860 500 7788

Page 1 of 1

Personal Details Date: IST: 2024-03-29 08:11:03 Pre-Existing Medical- Symptoms

Conditions

UHID: 00XHE1PU6TZ0MOL PatientID: 131150 Name: Mrs Satuluri Chltanya

Vitals

Measurements HR: 90 BPM PD: 113 ms PR: 153 ms

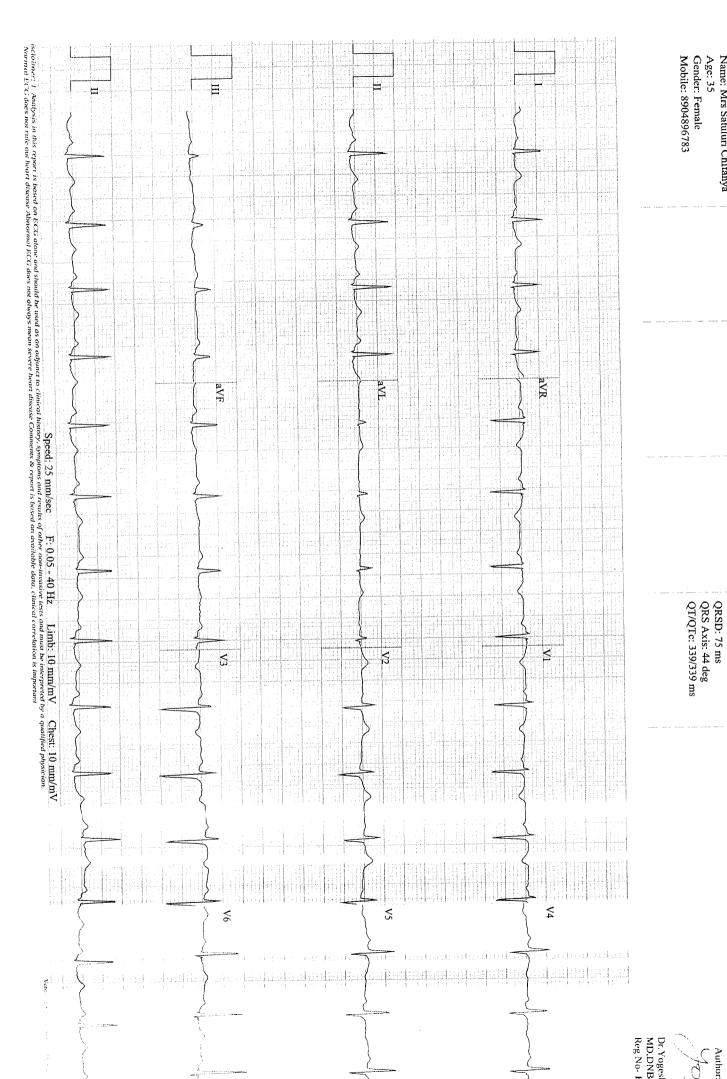
Interpretation

vehou m. waren

Apolle

Author

Sinus Rhythm Regular Normal Axis







MEDICAL FITNESS CERTIFICATE

AT A	A ATTO
INA	\mathbf{ME} :

AGE/SEX:

UHID:

DATE:

CHIEF COMPLAINTS:

PAST/FAMILY HISTORY:-

no complaints

F/H/OHTH, T2DM

ALLERGIES:-

-12/c/o myraine

GENERAL EXAMINATION:-

79ble BP: 133/85mm/Hz TEMP: 98-6 F RR: 22/men July WT: 67,26g WAIST: BMI: 28.3 PULSE:

SYSTEMIC EXAMINATION: -

PICCLE

Chest:

P/A:

16 Cyl-0.50@90 Le 25 Juh-0.25

IMPRESSION:-

FINAL RECOMMENDATIONS:-

VISION SCREENING

<u>Vision</u>	<u>Rt</u>	<u>Lt</u>	With Corrections
DISTANT	0.50	0.95	
NEAR	NG	NE	Included
COLOUR	Nom	w	A second

C/S/B DQ Yachasusi Throat - NAD Eas - B/L Th (1) sintact Mose - NAD.

