

Patient Name : Mrs.KASTHURIBAI	Collected : 09/Mar/2024 09:16AM
Age/Gender : 53 Y 1 M 12 D/F	Received : 09/Mar/2024 09:55AM
UHID/MR No : SALW.0000138283	Reported : 09/Mar/2024 02:37PM
Visit ID : SALWOPV208076	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 53982..	

DEPARTMENT OF HAEMATOLOGY

PERIPHERAL SMEAR , WHOLE BLOOD EDTA

METHODOLOGY: MICROSCOPIC


RBC : Normocytic Normochromic to microcytic hypochromic RBCS.

WBC : Normal in count and distribution. No abnormal cells seen..

PLATELET : Adequate on smear.

PARASITES : No haemoparasites seen.

COMMENTS : Kindly correlate clinically.


DR. CHIDAMBHARAM C
M.D., D.N.B.
CONSULTANT PATHOLOGIST
SIN No:BED240062801

Page 1 of 14



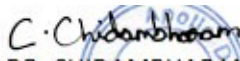
Patient Name : Mrs.KASTHURIBAI	Collected : 09/Mar/2024 09:16AM
Age/Gender : 53 Y 1 M 12 D/F	Received : 09/Mar/2024 09:55AM
UHID/MR No : SALW.0000138283	Reported : 09/Mar/2024 02:37PM
Visit ID : SALWOPV208076	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 53982..	

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
HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	10.9	g/dL	12-15	Spectrophotometer
PCV	36.00	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.43	Million/cu.mm	3.8-4.8	Electrical Impedance
MCV	81	fL	83-101	Calculated
MCH	24.6	pg	27-32	Calculated
MCHC	30.3	g/dL	31.5-34.5	Calculated
R.D.W	14	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	9,900	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	71	%	40-80	Electrical Impedance
LYMPHOCYTES	24	%	20-40	Electrical Impedance
EOSINOPHILS	02	%	1-6	Electrical Impedance
MONOCYTES	03	%	2-10	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	7029	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2376	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	198	Cells/cu.mm	20-500	Calculated
MONOCYTES	297	Cells/cu.mm	200-1000	Calculated
Neutrophil lymphocyte ratio (NLR)	2.96		0.78- 3.53	Calculated
PLATELET COUNT	329000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	42	mm at the end of 1 hour	0-20	Modified Westergren
PERIPHERAL SMEAR				
..				

Page 2 of 14


DR. CHIDAMBHARAM C
M.D., D.N.B.
CONSULTANT PATHOLOGIST

SIN No:BED240062801



Patient Name : Mrs.KASTHURIBAI	Collected : 09/Mar/2024 09:16AM
Age/Gender : 53 Y 1 M 12 D/F	Received : 09/Mar/2024 12:03PM
UHID/MR No : SALW.0000138283	Reported : 09/Mar/2024 03:49PM
Visit ID : SALWOPV208076	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 53982..	

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
BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA				
BLOOD GROUP TYPE	A			Microplate Hemagglutination
Rh TYPE	Positive			Microplate Hemagglutination

PLEASE NOTE THIS SAMPLE HAS BEEN TESTED ONLY FOR ABO MAJOR GROUPING AND ANTI D ONLY



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

SIN No:HA06616258

This test has been performed at Apollo Health and Lifestyle Ltd - Chennai, Diagnostics Laboratory.



Patient Name : Mrs.KASTHURIBAI	Collected : 09/Mar/2024 11:54AM
Age/Gender : 53 Y 1 M 12 D/F	Received : 09/Mar/2024 03:44PM
UHID/MR No : SALW.0000138283	Reported : 09/Mar/2024 08:27PM
Visit ID : SALWOPV208076	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 53982..	

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	136	mg/dL	70-100	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:

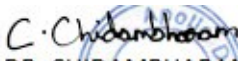
- The diagnosis of Diabetes requires a fasting plasma glucose of $> \text{ or } = 126 \text{ mg/dL}$ and/or a random / 2 hr post glucose value of $> \text{ or } = 200 \text{ mg/dL}$ on at least 2 occasions.
- Very high glucose levels ($>450 \text{ mg/dL}$ in adults) may result in Diabetic Ketoacidosis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

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	190	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.


