


Patient Name	: Mrs.SUDHA H M	Collected	: 23/Dec/2023 10:03AM
Age/Gender	: 47 Y 6 M 22 D/F	Received	: 23/Dec/2023 11:20AM
UHID/MR No	: CMYS.0000058992	Reported	: 23/Dec/2023 01:37PM
Visit ID	: CMYSOPV120678	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 662925176317		

DEPARTMENT OF HAEMATOLOGY

PERIPHERAL SMEAR , WHOLE BLOOD EDTA

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

SIN No:BED230319019



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DEPARTMENT OF HAEMATOLOGY

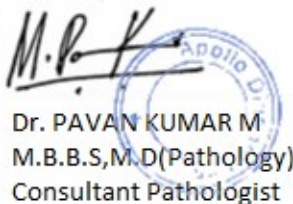
ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>HEMOGRAM , WHOLE BLOOD EDTA</b>				
<b>HAEMOGLOBIN</b>	13.1	g/dL	12-15	Spectrophotometer
PCV	40.00	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.67	Million/cu.mm	3.8-4.8	Electrical Impedance
MCV	86	fL	83-101	Calculated
MCH	28.1	pg	27-32	Calculated
MCHC	32.8	g/dL	31.5-34.5	Calculated
R.D.W	12.5	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	5,100	cells/cu.mm	4000-10000	Electrical Impedance
<b>DIFFERENTIAL LEUCOCYTIC COUNT (DLC)</b>				
NEUTROPHILS	50.4	%	40-80	Electrical Impedance
LYMPHOCYTES	36.1	%	20-40	Electrical Impedance
EOSINOPHILS	2	%	1-6	Electrical Impedance
MONOCYTES	11.1	%	2-10	Electrical Impedance
BASOPHILS	0.4	%	<1-2	Electrical Impedance
<b>ABSOLUTE LEUCOCYTE COUNT</b>				
NEUTROPHILS	2570.4	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	1841.1	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	102	Cells/cu.mm	20-500	Calculated
MONOCYTES	566.1	Cells/cu.mm	200-1000	Calculated
BASOPHILS	20.4	Cells/cu.mm	0-100	Calculated
<b>PLATELET COUNT</b>	282000	cells/cu.mm	150000-410000	Electrical impedance
<b>ERYTHROCYTE SEDIMENTATION RATE (ESR)</b>	16	mm at the end of 1 hour	0-20	Modified Westergren
<b>PERIPHERAL SMEAR</b>				

R.B.C: Majority are normocytic normochromic.

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

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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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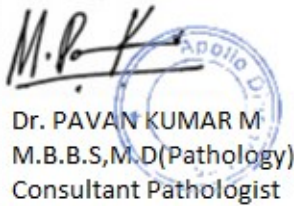


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Test Name	Result	Unit	Bio. Ref. Range	Method
<b>BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA</b>				
BLOOD GROUP TYPE	B			Forward & Reverse Grouping with Slide/Tube Aggluti
Rh TYPE	POSITIVE			Forward & Reverse Grouping with Slide/Tube Agglutination

  
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**DEPARTMENT OF BIOCHEMISTRY**

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

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, FASTING , NAF PLASMA	98	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.



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Patient Name : Mrs.SUDHA H M	Collected : 23/Dec/2023 10:03AM
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ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	163	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
<b>HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA</b>				
HBA1C, GLYCATED HEMOGLOBIN	5.3	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	105	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.



