


Patient Name	: Mrs.RESHMA BANDAMEEDAPALLI	Collected	: 23/Dec/2023 09:17AM
Age/Gender	: 29 Y 1 M 27 D/F	Received	: 23/Dec/2023 11:20AM
UHID/MR No	: CMYS.0000058986	Reported	: 23/Dec/2023 01:37PM
Visit ID	: CMYSOPV120671	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 609329054507		

DEPARTMENT OF HAEMATOLOGY

PERIPHERAL SMEAR , WHOLE BLOOD EDTA


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

SIN No:BED230318683



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

Test Name	Result	Unit	Bio. Ref. Range	Method
HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	13.7	g/dL	12-15	Spectrophotometer
PCV	42.20	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.75	Million/cu.mm	3.8-4.8	Electrical Impedance
MCV	89	fL	83-101	Calculated
MCH	28.8	pg	27-32	Calculated
MCHC	32.4	g/dL	31.5-34.5	Calculated
R.D.W	11.4	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	6,900	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	58.3	%	40-80	Electrical Impedance
LYMPHOCYTES	30.7	%	20-40	Electrical Impedance
EOSINOPHILS	6.8	%	1-6	Electrical Impedance
MONOCYTES	3.9	%	2-10	Electrical Impedance
BASOPHILS	0.3	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	4022.7	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2118.3	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	469.2	Cells/cu.mm	20-500	Calculated
MONOCYTES	269.1	Cells/cu.mm	200-1000	Calculated
BASOPHILS	20.7	Cells/cu.mm	0-100	Calculated
PLATELET COUNT	216000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	10	mm at the end of 1 hour	0-20	Modified Westergren
PERIPHERAL SMEAR				

R.B.C: Majority are normocytic normochromic.

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



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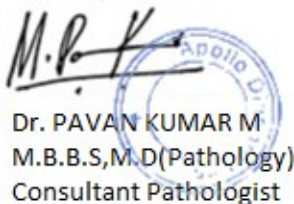
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Platelets: Adequate and are seen in singles and clumps.

Hemoparasites: Not seen.

IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE.



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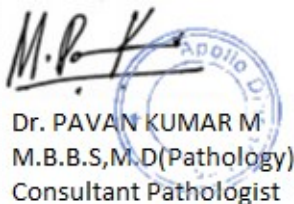


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Test Name	Result	Unit	Bio. Ref. Range	Method
BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA				
BLOOD GROUP TYPE	B			Forward & Reverse Grouping with Slide/Tube Aggluti
Rh TYPE	POSITIVE			Forward & Reverse Grouping with Slide/Tube Agglutination



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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	95	mg/dl	74-106	GOD, POD

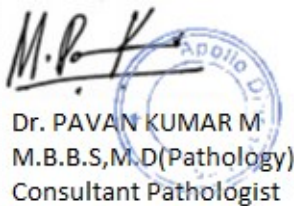
Comment:

As per American Diabetes Guidelines, 2023

Fasting Glucose Values in mg/dL	Interpretation
70-100 mg/dL	Normal
100-125 mg/dL	Prediabetes
≥126 mg/dL	Diabetes
<70 mg/dL	Hypoglycemia

Note:

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



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

SIN No:PLF02078013



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Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	135	mg/dL	70-140	GOD - POD

Comment:

It is recommended that FBS and PPBS should be interpreted with respect to their Biological reference ranges and not with each other. Conditions which may lead to lower postprandial glucose levels as compared to fasting glucose levels may be due to reactive hypoglycemia, dietary meal content, duration or timing of sampling after food digestion and absorption, medications such as insulin preparations, sulfonylureas, amylin analogues, or conditions such as overproduction of insulin.

Test Name	Result	Unit	Bio. Ref. Range	Method
HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA				
HBA1C, GLYCATED HEMOGLOBIN	5.1	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	100	mg/dL		Calculated

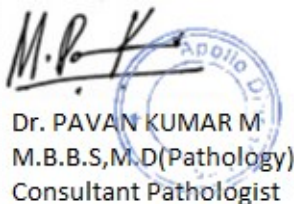
Comment:

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

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

Note: Dietary preparation or fasting is not required.