NO added cound RS-NUBS

GENERAL PHYSICIAN

Apollo Health and Lifestyle Limited

(CIN ~ U85110TG2000PLC115819)

Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016. Ph No: 040-4904 7777, Fax No: 4904 7744 | Email ID: enquiry@apollohl.com | www.apollohl.com

APOLLO CLINICS NETWORK KARNATAKA

Bangalore (Basavanagudi | Bellandur | Electronic City | Fraser Town | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli | Koramangala | Sarjapur Road) Mysore (VV Mohalla)

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT



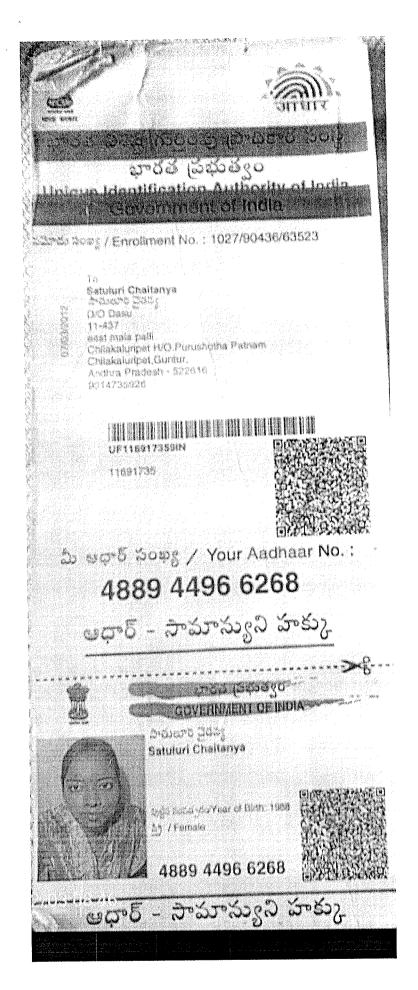


Apollo Clinic

Consent Form

Patient Name: Satalusi Chaitanya Age: 35 yes
Patient Name: Satalusi Chaitanya Age: 35 yes UHID Number: 131150 Company Name: Al Ofemi
I Mr/Mrs/Ms. Satuliar Charlenga Employee of Alcofeni
I Mr/Mrs/Ms. Satuliari Chailinga Employee of Arcofeni (Company) want to inform you that I am not getting the Doutal
test done which is a part of routine health check package.
Reason if any: Pt did not the test
And I claim the above statement in my full consciousness.
Patient signature: SATULURI CHATTAN Bate:

napon outro on o me management



29-03-2024, 07:45

Fwd: Health Check up Booking Confirmed Request(bobE13079), Package Code-PKG10000377, Beneficiary Code-258655

Chaitanya Satuluri < chaitanya.31137@gmail.com>

Fri 2024-03-29 7:38 AM

To: Electronic City <ecity@apolloclinic.com>

----- Forwarded message ------

From: Mediwheel <wellness@mediwheel.in>

Date: Thu, Mar 28, 2024, 12:01 PM

Subject: Health Check up Booking Confirmed Request(bobE13079), Package Code-

PKG10000377, Beneficiary Code-258655

To: <chaitanya.31137@gmail.com> Cc: < customercare@mediwheel.in>

011-41195959

Dear MS. SATULURI CHAITANYA,

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

Hospital Package

Name

: Mediwheel Full Body Health Annual Plus Check

Patient Package

Name

: Mediwheel Full Body Health Checkup Female Below 40

Name of

Diagnostic/Hospital

: Apollo Clinic - Electronic City

Address of

Apollo Clinic, 323/100, Opp. Ajmera infinity Apartment, Neeladri

Diagnostic/Hospital- Nagar, Electronic city Phase -1, Electronic city - 560100

City

: Bangalore

State

: Karnataka

Pincode

: 560100

Appointment Date

: 29-03-2024

Confirmation Status: Booking Confirmed

Preferred Time

: 8:00am-8:30am

Booking Status

: Booking Confirmed

Member Information												
Booked Member Name	Age	Gender										
MS. SATULURI CHAITANYA	35 year	Female										

Note - Please note to not pay any amount at the center.

Instructions to undergo Health Check:



Patient Name : Mrs. SATULURI CHAITANYA Age/Gender : 35 Y/F

UHID/MR No. **OP Visit No** : CELE.0000131150

: CELEOPV346191 Sample Collected on : 29-03-2024 16:42 Reported on

LRN# : RAD2285518 Specimen

Ref Doctor : SELF Emp/Auth/TPA ID : bobE13079

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. VIGNESH K MBBS, MD Radio-Diagnosis Radiology

35 Y/F Age/Gender: 35 Y/ ecity Address:

BANGALORE, KARNATAKA Location:

Doctor:

Department: GENERAL
Rate Plan: Electronic City_03122022
Sponsor: ARCOFEMI HEALTHCA

ARCOFEMI HEALTHCARE LIMITED Sponsor:

Consulting Doctor: Dr. SONIA MOHAN

HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

SYSTEMIC REVIEW

HT-HISTORY

PHYSICAL EXAMINATION

SYSTEMIC EXAMINATION

IMPRESSION

RECOMMENDATION

Doctor's Signature

MR No: CELE.0000131150 Visit ID: CELEOPV346191 Visit Date: 29-03-2024 07:47

Discharge Date:

35 Y/F Age/Gender: 35 Y/ ecity Address:

BANGALORE, KARNATAKA Location:

Doctor:

Department: GENERAL
Rate Plan: Electronic City_03122022
Sponsor: ARCOFEMI HEALTHCA

ARCOFEMI HEALTHCARE LIMITED Sponsor: Consulting Doctor: Dr. DAYANAND BALAPPA YALIGAR

HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

SYSTEMIC REVIEW

HT-HISTORY

PHYSICAL EXAMINATION

SYSTEMIC EXAMINATION

IMPRESSION

RECOMMENDATION

Doctor's Signature

MR No: CELE.0000131150 Visit ID: CELEOPV346191 Visit Date: 29-03-2024 07:47

Discharge Date:

35 Y/F Age/Gender: Address: ecity

BANGALORE, KARNATAKA Location:

Doctor:

Department: GENERAL

Rate Plan:

Electronic City_03122022 ARCOFEMI HEALTHCARE LIMITED Sponsor:

Consulting Doctor: Dr. YASHASWI R G

Doctor's Signature

MR No: CELE.0000131150 Visit ID: CELEOPV346191 Visit Date: 29-03-2024 07:47

Discharge Date:

Age/Gender: 35 Y/F
Address: ecity
Location:

BANGALORE, KARNATAKA

Doctor:

Department: GENERAL
Rate Plan: Electronic City_03122022
Spansor: APCOFEMI HEALTHCA

ARCOFEMI HEALTHCARE LIMITED Sponsor:

Consulting Doctor: Dr. PAVITRA RAMAN

HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

SYSTEMIC REVIEW

HT-HISTORY

PHYSICAL EXAMINATION

SYSTEMIC EXAMINATION

IMPRESSION

RECOMMENDATION

Doctor's Signature

MR No: CELE.0000131150 Visit ID: CELEOPV346191 Visit Date: 29-03-2024 07:47

Discharge Date:

35 Y/F Age/Gender: Address: ecity

BANGALORE, KARNATAKA Location:

Doctor:

Department: GENERAL

Rate Plan:

Electronic City_03122022 ARCOFEMI HEALTHCARE LIMITED Sponsor:

Consulting Doctor: Dr. KRISHNA SHAW

Doctor's Signature

MR No: CELE.0000131150 Visit ID: CELEOPV346191 Visit Date: 29-03-2024 07:47

Discharge Date:

II)afe	Pulse (Beats/min)	_	Resp (Rate/min)	Temp (F)	Height (cms)	(Kgs)	Percentage	Fat Level	Body Age (Years)	BMI	Circum	Hip (cms)	(cms)	Waist & Hip Ratio	User
03-04-2024 13:52			20 Rate/min	97 F	-	67.2 Kgs	%	%	Years	28.34	cms	cms	cms		AHLL07132

II)afe	Pulse (Beats/min)	_	Resp (Rate/min)	Temp (F)	Height (cms)	(Kgs)	Percentage	Fat Level	Body Age (Years)	BMI	Circum	Hip (cms)	(cms)	Waist & Hip Ratio	User
03-04-2024 13:52			20 Rate/min	97 F	-	67.2 Kgs	%	%	Years	28.34	cms	cms	cms		AHLL07132

II)afe	Pulse (Beats/min)	_	Resp (Rate/min)	Temp (F)	Height (cms)	(Kgs)	Percentage	Fat Level	Body Age (Years)	BMI	Circum	Hip (cms)	(cms)	Waist & Hip Ratio	User
03-04-2024 13:52			20 Rate/min	97 F	-	67.2 Kgs	%	%	Years	28.34	cms	cms	cms		AHLL07132

II)afe	Pulse (Beats/min)	_	Resp (Rate/min)	Temp (F)	Height (cms)	(Kgs)	Percentage	Fat Level	Body Age (Years)	BMI	Circum	Hip (cms)	(cms)	Waist & Hip Ratio	User
03-04-2024 13:52			20 Rate/min	97 F	-	67.2 Kgs	%	%	Years	28.34	cms	cms	cms		AHLL07132

II)afe	Pulse (Beats/min)	_	Resp (Rate/min)	Temp (F)	Height (cms)	(Kgs)	Percentage	Fat Level	Body Age (Years)	BMI	Circum	Hip (cms)	(cms)	Waist & Hip Ratio	User
03-04-2024 13:52			20 Rate/min	97 F	-	67.2 Kgs	%	%	Years	28.34	cms	cms	cms		AHLL07132