

Patient Name : Mrs.POONAM VERMA	Collected : 13/Mar/2024 08:57AM
Age/Gender : 58 Y 10 M 3 D/F	Received : 13/Mar/2024 11:32AM
UHID/MR No : CINR.0000164230	Reported : 13/Mar/2024 01:09PM
Visit ID : CINROPV221897	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9448596389	

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
<b>HEMOGRAM , WHOLE BLOOD EDTA</b>				
HAEMOGLOBIN	12.2	g/dL	12-15	Spectrophotometer
PCV	36.70	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.07	Million/cu.mm	3.8-4.8	Electrical Impedance
MCV	90	fL	83-101	Calculated
MCH	30.1	pg	27-32	Calculated
MCHC	33.3	g/dL	31.5-34.5	Calculated
R.D.W	13.4	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	5,300	cells/cu.mm	4000-10000	Electrical Impedance
<b>DIFFERENTIAL LEUCOCYTIC COUNT (DLC)</b>				
NEUTROPHILS	56.8	%	40-80	Electrical Impedance
LYMPHOCYTES	35.9	%	20-40	Electrical Impedance
EOSINOPHILS	2.4	%	1-6	Electrical Impedance
MONOCYTES	4.9	%	2-10	Electrical Impedance
BASOPHILS	0	%	<1-2	Electrical Impedance
<b>ABSOLUTE LEUCOCYTE COUNT</b>				
NEUTROPHILS	3010.4	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	1902.7	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	127.2	Cells/cu.mm	20-500	Calculated
MONOCYTES	259.7	Cells/cu.mm	200-1000	Calculated
Neutrophil lymphocyte ratio (NLR)	1.58		0.78- 3.53	Calculated
<b>PLATELET COUNT</b>	253000	cells/cu.mm	150000-410000	Electrical impedance
<b>ERYTHROCYTE SEDIMENTATION RATE (ESR)</b>	13	mm at the end of 1 hour	0-20	Modified Westegren method
<b>PERIPHERAL SMEAR</b>				

RBCs: are normocytic normochromic



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SIN No:BED240066869

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

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

**Apollo Health and Lifestyle Limited** (CIN - U85110TG2000PLC115819)

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APOLLO CLINICS NETWORK

Telangana: Hyderabad (AS Rao Nagar | Chanda Nagar | Kondapur | Nallakunta | Nizampet | Manikonda | Uppal) | Andhra Pradesh: Vizag (Seethamma Peta) | Karnataka: Bangalore (Basavanagudi | Bellandur | Electronics City | Fraser Town | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli | Koramangala | Sarjapur Road) | Mysore (VV Mohalla) | Tamilnadu: Chennai (Annanagar | Kotturpuram | Mogappair | T Nagar | Valasaravakkam | Velachery) | Maharashtra: Pune (Aundh | Nigdi Pradhikaran | Viman Nagar | Wanowrie) | Uttar Pradesh: Ghaziabad (Indrapuram) | Gujarat: Ahmedabad (Satellite) | Punjab: Amritsar (Court Road) | Haryana: Faridabad (Railway Station Road)

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## DEPARTMENT OF HAEMATOLOGY

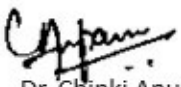
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WBCs: are normal in total number with normal distribution and morphology.

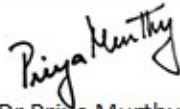
PLATELETS: appear adequate in number.

HEMOPARASITES: negative

**IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE**



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Test Name	Result	Unit	Bio. Ref. Range	Method
<b>BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA</b>				
BLOOD GROUP TYPE	O			Microplate Hemagglutination
Rh TYPE	Positive			Microplate Hemagglutination



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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	94	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:

- The diagnosis of Diabetes requires a fasting plasma glucose of  $>$  or  $=$  126 mg/dL and/or a random / 2 hr post glucose value of  $>$  or  $=$  200 mg/dL on at least 2 occasions.
- Very high glucose levels ( $>$ 450 mg/dL in adults) may result in Diabetic Ketoacidosis & is considered critical.

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	102	mg/dL	70-140	HEXOKINASE


Comment:

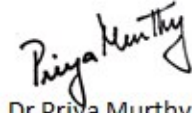
It is recommended that FBS and PPBS should be interpreted with respect to their Biological reference ranges and not with each other.