1. HbA1C is recommended by American Diabetes Association for Diagnosing Diabetes and monitoring Glycemic Control by American Diabetes Association guidelines 2023.



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

SIN No:EDT230117924



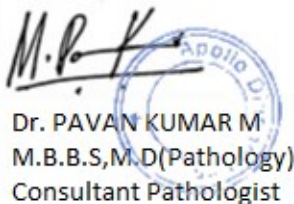
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2. Trends in HbA1C values is a better indicator of Glycemic control than a single test.
3. Low HbA1C in Non-Diabetic patients are associated with Anemia (Iron Deficiency/Hemolytic), Liver Disorders, Chronic Kidney Disease. Clinical Correlation is advised 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)



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Test Name	Result	Unit	Bio. Ref. Range	Method
LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	141	mg/dl	0-200	CHOD
TRIGLYCERIDES	186	mg/dl	0-150	GPO, Trinder
HDL CHOLESTEROL	27	mg/dL	>40	CHE/CHO/POD
NON-HDL CHOLESTEROL	114	mg/dL	<130	Calculated
LDL CHOLESTEROL	76.95	mg/dL	<100	Calculated
VLDL CHOLESTEROL	37.22	mg/dL	<30	Calculated
CHOL / HDL RATIO	5.26		0-4.97	Calculated

Comment:

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

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

- Measurements in the same patient on different days can show physiological and analytical variations.
- NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.
- Primary prevention algorithm now includes absolute risk estimation and lower LDL Cholesterol target levels to determine eligibility of drug therapy.
- 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.
- 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.
- VLDL, LDL Cholesterol Non HDL Cholesterol, CHOL/HDL RATIO, LDL/HDL RATIO are calculated parameters when Triglycerides are below 350mg/dl. When Triglycerides are more than 350 mg/dl LDL cholesterol is a direct measurement.



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Test Name	Result	Unit	Bio. Ref. Range	Method
LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.85	mg/dl	0-1.2	NBD
BILIRUBIN CONJUGATED (DIRECT)	0.23	mg/dl	0-0.2	Diazotized sulfanilic acid
BILIRUBIN (INDIRECT)	0.62	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	21	U/l	0-45	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	20.0	U/l	0-31	IFCC
ALKALINE PHOSPHATASE	79.00	U/l	42-98	IFCC (AMP buffer)
PROTEIN, TOTAL	7.80	g/dl	6.4-8.3	Biuret
ALBUMIN	4.35	g/dl	3.5-5.2	Bromcresol Green
GLOBULIN	3.45	g/dL	2.0-3.5	Calculated
A/G RATIO	1.26		0.9-2.0	Calculated

Comment:

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

Common patterns seen:

1. Hepatocellular Injury:

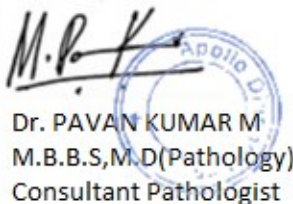
- AST – Elevated levels can be seen. However, it is not specific to liver and can be raised in cardiac and skeletal injuries.
- ALT – Elevated levels indicate hepatocellular damage. It is considered to be most specific lab test for hepatocellular injury. Values also correlate well with increasing BMI.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

2. Cholestatic Pattern:

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

3. Synthetic function impairment:

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


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Test Name	Result	Unit	Bio. Ref. Range	Method
RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	0.73	mg/dL	0.5-1.04	Creatinine amidohydrolase
UREA	23.12	mg/dl	13-43	Urease, UV
BLOOD UREA NITROGEN	10.8	mg/dL	8.0 - 23.0	Calculated
URIC ACID	5.70	mg/dL	2.5-6.2	Uricase
CALCIUM	9.42	mg/dl	8.6-10.3	Arsenazo III
PHOSPHORUS, INORGANIC	2.85	mg/dl	2.7-4.5	Molybdate
SODIUM	143	mmol/L	135-145	Direct ISE
POTASSIUM	4.3	mmol/L	3.5-5.1	Direct ISE
CHLORIDE	101	mmol/L	98 - 107	Direct ISE



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Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	25.00	U/l	0-38	IFCC