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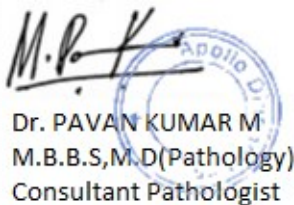


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### ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY2324

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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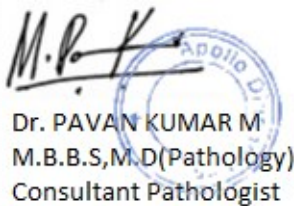
Test Name	Result	Unit	Bio. Ref. Range	Method
<b>LIPID PROFILE , SERUM</b>				
TOTAL CHOLESTEROL	<b>234</b>	mg/dl	0-200	CHOD
TRIGLYCERIDES	<b>199</b>	mg/dl	0-150	GPO, Trinder
HDL CHOLESTEROL	<b>40</b>	mg/dL	>40	CHE/CHO/POD
NON-HDL CHOLESTEROL	<b>194</b>	mg/dL	<130	Calculated
LDL CHOLESTEROL	<b>154.17</b>	mg/dL	<100	Calculated
VLDL CHOLESTEROL	<b>39.86</b>	mg/dL	<30	Calculated
CHOL / HDL RATIO	<b>5.85</b>		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
<b>LIVER FUNCTION TEST (LFT) , SERUM</b>				
BILIRUBIN, TOTAL	0.52	mg/dl	0-1.2	NBD
BILIRUBIN CONJUGATED (DIRECT)	0.13	mg/dl	0-0.2	Diazotized sulfanilic acid
BILIRUBIN (INDIRECT)	0.39	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	22	U/l	0-45	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	20.0	U/l	0-31	IFCC
ALKALINE PHOSPHATASE	92.00	U/l	42-98	IFCC (AMP buffer)
PROTEIN, TOTAL	8.10	g/dl	6.4-8.3	Biuret
ALBUMIN	4.18	g/dl	3.5-5.2	Bromcresol Green
GLOBULIN	<b>3.92</b>	g/dL	2.0-3.5	Calculated
A/G RATIO	1.07		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:**

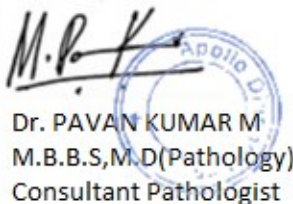
- AST – Elevated levels can be seen. However, it is not specific to liver and can be raised in cardiac and skeletal injuries.
- ALT – Elevated levels indicate hepatocellular damage. It is considered to be most specific lab test for hepatocellular injury. Values also correlate well with increasing BMI.
- 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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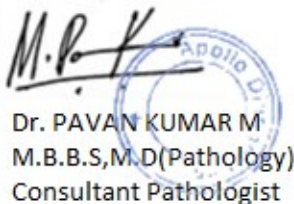


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- Albumin- Liver disease reduces albumin levels.
- Correlation with PT (Prothrombin Time) helps.



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Test Name	Result	Unit	Bio. Ref. Range	Method
<b>RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM</b>				
CREATININE	0.70	mg/dL	0.5-1.04	Creatinine amidohydrolase
UREA	20.71	mg/dl	13-43	Urease, UV
BLOOD UREA NITROGEN	9.7	mg/dL	8.0 - 23.0	Calculated
URIC ACID	5.70	mg/dL	2.5-6.2	Uricase
CALCIUM	9.71	mg/dl	8.6-10.3	Arsenazo III
PHOSPHORUS, INORGANIC	3.42	mg/dl	2.7-4.5	Molybdate
SODIUM	142	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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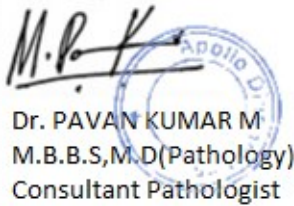


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Test Name	Result	Unit	Bio. Ref. Range	Method
<b>GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM</b>	25.00	U/l	0-38	IFCC



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DEPARTMENT OF IMMUNOLOGY

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

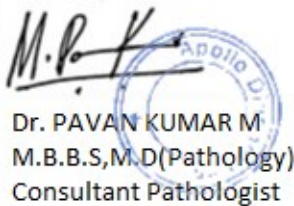
Test Name	Result	Unit	Bio. Ref. Range	Method
<b>THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM</b>				
TRI-IODOTHYRONINE (T3, TOTAL)	1.0	ng/mL	0.64-1.52	CMIA
THYROXINE (T4, TOTAL)	9.13	µg/dL	4.87-11.72	CMIA
THYROID STIMULATING HORMONE (TSH)	1.220	µIU/mL	0.35-4.94	CMIA