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.

Test Name	Result	Unit	Bio. Ref. Range	Method
HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA				
HBA1C, GLYCATED HEMOGLOBIN	6.5	%		HPLC

Page 4 of 16

  
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ESTIMATED AVERAGE GLUCOSE (eAG)	140	mg/dL	Calculated
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Comment:

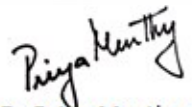
Reference Range as per American Diabetes Association (ADA) 2023 Guidelines:

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

Note: Dietary preparation or fasting is not required.

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

  
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Test Name	Result	Unit	Bio. Ref. Range	Method
<b>LIPID PROFILE , SERUM</b>				
TOTAL CHOLESTEROL	219	mg/dL	<200	CHO-POD
TRIGLYCERIDES	123	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	67	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	152	mg/dL	<130	Calculated
LDL CHOLESTEROL	127.4	mg/dL	<100	Calculated
VLDL CHOLESTEROL	24.6	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.27		0-4.97	Calculated
ATHEROGENIC INDEX PLASMA (AIP)	< 0.01		<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 OF PLASMA (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.



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SIN No:SE04659612

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- 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 AIP reflect the balance between the atherogenic and protective lipoproteins. Clinical studies have shown that AIP 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
<b>LIVER FUNCTION TEST (LFT) , SERUM</b>				
BILIRUBIN, TOTAL	0.64	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.11	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.53	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	18	U/L	<35	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	21.0	U/L	<35	IFCC
ALKALINE PHOSPHATASE	89.00	U/L	30-120	IFCC
PROTEIN, TOTAL	6.65	g/dL	6.6-8.3	Biuret
ALBUMIN	4.14	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.51	g/dL	2.0-3.5	Calculated
A/G RATIO	1.65		0.9-2.0	Calculated

**Comment:**

LFT results reflect different aspects of the health of the liver, i.e., hepatocyte integrity (AST & ALT), synthesis and secretion of bile (Bilirubin, ALP), cholestasis (ALP, GGT), protein synthesis (Albumin)

Common patterns seen:

**1. Hepatocellular Injury:**

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

**2. Cholestatic Pattern:**

- ALP – Disproportionate increase in ALP compared with AST, ALT.
- Bilirubin may be elevated.
- ALP elevation also seen in pregnancy, impacted by age and sex.
- To establish the hepatic origin correlation with GGT helps. If GGT elevated indicates hepatic cause of increased ALP.

**3. Synthetic function impairment:**

- Albumin- Liver disease reduces albumin levels.
- Correlation with PT (Prothrombin Time) helps.



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Patient Name : Mrs.POONAM VERMA	Collected : 13/Mar/2024 08:57AM
Age/Gender : 58 Y 10 M 3 D/F	Received : 13/Mar/2024 11:26AM
UHID/MR No : CINR.0000164230	Reported : 13/Mar/2024 01:02PM
Visit ID : CINROPV221897	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9448596389	

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
<b>RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM</b>				
CREATININE	0.71	mg/dL	0.51-0.95	Jaffe's, Method
UREA	25.00	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	11.7	mg/dL	8.0 - 23.0	Calculated
URIC ACID	4.35	mg/dL	2.6-6.0	Uricase PAP
CALCIUM	9.40	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	3.30	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	138	mmol/L	136-146	ISE (Indirect)
POTASSIUM	4.4	mmol/L	3.5-5.1	ISE (Indirect)
CHLORIDE	106	mmol/L	101-109	ISE (Indirect)
PROTEIN, TOTAL	6.65	g/dL	6.6-8.3	Biuret
ALBUMIN	4.14	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.51	g/dL	2.0-3.5	Calculated
A/G RATIO	1.65		0.9-2.0	Calculated



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



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



SIN No:SE04659612

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**Apollo Health and Lifestyle Limited** (CIN - U85110TG2000PLC115819)