DR. CHIDAMBHARAM C
M.D., D.N.B.
CONSULTANT PATHOLOGIST

SIN No:PLP1428949



Patient Name : Mrs.KASTHURIBAI	Collected : 09/Mar/2024 09:16AM
Age/Gender : 53 Y 1 M 12 D/F	Received : 09/Mar/2024 04:58PM
UHID/MR No : SALW.0000138283	Reported : 09/Mar/2024 07:26PM
Visit ID : SALWOPV208076	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 53982..	

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
HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA				
HBA1C, GLYCATED HEMOGLOBIN	7.3	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	163	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.

- 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)

Page 5 of 14



DR.R.SRIVATSAN
M.D.(Biochemistry)



SIN No:EDT240028533

This test has been performed at Apollo Health and Lifestyle Ltd - Chennai, Diagnostics Laboratory.

Patient Name : Mrs.KASTHURIBAI	Collected : 09/Mar/2024 09:16AM
Age/Gender : 53 Y 1 M 12 D/F	Received : 09/Mar/2024 02:43PM
UHID/MR No : SALW.0000138283	Reported : 09/Mar/2024 02:46PM
Visit ID : SALWOPV208076	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 53982..	

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
LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	113	mg/dL	<200	CHE/CHO/POD
TRIGLYCERIDES	132	mg/dL	<150	
HDL CHOLESTEROL	46	mg/dL	>40	CHE/CHO/POD
NON-HDL CHOLESTEROL	67	mg/dL	<130	Calculated
LDL CHOLESTEROL	40.6	mg/dL	<100	Calculated
VLDL CHOLESTEROL	26.4	mg/dL	<30	Calculated
CHOL / HDL RATIO	2.46		0-4.97	Calculated

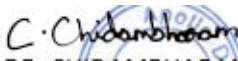
Comment:

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

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

Page 6 of 14


DR. CHIDAMBHARAM C
M.D., D.N.B.
CONSULTANT PATHOLOGIST

SIN No:SE04655364




Patient Name : Mrs.KASTHURIBAI
Age/Gender : 53 Y 1 M 12 D/F
UHID/MR No : SALW.0000138283
Visit ID : SALWOPV208076
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : 53982..

Collected : 09/Mar/2024 09:16AM
Received : 09/Mar/2024 02:43PM
Reported : 09/Mar/2024 02:46PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

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


DR. CHIDAMBHARAM C
M.D., D.N.B.
CONSULTANT PATHOLOGIST
SIN No:SE04655364

Page 7 of 14



Patient Name : Mrs.KASTHURIBAI	Collected : 09/Mar/2024 09:16AM
Age/Gender : 53 Y 1 M 12 D/F	Received : 09/Mar/2024 02:43PM
UHID/MR No : SALW.0000138283	Reported : 09/Mar/2024 03:41PM
Visit ID : SALWOPV208076	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 53982..	

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
LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.60	mg/dL	0.1-1.2	Azobilirubin
BILIRUBIN CONJUGATED (DIRECT)	0.10	mg/dL	0.1-0.4	DIAZO DYE
BILIRUBIN (INDIRECT)	0.50	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	16	U/L	4-44	JSCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	16.0	U/L	8-38	JSCC
ALKALINE PHOSPHATASE	84.00	U/L	32-111	IFCC
PROTEIN, TOTAL	7.30	g/dL	6.7-8.3	BIURET
ALBUMIN	4.40	g/dL	3.8-5.0	BROMOCRESOL GREEN
GLOBULIN	2.90	g/dL	2.0-3.5	Calculated
A/G RATIO	1.52		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.


DR. CHIDAMBHARAM C
M.D., D.N.B.
CONSULTANT PATHOLOGIST

SIN No:SE04655364



Patient Name : Mrs.KASTHURIBAI	Collected : 09/Mar/2024 09:16AM
Age/Gender : 53 Y 1 M 12 D/F	Received : 10/Mar/2024 12:35AM
UHID/MR No : SALW.0000138283	Reported : 10/Mar/2024 07:16AM
Visit ID : SALWOPV208076	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 53982..	