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

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

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



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Age/Gender	: 47 Y 6 M 22 D/F	Received	: 23/Dec/2023 11:12AM
UHID/MR No	: CMYS.0000058992	Reported	: 23/Dec/2023 12:34PM
Visit ID	: CMYSOPV120678	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 662925176317		

DEPARTMENT OF IMMUNOLOGY

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

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

SIN No:SPL23189281



Patient Name : Mrs.SUDHA H M	Collected : 23/Dec/2023 10:03AM
Age/Gender : 47 Y 6 M 22 D/F	Received : 23/Dec/2023 01:35PM
UHID/MR No : CMYS.0000058992	Reported : 23/Dec/2023 02:25PM
Visit ID : CMYSOPV120678	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 662925176317	

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	6.0		5-7.5	Bromothymol Blue
SP. GRAVITY	1.010		1.002-1.030	Dipstick
<b>BIOCHEMICAL EXAMINATION</b>				
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
<b>CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY</b>				
PUS CELLS	3 - 4	/hpf	0-5	Microscopy
EPITHELIAL CELLS	2 - 3	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY



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

SIN No:UR2248571





Patient Name : Mrs.SUDHA H M	Collected : 23/Dec/2023 10:03AM
Age/Gender : 47 Y 6 M 22 D/F	Received : 23/Dec/2023 01:31PM
UHID/MR No : CMYS.0000058992	Reported : 23/Dec/2023 01:56PM
Visit ID : CMYSOPV120678	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 662925176317	

**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

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:UF010073



**Informed Consent/Declaration For Test Exclusion**

Patient Name: Ms Sudha.H.M Age: 47 / F

UHID Number: 58992

Please tick and sign the relevant part

I certify that I will skip LBC pap smear + Diet Test from my own.

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

Patient signature Sudha H.M Date 23/12/2023

Witness signature: [Signature] Date: 23/12/2023

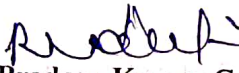
Patient Name: Mrs Sudha H M	Date : 23.12.2023	Referring Doctor: Dr .Self
Age / Sex: 47Yrs/Female	UHID NO:58992	Location : OP
<b>ULTRASONOGRAPHY- BREAST</b>		

**RIGHT BREAST:** It is normal in echopattern. No e/o focal nodular or mass lesions seen. No e/o calcifications. The skin over the breast is normal. Nipple and areola are normal. The subcutaneous, mammary and retro mammary zones are normal.

**LEFT BREAST:** It is normal in echopattern. No e/o focal nodular or mass lesions seen. No e/o calcifications. The skin over the breast is normal. Nipple and areola are normal. The subcutaneous, mammary and retro mammary zones are normal.

No e/o axillary lymphadenopathy.

**IMPRESSION: NORMAL STUDY.**

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

Date : 23-12-2023  
MR NO : CMYS.0000058992  
Name : Mrs. SUDHA H M  
Age/ Gender : 47 Y / Female

Department : GENERAL  
Doctor :  
Registration No :  
Qualification :

Consultation Timing: 09:27

Height : 150	Weight : 58.4	BMI :	Waist Circum :
Temp :	Pulse :	Resp :	B.P : 130/80

General Examination /  
Allergies History

Clinical Diagnosis & Management Plan

Come for regular health checkup  
Chest X-ray (PA view) - normal  
USG Abdomen & Pelvis - Fatty Liver  
Blood Cur -  
PPBS - 163 TC - 234, TG - 199  
Bone RE - normal  
USG Breast - normal  
ADH  
life style modification

Follow up date :

Apollo Clinic  
# 23, 1st Floor,  
Kalidasa Road, Mysore - 02  
Ph : 0821-480004/41  
Doctor Signature