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APOLLO CLINICS NETWORK

Telangana: Hyderabad (AS Rao Nagar | Chanda Nagar | Kondapur | Nallakunta | Nizampet | Manikonda | Uppal) Andhra Pradesh: Vizag (Seethamma Peta) Karnataka: Bangalore (Basavanagudi | Bellandur | Electronics City | Fraser Town | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli | Koramangala | Sarjapur Road) Mysore (VV Mohalla) Tamilnadu: Chennai (Annanagar | Kotturpuram | Mogappair | T Nagar | Valasaravakkam | Velachery) Maharashtra: Pune (Aundh | Nigdi Pradhikaran | Viman Nagar | Wanowrie) Uttar Pradesh: Ghaziabad (Indrapuram) Gujarat: Ahmedabad (Satellite) Punjab: Amritsar (Court Road) Haryana: Faridabad (Railway Station Road)

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Neeladri Nagar, Electronic city, Bengaluru,  
Karnataka- 560034

 1860 500 7788  
www.apolloclinic.com

Patient Name : Mrs.POONAM VERMA	Collected : 13/Mar/2024 08:57AM
Age/Gender : 58 Y 10 M 3 D/F	Received : 13/Mar/2024 11:26AM
UHID/MR No : CINR.0000164230	Reported : 13/Mar/2024 12:54PM
Visit ID : CINROPV221897	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9448596389	

**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
<b>GAMMA GLUTAMYL TRANSEPTIDASE (GGT) , SERUM</b>	14.00	U/L	<38	IFCC



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

SIN No:SE04659612

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

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



Patient Name : Mrs.POONAM VERMA	Collected : 13/Mar/2024 08:57AM
Age/Gender : 58 Y 10 M 3 D/F	Received : 13/Mar/2024 11:36AM
UHID/MR No : CINR.0000164230	Reported : 13/Mar/2024 02:43PM
Visit ID : CINROPV221897	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9448596389	

DEPARTMENT OF IMMUNOLOGY

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


Test Name	Result	Unit	Bio. Ref. Range	Method
<b>THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM</b>				
TRI-IODOTHYRONINE (T3, TOTAL)	0.8	ng/mL	0.64-1.52	CMIA
THYROXINE (T4, TOTAL)	7.58	µg/dL	4.87-11.72	CMIA
THYROID STIMULATING HORMONE (TSH)	1.420	µIU/mL	0.35-4.94	CMIA

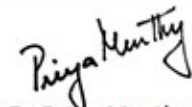
Comment:

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

- TSH is a glycoprotein hormone secreted by the anterior pituitary. TSH activates production of T3 (Triiodothyronine) and its prohormone T4 (Thyroxine). Increased blood level of T3 and T4 inhibit production of TSH.
- TSH is elevated in primary hypothyroidism and will be low in primary hyperthyroidism. Elevated or low TSH in the context of normal free thyroxine is often referred to as sub-clinical hypo- or hyperthyroidism respectively.
- Both T4 & T3 provides limited clinical information as both are highly bound to proteins in circulation and reflects mostly inactive hormone. Only a very small fraction of circulating hormone is free and biologically active.
- Significant variations in TSH can occur with circadian rhythm, hormonal status, stress, sleep deprivation, medication & circulating antibodies.

TSH	T3	T4	FT4	Conditions
High	Low	Low	Low	Primary Hypothyroidism, Post Thyroidectomy, Chronic Autoimmune Thyroiditis
High	N	N	N	Subclinical Hypothyroidism, Autoimmune Thyroiditis, Insufficient Hormone Replacement Therapy.
N/Low	Low	Low	Low	Secondary and Tertiary Hypothyroidism
Low	High	High	High	Primary Hyperthyroidism, Goitre, Thyroiditis, Drug effects, Early Pregnancy
Low	N	N	N	Subclinical Hyperthyroidism
Low	Low	Low	Low	Central Hypothyroidism, Treatment with Hyperthyroidism
Low	N	High	High	Thyroiditis, Interfering Antibodies
N/Low	High	N	N	T3 Thyrotoxicosis, Non thyroidal causes
High	High	High	High	Pituitary Adenoma; TSHoma/Thyrotropinoma

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

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



SIN No:SPL24044505

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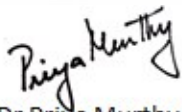
Patient Name	: Mrs.POONAM VERMA	Collected	: 13/Mar/2024 08:57AM
Age/Gender	: 58 Y 10 M 3 D/F	Received	: 13/Mar/2024 11:36AM
UHID/MR No	: CINR.0000164230	Reported	: 13/Mar/2024 02:43PM
Visit ID	: CINROPV221897	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 9448596389		