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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)	1.22	ng/mL	0.64-1.52	CMIA
THYROXINE (T4, TOTAL)	6.33	µg/dL	4.87-11.72	CMIA
THYROID STIMULATING HORMONE (TSH)	7.990	µIU/mL	0.35-4.94	CMIA

Result is rechecked. Kindly correlate clinically

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



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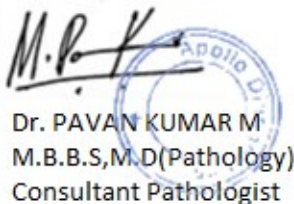


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High	High	High	High	Pituitary Adenoma; TSHoma/Thyrotropinoma
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UHID/MR No : CMYS.0000058986	Reported : 23/Dec/2023 02:23PM
Visit ID : CMYSOPV120671	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 609329054507	

DEPARTMENT OF CLINICAL PATHOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
COMPLETE URINE EXAMINATION (CUE) , URINE				
PHYSICAL EXAMINATION				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pH	7.0		5-7.5	Bromothymol Blue
SP. GRAVITY	1.020		1.002-1.030	Dipstick
BIOCHEMICAL EXAMINATION				
URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE		NEGATIVE	GOD-POD
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	NITROPRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	EHRlich
BLOOD	NEGATIVE		NEGATIVE	Dipstick
NITRITE	NEGATIVE		NEGATIVE	Dipstick
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	PYRROLE HYDROLYSIS
CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY				
PUS CELLS	4 - 5	/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. PAVAN KUMAR M
M.B.B.S,M.D(Pathology)
Consultant Pathologist

SIN No:UR2248262



Patient Name : Mrs.RESHMA BANDAMEEDAPALLI	Collected : 23/Dec/2023 09:17AM
Age/Gender : 29 Y 1 M 27 D/F	Received : 23/Dec/2023 01:31PM
UHID/MR No : CMYS.0000058986	Reported : 23/Dec/2023 01:56PM
Visit ID : CMYSOPV120671	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 609329054507	

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)	NEGATIVE		NEGATIVE	Dipstick

Test Name	Result	Unit	Bio. Ref. Range	Method
URINE GLUCOSE(FASTING)	NEGATIVE		NEGATIVE	Dipstick

*** End Of Report ***



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

SIN No:UF010057



Patient Name	: Mrs. RESHMA BANDAMEEDAPALLI	Age/Gender	: 29 Y/F
UHID/MR No.	: CMYS.0000058986	OP Visit No	: CMYSOPV120671
Sample Collected on	:	Reported on	: 27-12-2023 10:49
LRN#	: RAD2188265	Specimen	:
Ref Doctor	: SELF		
Emp/Auth/TPA ID	: 609329054507		

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

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

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

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

PANCREAS: It is normal.

RIGHT KIDNEY: It measures 95x42mm with parenchymal thickness of 12 mm. It is normal in size, outline and echotexture. No e/o calculus or hydronephrosis seen.

LEFT KIDNEY: It measures 105x43 mm with parenchymal thickness of 12 mm. It is normal in size, outline and echotexture. No e/o calculus or hydronephrosis seen.

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

UTERUS: It is anteverted and measures 65x39x49mm with ET= 11mm. It is normal in size, outline and echotexture. No mass lesion.

Rt. OVARY: It measures 34x32 mm. It is normal. No mass lesion seen.

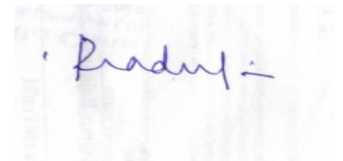
Lt. OVARY: It measures 29x30 mm. It is normal. No mass lesion seen.

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

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

IMPRESSION: NORMAL STUDY.

Pradeep Kumar C N, DNB
Consultant Radiologist.