P



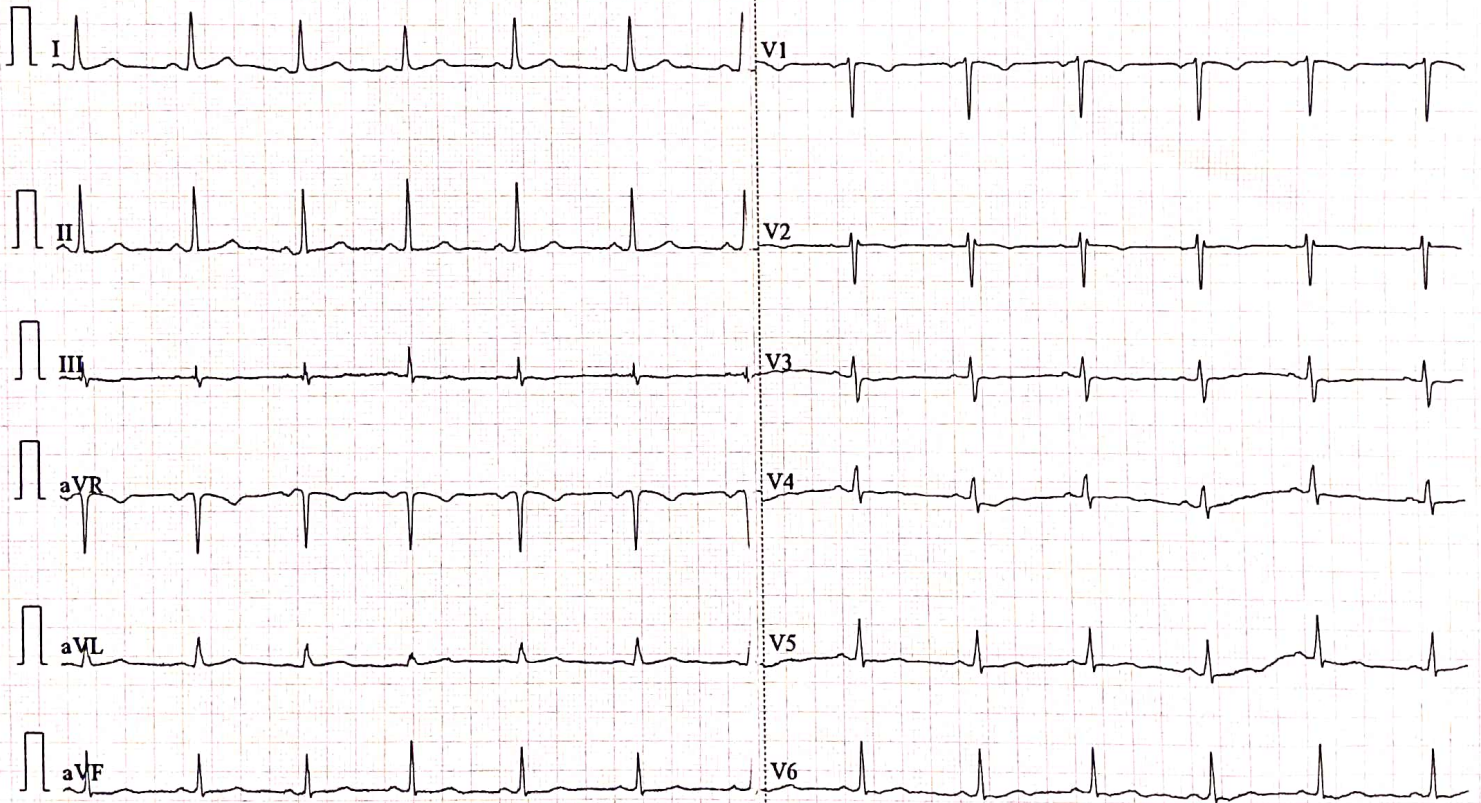
ID: 58992  
MRS SUDHA H M  
Female 47Years  
150cm 58kg 130/80 mmHg

23-12-2023 11:23:03 AM

Diagnosis Information:

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

Unconfirmed Report.