DEPARTMENT OF IMMUNOLOGY

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



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



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



SIN No:SPL24044505

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APOLLO CLINICS NETWORK

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Neeladri Nagar, Electronic city, Bengaluru,  
Karnataka - 560034

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

Patient Name : Mrs.POONAM VERMA	Collected : 13/Mar/2024 08:56AM
Age/Gender : 58 Y 10 M 3 D/F	Received : 13/Mar/2024 11:54AM
UHID/MR No : CINR.0000164230	Reported : 13/Mar/2024 01:10PM
Visit ID : CINROPV221897	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9448596389	

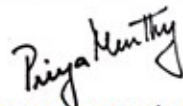
DEPARTMENT OF CLINICAL PATHOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>COMPLETE URINE EXAMINATION (CUE) , URINE</b>				
<b>PHYSICAL EXAMINATION</b>				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pH	6.5		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	1.010		1.002-1.030	Bromothymol Blue
<b>BIOCHEMICAL EXAMINATION</b>				
URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE		NEGATIVE	GLUCOSE OXIDASE
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING REACTION
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	SODIUM NITRO PRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	MODIFIED EHRlich REACTION
BLOOD	NEGATIVE		NEGATIVE	Peroxidase
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	LEUCOCYTE ESTERASE
<b>CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY</b>				
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



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



SIN No:UR2303945

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

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APOLLO CLINICS NETWORK

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Karnataka - 560034

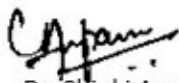
 1860 500 7788  
www.apolloclinic.com

Patient Name : Mrs.POONAM VERMA	Collected : 13/Mar/2024 11:09AM
Age/Gender : 58 Y 10 M 3 D/F	Received : 13/Mar/2024 06:06PM
UHID/MR No : CINR.0000164230	Reported : 13/Mar/2024 07:57PM
Visit ID : CINROPV221897	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9448596389	

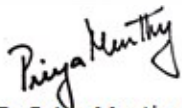
DEPARTMENT OF CLINICAL PATHOLOGY

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)	NEGATIVE		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



SIN No:UPP017120

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

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Patient Name : Mrs.POONAM VERMA	Collected : 13/Mar/2024 08:56AM
Age/Gender : 58 Y 10 M 3 D/F	Received : 13/Mar/2024 11:54AM
UHID/MR No : CINR.0000164230	Reported : 13/Mar/2024 01:08PM
Visit ID : CINROPV221897	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
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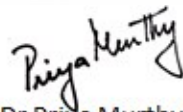
DEPARTMENT OF CLINICAL PATHOLOGY

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



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



SIN No:UF011165

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

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Patient Name	: Mrs.POONAM VERMA	Collected	: 13/Mar/2024 01:07PM
Age/Gender	: 58 Y 10 M 3 D/F	Received	: 14/Mar/2024 12:43PM
UHID/MR No	: CINR.0000164230	Reported	: 15/Mar/2024 10:51AM
Visit ID	: CINROPV221897	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 9448596389		

**DEPARTMENT OF CYTOLOGY**


**LBC PAP TEST (PAPSURE) , CERVICAL BRUSH SAMPLE**

	<b>CYTOLOGY NO.</b>	5780/24
<b>I</b>	<b>SPECIMEN</b>	
<b>a</b>	SPECIMEN ADEQUACY	ADEQUATE
<b>b</b>	<b>SPECIMEN TYPE</b>	LIQUID-BASED PREPARATION (LBC)
	SPECIMEN NATURE/SOURCE	CERVICAL SMEAR
<b>c</b>	ENDOCERVICAL-TRANSFORMATION ZONE	ABSENT
<b>d</b>	COMMENTS	SATISFACTORY FOR EVALUATION
<b>II</b>	<b>MICROSCOPY</b>	Parabasal and intermediate squamous epithelial cells with benign morphology.  Inflammatory cells, predominantly neutrophils.  Negative for intraepithelial lesion/ malignancy.
<b>III</b>	<b>RESULT</b>	
<b>a</b>	<b>EPITHEIAL CELL</b>	
	SQUAMOUS CELL ABNORMALITIES	NOT SEEN
	GLANDULAR CELL ABNORMALITIES	NOT SEEN
<b>b</b>	<b>ORGANISM</b>	NIL
<b>IV</b>	<b>INTERPRETATION</b>	NEGATIVE FOR INTRAEPITHELIAL LESION OR MALIGNANCY