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
RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	0.72	mg/dL	0.72 – 1.18	JAFFE METHOD
UREA	27.00	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	12.6	mg/dL	8.0 - 23.0	Calculated
URIC ACID	5.40	mg/dL	2.6-6.0	Uricase PAP
CALCIUM	8.90	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	4.10	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	135	mmol/L	136–146	ISE (Indirect)
POTASSIUM	5.0	mmol/L	3.5–5.1	ISE (Indirect)
CHLORIDE	102	mmol/L	101–109	ISE (Indirect)
PROTEIN, TOTAL	7.30	g/dL	6.6-8.3	Biuret
ALBUMIN	3.90	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.40	g/dL	2.0-3.5	Calculated
A/G RATIO	1.15		0.9-2.0	Calculated

Result is rechecked. Kindly correlate clinically

Page 9 of 14



DR.R.SRIVATSAN
M.D.(Biochemistry)



SIN No:BI18712019

This test has been performed at Apollo Health and Lifestyle Ltd - Chennai, Diagnostics Laboratory.

APOLLO SPECIALTY HOSPITALS PRIVATE LIMITED

(Formerly Known as Nova Specialty Hospitals Private Limited)

CIN : U85100TG2009PTC099414

Registered Office:No.7-1-617A,615&616, Imperial Towers, 7th Floor, Opp.Ameerpet Metro Station Ameerpet, Hyderabad, Telangana-500 038.


BENGALURU | CHENNAI | DELHI | JAIPUR | KANPUR | MUMBAI | PUNE

Patient Name : Mrs.KASTHURIBAI	Collected : 09/Mar/2024 09:16AM
Age/Gender : 53 Y 1 M 12 D/F	Received : 09/Mar/2024 02:43PM
UHID/MR No : SALW.0000138283	Reported : 09/Mar/2024 03:41PM
Visit ID : SALWOPV208076	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 53982..	

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
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	20.00	U/L	16-73	Glycylglycine Kinetic method


DR. CHIDAMBHARAM C
M.D., D.N.B.
CONSULTANT PATHOLOGIST
SIN No:SE04655364

Page 10 of 14



Patient Name : Mrs.KASTHURIBAI	Collected : 09/Mar/2024 09:16AM
Age/Gender : 53 Y 1 M 12 D/F	Received : 09/Mar/2024 01:23PM
UHID/MR No : SALW.0000138283	Reported : 09/Mar/2024 03:39PM
Visit ID : SALWOPV208076	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 53982..	

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
THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM				
TRI-IODOTHYRONINE (T3, TOTAL)	0.55	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	10.55	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	4.305	µIU/mL	0.34-5.60	CLIA

Comment:

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

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

TSH	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

Page 11 of 14



DR.R.SRIVATSAN
M.D.(Biochemistry)



SIN No:SPL24041665

This test has been performed at Apollo Health and Lifestyle Ltd - Chennai, Diagnostics Laboratory.

APOLLO SPECIALTY HOSPITALS PRIVATE LIMITED

(Formerly Known as Nova Specialty Hospitals Private Limited)

CIN : U85100TG2009PTC099414

Registered Office:No.7-1-617A,615&616, Imperial Towers, 7th Floor, Opp.Ameerpet Metro Station Ameerpet, Hyderabad, Telangana-500 038.

BENGALURU | CHENNAI | DELHI | JAIPUR | KANPUR | MUMBAI | PUNE

Patient Name : Mrs.KASTHURIBAI
Age/Gender : 53 Y 1 M 12 D/F
UHID/MR No : SALW.0000138283
Visit ID : SALWOPV208076
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : 53982..

Collected : 09/Mar/2024 09:16AM
Received : 09/Mar/2024 01:23PM
Reported : 09/Mar/2024 03:39PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF IMMUNOLOGY

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

High High High High Pituitary Adenoma; TSHoma/Thyrotropinoma



DR.R.SRIVATSAN
M.D.(Biochemistry)



SIN No:SPL24041665

This test has been performed at Apollo Health and Lifestyle Ltd - Chennai, Diagnostics Laboratory.

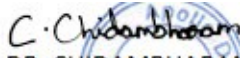
Patient Name : Mrs.KASTHURIBAI	Collected : 09/Mar/2024 09:16AM
Age/Gender : 53 Y 1 M 12 D/F	Received : 09/Mar/2024 01:05PM
UHID/MR No : SALW.0000138283	Reported : 09/Mar/2024 01:37PM
Visit ID : SALWOPV208076	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 53982..	