Dr. PRADEEP KUMAR C N
MBBS DNB(RADIOLOGY)
Radiology

CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

of MYS. RESHMA BANDAMEEDAPAL 23/12/2023

After reviewing the medical history and on clinical examination it has been found that he/she is

	Tick
<ul style="list-style-type: none"> • Medically Fit 	✓
<ul style="list-style-type: none"> • Fit with restrictions/recommendations <p>Though following restrictions have been revealed, in my opinion, these are not impediments to the job.</p> <p>1.....</p> <p>2.....</p> <p>3.....</p> <p>However the employee should follow the advice/medication that has been communicated to him/her.</p> <p>Review after _____</p>	
<ul style="list-style-type: none"> • Currently Unfit. Review after _____ recommended 	
<ul style="list-style-type: none"> • Unfit 	

Dr. *Praveen*
Medical Officer
The Apollo Clinic, Mysore
 Kalidasa Road, Mysore - 02
 Ph: 9821 486518/41

This certificate is not meant for medico-legal purposes

Apollo Health and Lifestyle Limited

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Regd. Office: 110-6/2, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016
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 Koramangala | Sarjapur Road: **Mysore** (VV Mohalla)

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

1860 500 7788

Date : 23-12-2023
MR NO : CMYS.0000058986

Department : GENERAL
Doctor :

Name : Mrs. RESHMA BANDAMEEDAPAL

Registration No :

Age/ Gender : 29 Y / Female

Qualification :

Consultation Timing: 09:12

Height : 1.56	Weight : 55	BMI :	Waist Circum :
Temp :	Pulse :	Resp :	B.P : 110/80

General Examination /
Allergies History

Clinical Diagnosis & Management Plan

Hypothyroid m dx
100 - 125 ug ✓

S.75H
2.9 ✓

mH - 3 to 4 days
2 to 3 m

OIE - breast - MAD.

Adv: regular walk / yoga.
avoid sunbath mod.

mI - 5 yrs. Bil - FND.
11m
Lautaliap

Follow up date :


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

Date : 23-12-2023
MR NO : CMYS.0000058986

Department : GENERAL
Doctor :

Name : Mrs. RESHMA BANDAMEEDAPAL
Age/ Gender : 29 Y / Female

Registration No :
Qualification :

Consultation Timing: 09:12

Height : 156	Weight : 55	BMI :	Waist Circum :
Temp :	Pulse :	Resp :	B.P : 110/80

General Examination /
Allergies History

Clinical Diagnosis & Management Plan

Hypothyroidism — T. Thyronorm
100mg.

Father - DM.

Adv.

↑ - T. Thyronorm
125mg
x 8 wks

Rpt TSH - after 8 wks

Follow up date :

Doctor Signature
Apollo Clinic
23, 1st Floor,
Kalidasa Road, Mysore - 02
Ph : 0821-4006010/41

~~TSH - 7.9.~~

Date : 23-12-2023
MR NO : CMYS.0000058986

Department : GENERAL Dietetics
Doctor : Madhura B.P

Name : Mrs. RESHMA BANDAMEEDAPAL
Age/ Gender : 29 Y / Female

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

Consultation Timing: 09:12

IRW - 53kg

Height : 156	Weight : 55	BMI : 23 kg/m ²	Waist Circum :
Temp :	Pulse :	Resp :	B.P : 110/80

General Examination /
Allergies History

Triglycerides - 186
HDL - 27
VLDL - 37.22
choi/HDL - 5.26
TSH - 7.99

Clinical Diagnosis & Management Plan

KLCO - Hypothyroid

- Advised low fat diet with fiber rich foods.
- Take small frequent meals. Do not skip meals.
- Include all variety of seasonal fruits, vegetables and green leafy vegetables regularly.
- Include nuts like Almonds & walnuts daily.
- Include dry-fruits like dried dates and raisins regularly.
- Include seeds like flax seeds, pumpkin seeds, sunflower seeds, watermelon seeds & sesame seeds - 1 teaspoon each, dry roasted.
- *Avoid cruciferous vegetables like cauliflower, cabbage, Broccoli & spinach and soy products.

Follow up date :

Doctor Signature

Apollo Clinic
#23, 1st Floor, B.P
Kalidasa Road, Mysore - 02
Ph : 0821-4043102/0222

Mrs Reshma

Date : 23-12-2023
MR NO : CMYS.0000058986

Department : GENERAL
Doctor :

Name : Mrs. RESHMA BANDAMEEDAPAL

Registration No :

Age/ Gender : 29 Y / Female

Qualification :

Consultation Timing: 09:12

Height : 156	Weight : 55	BMI :	Waist Circum :
Temp :	Pulse :	Resp :	B.P : 110/80

General Examination /
Allergies History

Clinical Diagnosis & Management Plan

Rt eye

Left eye

Near
vision

6/6

6/6

Distant
vision

6/6

6/6

Corrected with glasses

6/6

6/6

Colour
vision.