Patient Name: Mrs Sudha H M	Date : 23.12.2023	Referring Doctor: Dr .Self
Age / Sex: 47Yrs/Female	UHID NO:58992	Location : OP
<b>ULTRASONOGRAPHY- ABDOMEN &amp; PELVIS</b>		

**Liver:** it is increased in size(16.7 cm) 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 97x36 mm with parenchymal thickness of 11mm. It is normal in size, outline and echotexture. No e/o calculus or hydronephrosis seen.

**LEFT KIDNEY:** It measures 105x47 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 & OVARIES:** Post surgical status.

**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: FATTY LIVER.**

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

Date : 23-12-2023  
 MR NO : CMYS.0000058992  
 Name : Mrs. SUDHA H M  
 Age/ Gender : 47 Y / Female

Department : GENERAL  
 Doctor :  
 Registration No :  
 Qualification :

Dr. Sudha H M, M.D. 23/12/23

Consultation Timing: 09:27

Height : 150	Weight : 58.4	BMI :	Waist Circum :
Temp :	Pulse :	Resp :	B.P : 130/80

General Examination /  
Allergies History

Clinical Diagnosis & Management Plan

ml → 2 brns. Bil, I - FND 2501m  
AVH

Hystereclomy → 5 to 6 yrs.

PH → NS  
 AH - DM +

sonammogram - renal slides, wsh - fatty liver

Adv : - TAB. DICALIS 0-1-0 (30) x 6M

- regular walk / yoga  
 - avoid sunbath

Follow up date :

**Apollo Clinic**  
 # 23, 1st Floor,  
 Kalidasa Road, Mysore - 02  
 Ph : 082 2666040/41  
 Doctor Signature



Mrs Sudha. H-M

Date : 23-12-2023  
MR NO : CMYS.0000058992  
Name : Mrs. SUDHA H M  
Age/ Gender : 47 Y / Female

Department : GENERAL  
Doctor :  
Registration No :  
Qualification :

Consultation Timing: 09:27

Height : 150	Weight : 58.4	BMI :	Waist Circum :
Temp :	Pulse :	Resp :	B.P : 130/80

General Examination /  
Allergies History

Clinical Diagnosis & Management Plan

Near  
vision

R eye

L eye

N/18

N/24

Distant  
vision

6/12

6/24.

Colour  
vision.

(N)

(N)

Follow up date :

**Apollo Clinic**  
Katharasi, 1st Floor,  
Mysore - 02  
Ph : 0821-4006040/41  
Doctor Signature



## CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

of Mrs. Sudha . H. M on 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"> <li>• Medically Fit</li> </ul>	✓
<ul style="list-style-type: none"> <li>• Fit with restrictions/recommendations</li> </ul> <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"> <li>• Currently Unfit. Review after _____ recommended</li> </ul>	
<ul style="list-style-type: none"> <li>• Unfit</li> </ul>	

Dr. Naveen  
**Apollo Clinic**  
 Medical Officer  
 1st Floor,  
 The Apollo Clinic, Mysore.  
 PH : 0821-4006040/41

Patient Name	: Mrs. SUDHA H M	Age	: 47 Y F
UHID	: CMYS.0000058992	OP Visit No	: CMYSOPV120678
Reported on	: 23-12-2023 15:56	Printed on	: 23-12-2023 15:56
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 15:56

---End of the Report---

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

Radiology

**Apollo Health and Lifestyle Limited**

CIN: URS1107G2000PLC115819

Head Office: 1-10-82-82, Anukula Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016

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

**APOLLO CLINICS NETWORK KARNATAKA**

Bangalore | Sarvaanagudi | Bellandur | Electronic City | Fraser Town | HSR Layout | Indra Nagar | JP Nagar | Kundalahalli |