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
COMPLETE URINE EXAMINATION (CUE) , URINE				
PHYSICAL EXAMINATION				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pH	6.0		5-7.5	Bromothymol Blue
SP. GRAVITY	1.015		1.002-1.030	Dipstick
BIOCHEMICAL EXAMINATION				
URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	POSITIVE (+)		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	3-5	/hpf	0-5	Microscopy
EPITHELIAL CELLS	2-4	/hpf	<10	MICROSCOPY
RBC	ABSENT	/hpf	0-2	MICROSCOPY
CASTS	ABSENT		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY

Page 13 of 14


DR. CHIDAMBHARAM C
M.D., D.N.B.
CONSULTANT PATHOLOGIST

SIN No:UR2301046



Patient Name : Mrs.KASTHURIBAI	Collected : 09/Mar/2024 09:16AM
Age/Gender : 53 Y 1 M 12 D/F	Received : 09/Mar/2024 01:05PM
UHID/MR No : SALW.0000138283	Reported : 09/Mar/2024 01:37PM
Visit ID : SALWOPV208076	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 53982..	

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)	POSITIVE (++)		NEGATIVE	Dipstick

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

*** End Of Report ***

C. Chidambaram
DR. CHIDAMBHARAM C
M.D., D.N.B.
CONSULTANT PATHOLOGIST

SIN No:UF011037

Page 14 of 14



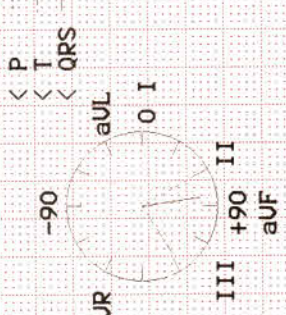
GE MAC1200 ST Female MRS, KASTHURIBAI, APOLLO SPECTRA ALWARPET HR 79 bpm

AGE: _____

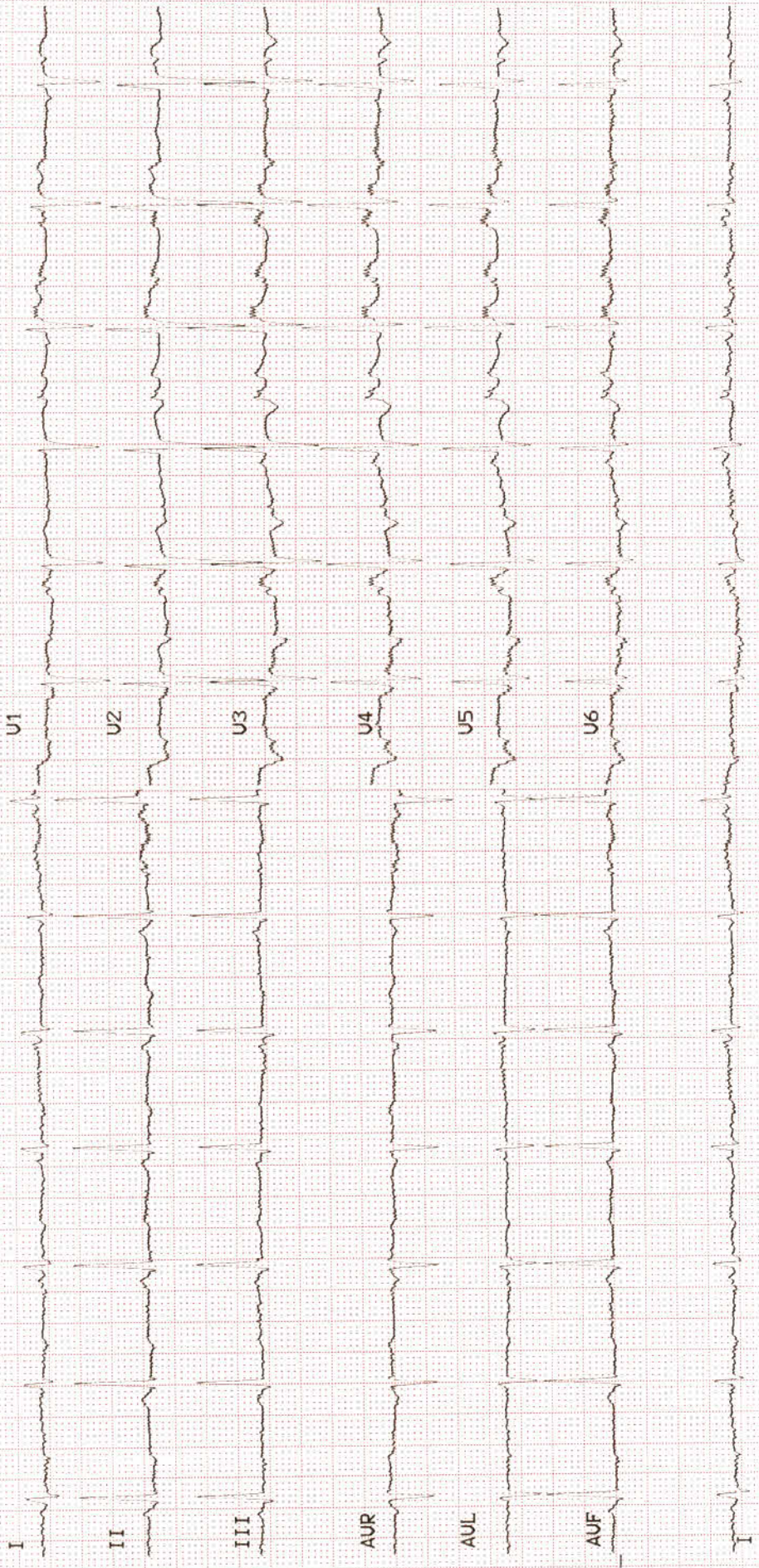
Measurement Results:

QRS	:	84 ms
QT/QTcB	:	370 / 424 ms
PR	:	120 ms
P	:	100 ms
RR/PP	:	760 / 755 ms
P/QRS/T	:	60 / 81 / 147 degrees

Interpretation:



Unconfirmed report..



Ans P. 1.
WhatsApp
92

 बैंक ऑफ बड़ौदा
Bank of Baroda

नाम चालमुन्नमणियन ए.
Name **BALASUBRAMANIAN.A**

EC No **53982**


बारीकता प्राधिकारी
Issuing Authority



धारक के हस्ताक्षर
Signature of Holder

Patient Name : Mrs. KASTHURIBAI
UHID : SALW.0000138283
Conducted By :
Referred By : SELF

Age : 53 Y/F
OP Visit No : SALWOPV208076
Conducted Date : 09-03-2024 15:28

2D-ECHO WITH COLOUR DOPPLER

Dimensions:	
Ao (cd)	2.3 CM
LA (es)	2.8 CM
LVID (ed)	4.2 CM
LVID (es)	2.5 CM
IVS (Ed)	0.9 CM
LVPW (Ed)	0.8 CM
EF	71%
%ED	40%
MITRAL VALVE:	NORMAL
AML	NORMAL
PML	NORMAL
AORTIC VALVE	SCLEROSIS+
TRICUSPID VALVE	NORMAL
RIGHT VENTRICLE	NORMAL
INTER ATRIAL SEPTUM	INTACT
INTER VENTRICULAR SEPTUM	INTACT
AORTA	NORMAL
RIGHT ATRIUM	NORMAL
LEFT ATRIUM	NORMAL
Pulmonary Valve	NORMAL
PERICARDIUM	NORMAL
LEFT VENTRICLE:	

NO REGIONAL WALL MOTION ABNORMALITY

NORMAL LEFT VENTRICULAR SYSTOLIC FUNCTION

COLOUR AND DOPPLER STUDIES

PWD: A>E AT MITRAL INFLOW

APOLLO SPECIALTY HOSPITALS PRIVATE LIMITED

(Formerly Known as Nova Specialty Hospitals Private Limited)

CIN : U85100TG2009PTC099414

Registered Office: No.7-1-617A,615&616, Imperial Towers, 7th Floor, Opp.Ameerpet Metro Station Ameerpet, Hyderabad, Telangana-500 038.