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

**\*\*\* End Of Report \*\*\***

Result/s to Follow:  
PERIPHERAL SMEAR



Dr.A.Kalyan Rao  
M.B.B.S.,M.D(Pathology)  
Consultant Pathologist



SIN No:CS076366

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

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Neeladri Nagar, Electronic city, Bengaluru,  
Karnataka- 560034

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



Name : Mrs. Poonam Verma

Age: 58 Y

UHID: CINR.0000164230

Sex: F



OP Number: CINROPV221897

Address : BANGALORE

Plan : ARCOFEMI MEDIWHEEL FEMALE AHC CREDIT PAN  
INDIA OP AGREEMENT

Bill No : CINR-OCR-95032

Date : 13.03.2024 08:48

Sno	Service Type/ServiceName	Department
1	ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY2324	
1	GAMMA GLUTAMYL TRANSFERASE (GGT)	
2	2D ECHO - 9 9:15 AM	
3	LIVER FUNCTION TEST (LFT)	
4	GLUCOSE, FASTING	
5	HEMOGRAM + PERIPHERAL SMEAR	
6	GYNAECOLOGY CONSULTATION - 35	
7	DIET CONSULTATION	
8	COMPLETE URINE EXAMINATION	
9	URINE GLUCOSE (POST PRANDIAL)	
10	PERIPHERAL SMEAR	
11	EKG - 5	
12	LBC PAP TEST - PAPSURE - 3 (5)	
13	RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)	
14	DENTAL CONSULTATION - 1	
15	GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL)	
16	URINE GLUCOSE (FASTING)	
17	SONO MAMOGRAPHY - SCREENING - 15 i Nivamsai	
18	HbA1c, GLYCATED HEMOGLOBIN	
19	X-RAY CHEST PA - 10	
20	ENT CONSULTATION	
21	FITNESS BY GENERAL PHYSICIAN	
22	BLOOD GROUP ABO AND RH FACTOR	
23	LIPID PROFILE	
24	BODY MASS INDEX (BMI) - 6	
25	OPHTHAL BY GENERAL PHYSICIAN - 5	
26	ULTRASOUND - WHOLE ABDOMEN - 9	
27	THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)	

Date : 13-03-2024  
 MR NO : CINR.0000164230  
 Name : Mrs. Poonam Verma  
 Age/ Gender : 58 Y / Female

Department : GENERAL  
 Doctor : *Suganya*  
 Registration No : 30834  
 Qualification :

Consultation Timing: 08:48

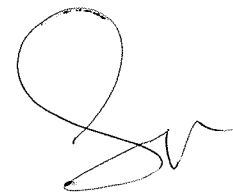
Height : 161 cm	Weight : 74 kg	BMI : 28.5 kg/m <sup>2</sup>	Waist Circum : 100-3
Temp : 98.6 °f	Pulse : 74 bpm	Resp : 18 bpm	B.P : 130/82 mmHg

General Examination / Allergies  
 History

Clinical Diagnosis & Management Plan

O/H :- Mx - 3548  
 P > L2  
 LD - 2648  
 MH :- Menopause 4483Baq  
 BOTA Bxall (n)  
 P/A - Ascess (n)  
 Soft  
 - Abc smaltare

Follow up date:



Doctor Signature

13.03.2024

Mrs. Poochan Varma

58 yrs / F.

Height :	Weight :	BMI :	Waist Circum :
Temp :	Pulse :	Resp :	B.P :

General Examination / Allergies  
History

Clinical Diagnosis & Management Plan


Azofemi - Atte.

Ears: Rr. ear; Wax +  
/

Lr. ear; Wax.  
/

Nose: Wax

Throat: Wax



Follow up date:

Dr. RAVINDRANATH **Doctor Signature**  
M.B.B.S., D.L.O.