(2)

Follow up date :

Apurva Clinic
Doctor Signature
23, 1st Floor
Kalidasa Road, Mysore - 02
Ph : 0821-4000040/41

Date : 23-12-2023
MR NO : CMYS.0000058986

Department : GENERAL
Doctor :

Name : Mrs. RESHMA BANDAMEEDAPAL

Registration No :

Age/ Gender : 29 Y / Female

Qualification :

Consultation Timing: 09:12

Height : 156	Weight : 55	BMI :	Waist Circum :
Temp :	Pulse :	Resp :	B.P : 110/80

General Examination /
Allergies History

Greyish
nasal discharge

Clinical Diagnosis & Management Plan

As -> sinus to (R)
(L) + IT
(R) Ear wax (G)

Ad

- 1) Moxifloxacin 400 mg bid x 1 week
- 2) Fluticasone F7 nasal spray
1 puff three x 1 month.
- 3) T. Belahi 500 mg (5)

Follow up date :

Doctor Signature

[Handwritten Signature]

ID: 58986

MRS RESHMA BANDAMEEDAPALLI

Female 29Years

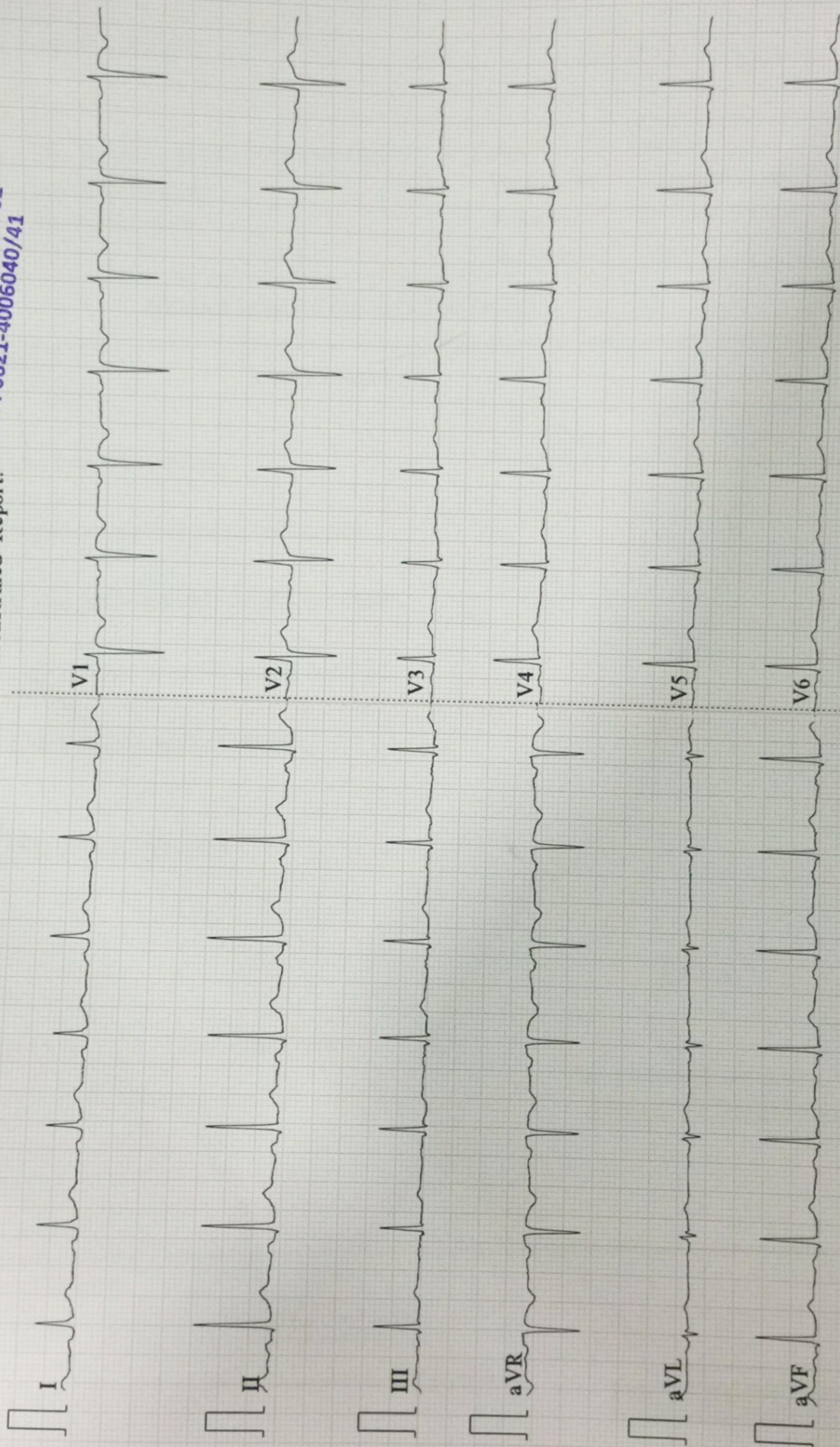
156cm 55kg 110/80 mmHg

23-12-2023 11:59:08 AM

Diagnosis Information:

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

Unconfirmed Report.



Patient Name	: Mrs. RESHMA BANDAMEEDAPALLI	Age	: 29 Y F
UHID	: CMYS.0000058986	OP Visit No	: CMYSOPV120671
Reported on	: 23-12-2023 15:34	Printed on	: 23-12-2023 15:34
Adm/Consult Doctor	:	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.

IMPRESSION :NORMAL STUDY.

Pradeep

Printed on:23-12-2023 15:34

---End of the Report---

Dr. PRADEEP KUMAR C N
MBBS DNB(RADIOLOGY)
Radiology

Apollo Health and Lifestyle Limited

CIN : U65110TG2000PLE115819


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Koramangala | Sarjapur Road | **Mysoore** : VV Mohalla

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

 **1860 500 7788**

Patient Name: Mrs .Reshma Bandameedapalli	Date : 28/12.2023.	Referring Doctor: Dr .Self
Age / Sex: 29 Yrs/Female	UHID NO:58986	Location : OP
ULTRASONOGRAPHY- ABDOMEN & PELVIS		

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

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

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