Koramangala | Sarajpet Road | Mysore (TV Mohalla)

Online appointments: [www.apolloclinic.com](http://www.apolloclinic.com)

TO BOOK AN APPOINTMENT

 **1860 500 7788**

Date : 23-12-2023  
MR NO : CMYS.0000058992  
Name : Mrs. SUDHA H M  
Age/ Gender : 47 Y / Female

Department : GENERAL  
Doctor :  
Registration No :  
Qualification :

Consultation Timing: 09:27

Height : 150	Weight : 58.4	BMI :	Waist Circum :
Temp :	Pulse :	Resp :	B.P : 130/80

General Examination /  
Allergies History

Tinnitus @  
Hard of hearing

Clinical Diagnosis & Management Plan

of ot. Ear canal - normal.  
tm

Nose - NAD.  
throat -

Ad

Pure Tone Audiometry

Follow up date :

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

Patient's Name : Mrs. Sudha H M	Age & Sex; 47Yrs /Female
Date : 23.12.2023	UHID No:58992

## 2D ECHOCARDIOGRAPHY STUDY

### Impression:

- Normal chambers and valves
- No regional wall motion abnormality
- Normal left ventricular systolic function. EF 66 %
- 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

REGD. OFFICE: 1107, 2/3, K.P.L.C. 115819

REGD. OFFICE: 1107, 2/3, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016  
Ph. No. 041 4 494 7777 | Fax No. 4904 7744 | E-mail ID: enquiry@apollohl.com | www.apollohl.com

### APOLLO CLINICS NETWORK KARNATAKA

Bangalore: Sakavahagudi | Bellandur | Electronic City | Fraser Town | HSR Layout | Indra Nagar | JP Nagar | Kundalahalli |  
Karamangala | Sarjapur Road | Mysore (VV Mahalla)

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

 **1860 500 7788**



**Patient Name** : Mrs. SUDHA H M

**Age/Gender** : 47 Y/F

**UHID/MR No.** : CMYS.0000058992

**OP Visit No** : CMYSOPV120678

**Sample Collected on** :

**Reported on** : 27-12-2023 12:08

**LRN#** : RAD2188398

**Specimen** :

**Ref Doctor** : SELF

**Emp/Auth/TPA ID** : 662925176317

---

**DEPARTMENT OF RADIOLOGY**

---

**SONO MAMMOGRAPHY - SCREENING**

**RIGHT BREAST:** It is normal in echopattern. No e/o focal nodular or mass lesions seen. No e/o calcifications. The skin over the breast is normal. Nipple and areola are normal. The subcutaneous, mammary and retro mammary zones are normal.

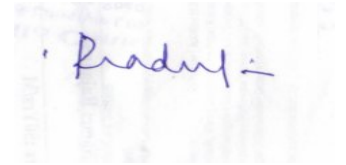
**LEFT BREAST:** It is normal in echopattern. No e/o focal nodular or mass lesions seen. No e/o calcifications. The skin over the breast is normal. Nipple and areola are normal. The subcutaneous, mammary and retro mammary zones are normal.

No e/o axillary lymphadenopathy.

**IMPRESSION:** NORMAL STUDY.

Dr. Pradeep Kumar C N, DNB.

Consultant Radiologist.



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

**Patient Name** : Mrs. SUDHA H M

**Age/Gender** : 47 Y/F

**UHID/MR No.** : CMYS.0000058992

**OP Visit No** : CMYSOPV120678

**Sample Collected on** :

**Reported on** : 27-12-2023 11:47

**LRN#** : RAD2188398

**Specimen** :

**Ref Doctor** : SELF

**Emp/Auth/TPA ID** : 662925176317

## DEPARTMENT OF RADIOLOGY

### ULTRASOUND - WHOLE ABDOMEN

**Liver:** it is increased in size(16.7 cm) 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 97x36 mm with parenchymal thickness of 11mm. It is normal in size, outline and echotexture. No e/o calculus or hydronephrosis seen.