BENGALURU | CHENNAI | DELHI | JAIPUR | KANPUR | MUMBAI | PUNE

E/A-E: 0.7m/sec A: 0.9m/sec

VELOCITY ACROSS THE PULMONIC VALVE UPTO
0.7m/sec

VELOCITY ACROSS THE AV UPTO 1.3m/sec

TR VELOCITY UPTO 1.9m/sec 15mmHg

IMPRESSION

NO REGIONAL WALL MOTION ABNORMALITY
LEFT VENTRICLE NORMAL IN SIZE
NORMAL LEFT VENTRICULAR SYSTOLIC FUNCTION(LVEF-71%)
GRADE I LEFT VENTRICULAR DIASTOLIC DYSFUNCTION
TRIVIAL MITRAL REGURGITATION
SCLEROTIC AORTIC VALVE
MILD AORTIC REGURGITATION
TRIVIAL TRICUSPID REGURGITATION
NO PULMONARY ARTERY HYPERTENSION
NO PERICARDIAL EFFUSION / CLOT.

Done By Mrs. KALAIYARASI

DR J CECILY MARY MAJELLA MD.DM (Cardio)



OPHTHALMIC RECORD

NAME : Mrs. KASTHURIBAI
AGE : SALW.0000138283 53/F
I.D. NO.:

DATE: 9/3/24

REFERRAL DETAILS :

MHC

ALLERGIES :

Not aware of

OCULAR HISTORY :

ou: No specific ocular h/o.

SYSTEMIC ILLNESS :

H/o DM x 2 yrs.

CURRENT MEDICATION:

statyl 4x.

INVESTIGATIONS :

DM under control.

MAIN DIAGNOSIS

TREATMENT GIVEN

RE

LE

PRESENT GLASSES :

NV ADD :

C + 24m)

2.50 / T.25 x 80

simple

3.50 / 0.50 x 110

m)

VN. WITH PG :

6/9



6/9

VISION UNAIDED :

N6

N6

VN WITH PH :

RETINOSCOPY

AL

3.75

3.50 / 0.75 x 110

SUBJECTIVE :

3.25 / 0.50 x 80
(6/6)⁺²

3.50 / 0.75 x 110
(6/9)⁺²

ANTERIOR SEGMENT :

Add : ov : +2.25 m (m)
ou : NIF

color m :

ov : normal
21m

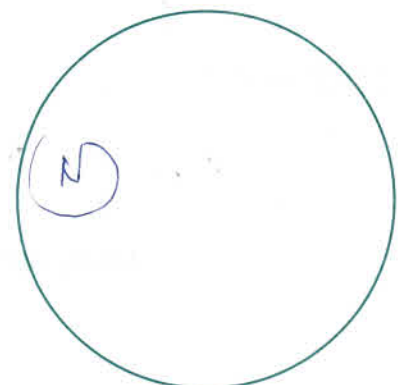
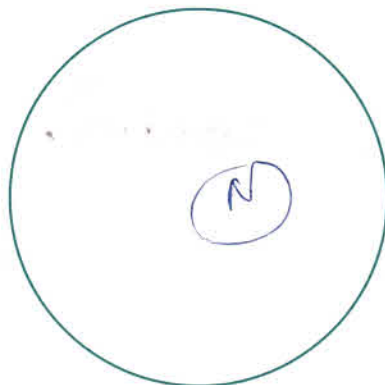
ou : Ant-Segment WM

IOP

RE : 16mm
LE : 16mm

@ 11.00 AM

FUNDUS :



MAIN DIAGNOSIS :

OU: Myopia

ADVICE / DISCUSSION :

→ New glasses

REVIEW :

RTC 1y/800

A handwritten signature in blue ink, appearing to be 'Jntz', written over a horizontal line.

SIGNATURE

Name : Mrs. KASTHURIBAI . Age : 53Yr Gender : Female
UHID : ASH1.0000562091 / CSNOPP1700263 W/BNo/RefNo : OP
Lab No : ASH01.C2400799 LRN : 14815740
Ref Doctor : DR. G RADHIKA



Collected on : 09-MAR-2024 02:59:03 PM Received on : 09-MAR-2024 03:50:52 PM Reported on : 11-MAR-2024 01:14

PAP SMEAR /CERVICAL SMEAR

SPECIMEN TYPE:

Liquid Based cytology

Cervical smear

SPECIMEN ADEQUACY:

Satisfactory for evaluation without endocervical cells.