ENT. SURGEON

KMC REG. **BOOK YOUR APPOINTMENT TODAY!**

Whatsapp Number : 970 100 3333

Toll Number : 1860 500 7788

Website : www.apolloclinic.com

## OPHTHAL PRESCRIPTION

PATIENT NAME : *poonam verma*

DATE : *13/3/24*

UHID NO : *160230*

AGE : *58*

OPTOMETRIST NAME: Ms.Swathi

GENDER: *F*

This is to certify that I have examined

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

	RIGHT EYE				LEFT EYE			
	SPH	CYL	AXIS	BCVA	SPH	CYL	AXIS	BCVA
Distance	<i>0</i>	<i>0</i>	<i>0</i>	<i>6/6</i>	<i>0</i>	<i>0</i>	<i>0</i>	<i>6/6</i>
Add	<i>2.75</i>	<i>0</i>	<i>0</i>	<i>0</i>	<i>2.75</i>	<i>0</i>	<i>0</i>	<i>0</i>

PD - RE: *34* LE: *32* -

Colour Vision: *no macul (BU)*

Remarks:



Apollo clinic Indiranagar

Poonam  
ID: 164230

13.03.2024 10:31:52  
APOLLO CLINIC  
INDIRANAGAR  
BANGALORE

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

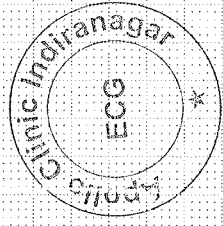
74 bpm  
-- / -- mmHg

10.07.1965  
58 Years  
Female

QRS : 92 ms  
QT / QTcBaz : 392 / 435 ms  
PR : 152 ms  
P : 118 ms  
RR / PP : 808 / 810 ms  
P / QRS / T : 48 / 12 / 33 degrees

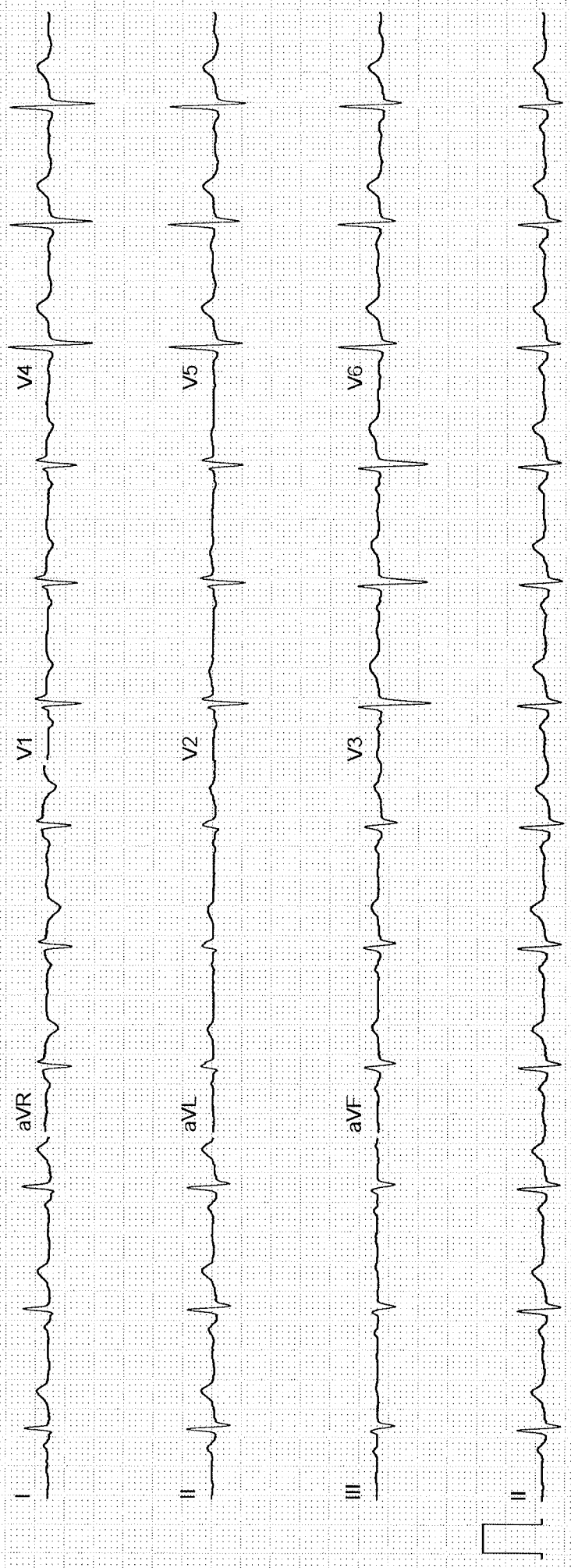
Technician:  
Ordering Ph:  
Referring Ph:  
Attending Ph:

*Dr. M. S.*  
*Dr. S. R.*



*[Signature]*

Dr. M. SUDHAKAR RAO  
MBBS, MD, DM (Cardiol), FACC, FESC, FSCAI  
Consultant Cardiologist  
KMC, Mysore



NAME: MRS POONAM VEERMA	AGE/SEX: 58/F	OP NUMBER: 164230
Ref By : SELF	DATE: 13-03-2024	

**M mode and doppler measurements:**

CM	CM	M/sec	
AO: 2.8	IVS(D): 1.1	MV: E Vel: 0.7	MV: A Vel : 0.5
LA: 3.4	LVIDD(D): 4.8	AV Peak: 1.0	
	LVPW(D): 1.1	PV peak: 0.6	
	IVS(S): 1.5		
	LVID(S): 2.6		
	LVEF: 60%		
	LVPW(S): 1.5		

**Descriptive findings:**

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

IVC:	Normal
Others	---

**IMPRESSION :**

**Normal cardiac chamber and valves**

**No Regional wall motion abnormality**

**MILD MR**

**No clot/vegetation/pericardial effusion**

**Normal LV systolic function - LVEF= 60%**

**DR JAGADEESH H V MD,DM**

**CONSULTANT CARDIOLOGIST**







# Breast Health Report

## Thermalytix<sup>®</sup> 180

Patient ID: CINR\_164230

### General Details

Name:	Poonam Verma	Centre:	Apollo Clinic Indiranagar
Age:	58	Report Generation Date:	Mar 14, 2024, 12:28 PM
Gender:	Female	Scan Date:	Mar 13, 2024, 10:42 AM

### Clinical Details

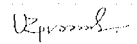
Age at Menopause:	50 years.	Hormone Therapy:	None.
Pregnant/Lactating:	No.	Number of children breast-fed:	2
Patient Complaints:	None		
Cancer History:	No patient cancer history. No family cancer history.		
Surgeries:	None.		

### Thermalytix Scores

Body Temperature:	29.97 °C to 36.08 °C		
Hotspot Score:	0.08	Hotspot Symmetry:	100 %
Areolar Score:	0.02	Areolar Symmetry:	100 %
Vascular Score:	0.2	Ensemble Score:	0.09
B Score:	1		

### Thermal Analysis

Thermal Parameters	Right Breast	Left Breast
Number of Hotspots	0	0
Extent	N/A	N/A
Hotspot Shape	N/A	N/A
Temperature	N/A	N/A
Areolar Hotspot Detected	No	No
Lump Detected	N/A	N/A



DR. H. V. NARAYANASWAMI MBBS, DMRD, JMD  
 Clin. Thermography (ACCT, USA)  
 Imaging Specialist

## Breast Health Report

### Thermalytix<sup>®</sup> 180

Patient ID: CINR\_164230

#### Impression

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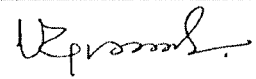
Right Breast      No focal thermal increase is seen. Warm thermal pattern is noted.

Left Breast        No focal thermal increase is seen. Warm thermal pattern is noted.

#### Recommendation

---

Normal Thermal Scan.



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

Write to [support@niramai.com](mailto:support@niramai.com) for detailed report. Additional charges may apply.

## Breast Health Report

### Thermalytix<sup>®</sup> 180

Patient ID: CINR\_164230

#### About Niramai

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##### Indication of Use :

Thermalytix<sup>®</sup> 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<sup>®</sup> should be referred for a confirmatory diagnostic test. Primary diagnostic and patient management decisions are made by a qualified healthcare professional.

##### Intended Use :

Thermalytix<sup>®</sup> 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<sup>®</sup> is an AI-based computer-aided diagnostic engine developed by Niramai that detects breast abnormalities in privacy aware manner.