PANCREAS: It is normal.

RIGHT KIDNEY: It measures 95x42mm with parenchymal thickness of 12 mm. It is normal in size, outline and echotexture. No e/o calculus or hydronephrosis seen.

LEFT KIDNEY: It measures 105x43 mm with parenchymal thickness of 12 mm. It is normal in size, outline and echotexture. No e/o calculus or hydronephrosis seen.

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

UTERUS: It is anteverted and measures 65x39x49mm with ET= 11mm. It is normal in size, outline and echotexture. No mass lesion.

Rt. OVARY: It measures 34x32 mm. It is normal. No mass lesion seen.

Lt. OVARY: It measures 29x30 mm. It is normal. No mass lesion seen.

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

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

IMPRESSION: NORMAL STUDY.

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

Apollo Health and Lifestyle Limited

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Koramangala | Sarjapur Road | Mysore | VV Mohalla

Online appointments: www.apollohi.com

TO BOOK AN APPOINTMENT

1860 500 7788

Patient's Name : Mrs Reshma Bandameedapalli	Age & Sex; 29Yrs /Female
Date : 23.12.2023	UHID No:58986

2D ECHOCARDIOGRAPHY STUDY

Impression:

- Normal chambers and valves
- No regional wall motion abnormality
- Normal left ventricular systolic function. EF 68%
- No clots. No pericardial effusion

Findings

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

Apollo Health and Lifestyle Limited

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 Kuvempu - Varadacharya Road | Mysuru (VV Mohalla)
 Online appointments: www.apollohosp.com

TO BOOK AN APPOINTMENT

1860 500 7788

Patient's Name : Mrs. Reshma Bandameedapalli	Age & Sex; 29Yrs /Female
Date : 23.12.2023	UHID No:58986

Measurements

AO : 2.0 cm
 LA : 1.6 cm

 RV : 1.6 cm
 LVIDd 3.87 cm
 LVIDs : 2.42 cm
 IVSd : 0.67 cm
 IVSs : 0.93 cm
 PWd : 0.88 cm
 PWs : 1.08 cm
 EF : 68.0 %
 FS : 37.0 %