**LEFT KIDNEY:** It measures 105x47 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.

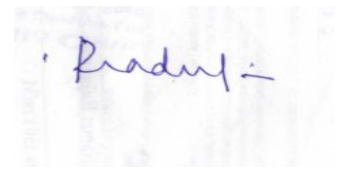
**UTERUS & OVARIES:** Post surgical status.

**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:** FATTY LIVER.

Pradeep Kumar C N, DNB  
Consultant Radiologist.



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

**Patient Name** : Mrs. SUDHA H M

**Age/Gender** : 47 Y/F

**UHID/MR No.** : CMYS.0000058992

**OP Visit No** : CMYSOPV120678

**Sample Collected on** :

**Reported on** : 23-12-2023 15:56

**LRN#** : RAD2188398

**Specimen** :

**Ref Doctor** : SELF

**Emp/Auth/TPA ID** : 662925176317

---

**DEPARTMENT OF RADIOLOGY**

---

**X-RAY CHEST PA**

Both lung fields and hila are normal .

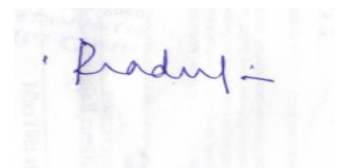
No obvious active pleuro-parenchymal lesion seen .

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. SUDHA H M  
Age/Gender: 48 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.0000058992  
Visit ID: CMYSOPV120678  
Visit Date: 23-12-2023 09:27  
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: 58.4,

## **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



**Bill Of Supply**



Name : Mrs. SUDHA H M  
Age/Gender : 47 Y F  
Contact No : +919008373832  
Address : MYSORE  
UHID : CMYS.0000058992  
Corporate Name : ARCOFEMI HEALTHCARE LIMITED  
Plan : ARCOFEMI MEDIWHEEL FEMALE AHC CREDIT PAN INDIA OP AGREEMENT

Bill No : CMYS-OCR-21971  
Bill/Reg Date : 23.12.2023 09:28  
Referred by : SELF  
Center : Mysore  
Emp No/Auth Code : 662925176317

#	Department	Description Of Service	SAC/HSN Code	Qty	Rate	Gross Value	Discount	CGST Rate	CGST Amt	SGST/UTGST Rate	SGST/UTGST Amt	Net Value
1	Package Charges	ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY2324	999312	1	2,600.00	2,600.00	0.00	0.00	0.00	0.00	0.00	2,600.00

**Bill Amount:** 2,600.00  
**Total Discount:** 0.00  
**Patient Payment:** 0.00  
**Corporate Due:** 2,600.00  
**Patient Due:** 0.00

Received with thanks: Zero Rupees only

Authorized Signature : (Nikhitha R)

You can download your report from "www.apolloclinic.com" Enter user name as CMYSOPV120678 and password as 881059

Please log on to AskApollo.com for booking Appointments

**Apollo Health and Lifestyle Limited**

(CIN : UR5110TC0000PLC115819)

Regd. Office: #7-1-617/A, 615 & 616, Imperial Towers, 7th Floor, Amierpet, Hyderabad 500036, Telangana. |

www.apolloh.com | Email ID: enquiry@apolloh.com | Ph No: (040) 4904 7777, Fax No: 4904 7744

**APOLLO CLINIC'S NETWORK**

Telangana: Hyderabad | A.P. Dev Nagar | Chamba Nagar | Kumbhgar | Madhavaram | Nizamgar | Manikonda | Uppal | Andhra Pradesh: Vijay  
Sreebhama Peta | Karimnagar | Bangalore: Basavanaguda | Bellandur | Electronics City | HSR Layout | Indra Nagar | JP Nagar | Kundalahalli |  
Kumarangala | Sangam Reddy | Mysore: SW Mittal | Tarambashi | Chennai: Arambagar | Kotturam | T. Nagar | Valambakkam | Veda Vey  
Maharashtra: Pune (Aundh) | Nigdi (Aundh) | Viman Nagar | Wanowrie | Kharadi | Uttar Pradesh: Ghazabad (Indrapuram)