Thermalytix<sup>®</sup> 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<sup>®</sup> <https://www.niramai.com/about/thermalytix/>

**From:** Customer Care :Mediwheel : New Delhi <customercare@mediwheel.in>  
**Sent:** Wednesday, March 13, 2024 12:18 PM  
**To:** Corporate Apollo Clinic <corporate@apolloclinic.com>  
**Cc:** Wellness : Mediwheel : New Delhi <wellness@mediwheel.in>; Network : Mediwheel : New Delhi <network@mediwheel.in>; deepak <deepak.c@apolloclinic.com>  
**Subject:** Health Check-up Bookings No. 49 (Annual)

Dear Team,

Please find the attached Health Check-up Bookings file and confirm the same.

Thanks & Regards

Arcofemi Health Care Ltd. | F-701 A, Lado Sarai, Mehrauli | New Delhi – 110 030

Ph No. 011-41195959

Email : [customercare@mediwheel.in](mailto:customercare@mediwheel.in); | Web: [www.mediwheel.in](http://www.mediwheel.in)

भारत सरकार  
Government of India

लक्ष्य बन्धु  
Lakshya Bandhu  
जन्म तिथि/DOB: 25/01/1999  
पुरुष/ MALE

Download Date: 05/02/2021

आधार

Issue Date: 22/07/2019

8268 6910

के VID

भारत सरकार  
Government of India

पूजनं वर्मा  
Poonam Verma  
जन्म दिनांक / DOB: 10/07/1965  
स्त्री / FEMALE

Issue Date: 06/03/2013

आधार

7318 9461 0081

मेरा आधार, मेरी पहचान

**Patient Name** : Mrs. Poonam Verma

**Age/Gender** : 58 Y/F

**UHID/MR No.** : CINR.0000164230

**OP Visit No** : CINROPV221897

**Sample Collected on** :

**Reported on** : 13-03-2024 16:54

**LRN#** : RAD2265339

**Specimen** :

**Ref Doctor** : SELF

**Emp/Auth/TPA ID** : 9448596389

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**DEPARTMENT OF RADIOLOGY**

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**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. RAMESH G**  
**MBBS DMRD**  
**RADIOLOGY**

<b>Patient Name</b>	: Mrs. Poonam Verma	<b>Age/Gender</b>	: 58 Y/F
<b>UHID/MR No.</b>	: CINR.0000164230	<b>OP Visit No</b>	: CINROPV221897
<b>Sample Collected on</b>	:	<b>Reported on</b>	: 13-03-2024 15:41
<b>LRN#</b>	: RAD2265339	<b>Specimen</b>	:
<b>Ref Doctor</b>	: SELF		
<b>Emp/Auth/TPA ID</b>	: 9448596389		

## DEPARTMENT OF RADIOLOGY

### ULTRASOUND - WHOLE ABDOMEN

**LIVER:** Appears normal in size, shape and echopattern **minimally 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. No definite calculi identified. No evidence of abnormal wall thickening noted.

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

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

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

Right kidney measuring 9.5 x 3.6 cm.

Left kidney measuring 11.7 x 4.6 cm.

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

**UTERUS & OVARIES:** Atrophic.

No free fluid is seen.

#### IMPRESSION:

**MINIMAL FATTY LIVER.**

**Dr. RAMESH G**  
**MBBS DMRD**  
RADIOLOGY

**Patient Name** : Mrs. Poonam Verma

**Age/Gender** : 58 Y/F

**UHID/MR No.** : CINR.0000164230

**OP Visit No** : CINROPV221897

**Sample Collected on** :

**Reported on** : 13-03-2024 14:17

**LRN#** : RAD2265339

**Specimen** :

**Ref Doctor** : SELF

**Emp/Auth/TPA ID** : 9448596389

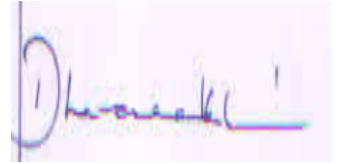
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**DEPARTMENT OF RADIOLOGY**

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**SONO MAMMOGRAPHY - SCREENING**

**THERMAL SONO MAMMOGRAPHY DONE.**



**Dr. DHANALAKSHMI B**  
MBBS, DMRD  
Radiology