Doppler
 MV TV AV PV
 E 0.69 m/s E --- m/s V max 1.30 m/s V max 0.95 m/s
 :
 A: 0.62 m/s A --- m/s
 MR Nil TR Nil AR Nil PR Nil

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



Dr. GURU PRASAD. B. V
 MBBS, PGDCC (CARDIO)
 CEMM, CRF (DCCPR), PGCC, CCLBDM
 Consultant - Non-Invasive Cardiology
 UHID No: 58986

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 7244 | Email ID: enquiry@apollohl.com | www.apollohl.com

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 Koramangala | Sarjapur Road | Mysore: (VV Mohalla)

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

1860 500 7788

Informed Consent/Declaration For Test Exclusion

Patient Name: Mrs Reshma Age: 29 y/o
UHID Number: 58986

Please tick and sign the relevant part

I certify that I will skip LBC Test from my own.

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

Patient signature Reshma B Date 23/12/23

Witness signature: [Signature] Date: 23/12/23

Patient Name : Mrs. RESHMA BANDAMEEDAPALLI

Age/Gender : 29 Y/F

UHID/MR No. : CMYS.0000058986

OP Visit No : CMYSOPV120671

Sample Collected on :

Reported on : 23-12-2023 15:34

LRN# : RAD2188265

Specimen :

Ref Doctor : SELF

Emp/Auth/TPA ID : 609329054507

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Both lung fields and hila are normal .

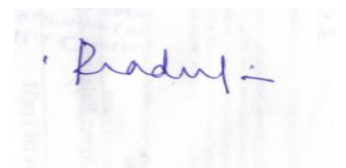
No obvious active pleuro-parenchymal lesion seen .

Both costophrenic and cardiophrenic angles are clear .

Both diaphragms are normal in position and contour .

Thoracic wall and soft tissues appear normal.

IMPRESSION :NORMAL STUDY.



Dr. PRADEEP KUMAR C N
MBBS DNB(RADIOLOGY)
Radiology

Name: Mrs. RESHMA BANDAMEEDAPALLI
Age/Gender: 29 Y/F
Address: MYSORE
Location: MYSORE, KARNATAKA
Doctor:
Department: GENERAL
Rate Plan: MYSORE_06042023
Sponsor: ARCOFEMI HEALTHCARE LIMITED
Consulting Doctor: Dr. SABAH JAVED

MR No: CMYS.0000058986
Visit ID: CMYSOPV120671
Visit Date: 23-12-2023 09:12
Discharge Date:
Referred By: SELF

HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

Chief Complaints

COMPLAINTS:::: **For Annual Health Checkup,**

SYSTEMIC REVIEW

****Weight**

--->: **Stable,**

Number of kgs: **55,**

-=: **156,**

HT-HISTORY

Past Medical History

PAST MEDICAL HISTORY: **Nil Significant,**

Cancer: **NILL,

PHYSICAL EXAMINATION

SYSTEMIC EXAMINATION

IMPRESSION

IMPRESSION

Finding Category : **within normal limits,**

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.,**

Doctor's Signature



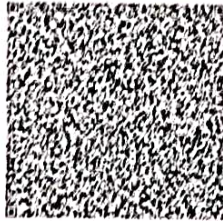
భారత ప్రభుత్వం
Government of India

భారత విశిష్ట గుర్తింపు ప్రాధికార సంస్థ
Unique Identification Authority of India

రిజిస్ట్రేషన్/ Enrolment No.: 2710/03052/15806

To
బండమిదపల్లి రేష్మా
Bandameedapalli Reshma
C/O: Giri Naik M
6-1073-37-A
Bhagya Nagar
Near Thanda Temple
Guntakal
Ananthapuramu Andhra Pradesh - 515801
7893654954

Validity unknown



మీ ఆధార్ సంఖ్య / Your Aadhaar No. :