Online appointments: www.apolloh.com

GSTIN: 29AADCA0733E1Z3

**Address:**

22, 23, 24, 25, 101-3, Sree Rama Layout,  
BNR Complex, OIT'RB Layout, JP Nagar  
7th Phase, Bengaluru, Karnataka

**1860 500 7788**



ಭಾರತ ಸರ್ಕಾರ  
Government of India



ಸುಧಾ.ಹೆಚ್.ಎಂ  
Sudha.H.M  
ಜನ್ಮ ದಿನಾಂಕ/DOB: 01/06/1976  
♀ FEMALE

Issue Date: 05/10/2019

6629 2517 6317

VID : 0122 1213 0078 5810

ನನ್ನ ಆಧಾರ್. ನನ್ನ ಸುರುತು

Download Date: 18/01/2020



ಭಾರತೀಯ ಏಕೈಕ ಗುರುತಿಸುವ್ಯವಸ್ಥೆ  
Unique Identification Authority of India



ವಿವರ:  
W/O ಲೇಟ್ ಸೋಮಣ್ಣ, #226, ವಾರುಣಾ ಹೊಬಲಿ  
ವಾರುಣಾ ಪೋಸ್ಟ್, ಚೊರಾನಹಳ್ಳಿ, ಮೈಸೂರು,  
ಕರ್ನಾಟಕ - 570010



Address:  
W/O Late Somanna, #226, Varuna Hobali  
Varuna Post, Choranahalli, Mysore,  
Karnataka - 570010

6629 2517 6317

VID : 0122 1213 0078 5810

1847

help@uidai.gov.in

www.uidai.gov.in

Health Check up Booking Confirmed Request(bobE2857),Package Code-PKG10000376,  
Beneficiary Code-302923

Mediwheel <wellness@mediwheel.in>

Thu 12/21/2023 1:39 PM

To Koppa, Mandya Region <VJMAN@bankofbaroda.com>

Cc customercare@mediwheel.in <customercare@mediwheel.in>

You don't often get email from wellness@mediwheel.in. [Learn why this is important](#)

ई डोमेन के बाहर से आया है. अगर आप प्रेषक को नहीं जानते तो मेल में दी गयी लिंक पर क्लिक ना करें या अचेतम  
MAIL IS ORIGINATED FROM OUTSIDE OF THE BANK'S DOMAIN. DO NOT CLICK ON LINKS OR C

011-41195959

Dear **MS. M SUDHA H.**

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

**Booking Date** : 16-12-2023  
**Hospital Package Name** : Mediwheel Full Body Annual Plus Check Advanced - Female  
**Patient Package Name** : Mediwheel Full Body Health Checkup Female Above 40  
**Name of Diagnostic/Hospital** : Apollo Clinic  
**Address of Diagnostic/Hospital-** : Apollo Clinic, 23, Kalidasa Road, VV Mohalla, Mysore - 570002  
**City** : Mysore  
**State** :  
**Pincode** : 570002  
**Appointment Date** : 23-12-2023  
**Confirmation Status** : Booking Confirmed  
**Preferred Time** : 8:00am-9:00am  
**Booking Status** : Booking Confirmed

Member Information		
Booked Member Name	Age	Gender
MS. M SUDHA H	47 year	Female

Note - Please note to not pay any amount.

**Instructions to undergo Health Check:**

- Please ensure you are on complete fasting for 10-To-12-Hours prior to check.
- During fasting time do not take any kind of medication, alcohol, cigarettes, tobacco or any other liquids (except Water) in the morning.
- Bring urine sample in a container if possible (containers are available at the Health Check centre).
- Please bring all your medical prescriptions and previous health medical records with you.
- Kindly inform the health check reception in case if you have a history of diabetes and cardiac problems.

**For Women:**