6093 2905 4507
VID : 9184 5968 3821 0727

నా ఆధార్, నా గుర్తింపు



భారత ప్రభుత్వం
Government of India



బండమిదపల్లి రేష్మా
Bandameedapalli Reshma
వ్యక్తి గణాంకం/DOB: 27/10/1994
FEMALE

Issue Date: 16.03.2012

6093 2905 4507
VID : 9184 5968 3821 0727

నా ఆధార్, నా గుర్తింపు



Government of India



సమాచారం

- ఆధార్ ఒక గుర్తింపు మాత్రమే పౌరసత్వం కాదు.
- సురక్షితమైన క్లౌడర్ కోడ్ / ఆఫ్లైన్ ఎక్స్ ఎం ఎల్ / ఆన్లైన్ ప్రామాణీకరణను ఉపయోగించి గుర్తింపును ధృవీకరించండి.
- ఇది ఎలక్ట్రానిక్ పద్ధతిలో చ్ఛాయబడిన లేఖ.

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- Aadhaar is a proof of identity, not of citizenship.
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- వివిధ ప్రభుత్వ మరియు ప్రభుత్వేతర సేవలను సులువుగా పొందటానికి ఆధార్. మీకు సహాయపడుతుంది.
- ఎల్లప్పుడూ మీ మొబైల్ నెంబర్ మరియు ఇమెయిల్ ఐడిని ఆధార్ లో అప్ డేట్ చేసి ఉంచండి.
- ఎమ్ ఆధార్ ఐన్ ఉపయోగించండి. మీ ఆధార్ ను ఎల్లప్పుడూ మీ స్మార్ట్ ఫోన్ లో ఉంచండి.

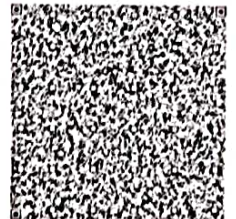
- Aadhaar is valid throughout the country.
- Aadhaar helps you avail various Government and non-Government services easily.
- Keep your mobile number & email ID updated in Aadhaar.
- Carry Aadhaar in your smart phone – use mAadhaar App.



భారత విశిష్ట గుర్తింపు ప్రాధికార సంస్థ
Unique Identification Authority of India



చిరునామా:
సంబంధితము: R0 నాయక్ ఎమ్, 6-1073-37-ఎ, భాగ్య
నగర్, ఆంధ్ర దేవాలయం దగ్గర, గుంతకల్,
అనంతపురము
అంధ్ర ప్రదేశ్ - 515801
Address:
C/O: Giri Naik M, 6-1073-37-A, Bhagya Nagar,
Near Thanda Temple, Guntakal,
Ananthapuramu,
Andhra Pradesh - 515801



6093 2905 4507
VID : 9184 5968 3821 0727

1947 | help@uidai.gov.in | www.uidai.gov.in

Health Check up Booking Request(bobS2821), Beneficiary Code-125209

message

mediwheel <wellness@mediwheel.in>
reshu2710@gmail.com
customercare@mediwheel.in

Fri, 15 Dec, 2023 at 3:28



011-41195959

Dear MS. RESHMA BANDAMEEDAPALLI

We have received your booking request for the following health checkup

Booking Date : 15-12-2023'
User Package Name : Mediwheel Full Body Health Checkup Male Below 40
Hospital Package Name :
Health Check Code : PKG10000366
Name of Diagnostic/Hospital : Apollo clinic - VV Mohalla
Address of Diagnostic/Hospital- : Apollo Clinic, 23, Kalidasa Road, VV Mohalla, Mysore - 570002
Appointment Date : 23-12-2023
Preferred Time : 8:00am-9:00am

Member Information		
Booked Member Name	Age	Gender
Giri Naik M	34 year	Male

We will get back to you with confirmation update shortly. Please find the package details as attached for your reference.

Tests included in this Package

- Bmi Check
- Ent Consultation
- Dietician Consultation
- Thyroid Profile
- ESR
- Blood Glucose (Fasting)
- General Physician Consultation
- TMT OR 2D ECHO
- Blood Group
- Blood Glucose (Post Prandial)
- Chest X-ray
- ECG
- USG Whole Abdomen
- Eye Check-up consultation
- Urine Sugar Fasting
- Urine Sugar PP
- Dental Consultation
- Urine analysis
- CBC
- HbA1c
- Lipid Profile
- Kidney Profile
- Liver profile