INTERPRETATION/RESULT:

Negative for intraepithelial lesion or malignancy, Reactive cellular changes associated with inflammation (includes typical repair)

* END OF REPORT *

Sadaf Ahmad

DR.SADAF AHMAD

Typed By: 1137771

Printed On : 12-MAR-2024 01:15:33 PM

Page 1 of 1

APOLLO SPECIALTY HOSPITALS PRIVATE LIMITED

(Formerly Known as Nova Specialty Hospitals Private Limited)

CIN : U85100TG2009PTC099414

Registered Office:No.7-1-617A,615&616, Imperial Towers, 7th Floor, Opp.Ameerpet Metro Station Ameerpet, Hyderabad, Telangana-500 038.

BENGALURU | CHENNAI | DELHI | JAIPUR | KANPUR | MUMBAI | PUNE

HC_alwarpet

From: Balasubramanian A <ab053982@gmail.com>
Sent: 09 March 2024 08:42
To: hc.alwarpet@apollospectra.com
Subject: Fwd: Health Check up Booking Confirmed Request(bobS14156),Package Code-PKG10000477, Beneficiary Code-276683

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

From: Mediwheel <wellness@mediwheel.in>
Date: Fri, 8 Mar 2024, 3:22 pm
Subject: Health Check up Booking Confirmed Request(bobS14156),Package Code-PKG10000477, Beneficiary Code-276683
To: <ab053982@gmail.com>
Cc: <customercare@mediwheel.in>



011-41195959

Dear **Balasubramanian.A,**

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

Hospital Package Name : Mediwheel Full Body Health Checkup Female Above 40

Patient Package Name : Mediwheel Full Body Health Checkup Female Above 40

Name of Diagnostic/Hospital : Apollo Spectra - Alwarpet

Address of Diagnostic/Hospital- : 12 Cp Ramaswamy Road, Alwarpet Chennai - 600018

City : Chennai

State :

Pincode : 600018

Appointment Date : 09-03-2024

Confirmation Status : Booking Confirmed

Preferred Time : 9:00am

Booking Status : Booking Confirmed

Member Information		
Booked Member Name	Age	Gender
Kasthuribai	54 year	Female

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

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:

- Pregnant Women or those suspecting are advised not to undergo any X-Ray test.
- It is advisable not to undergo any Health Check during menstrual cycle.

Request you to reach half an hour before the scheduled time.

In case of further assistance, Please reach out to Team Mediwheel.

Thanks,
Mediwheel Team

Please Download Mediwheel App



You have received this mail because your e-mail ID is registered with **Arcofemi Healthcare Limited** This is a system-generated e-mail please don't reply to this message.

Please visit to our [Terms & Conditions](#) for more informaion. [Click here to unsubscribe.](#)

स्थायी लेखा संख्या
Permanent Account Number
FDBPB4458J

नाम / Name	KASTHURIBAI B
जन्म तिथि / Date of Birth	28/01/1971
लिंग / Gender	Female
आधार संख्या / Aadhaar Number	XXXX XXXX 7705



Digitally signed by DS
INCOME TAX DEPT 2
Date: 2020.06.24
19:28:41 IST

- Permanent Account Number(PAN) is a ten digit alpha numeric number allotted by the Income-tax department for compliance to the provisions of Income-tax Act and Rules including filing of Income-tax return, payment of taxes etc..
स्थाई लेखा संख्या (पैन) एक दस अंक का अक्षराकीय संख्या है जो आयकर अधिनियम के प्रावधानों के तहत कर का भुगतान और आयकर रिटर्न भरने के लिए नियमों का अनुपालन इत्यादि करने हेतु आवंटित किया जाता है।
- Quoting of PAN is mandatory for several transactions specified under Income- tax Act, 1961 (Refer Rule 114B of Income -tax Rules, 1962) आयकर अधिनियम, 1961 के तहत निर्दिष्ट कई लेनदेन के लिए स्थाई लेखा संख्या (पैन) का उल्लेख अनिवार्य है (आयकर नियम, 1962 के नियम 114बी, का संदर्भ लें)
- Possession or use of more than one PAN is against the law and may attract penalty of Rs. 10,000/- एक से अधिक स्थायी लेखा संख्या (पैन) रखना या उपयोग करना, कानून के विरुद्ध है और इसके लिए 10,000 रुपये का अर्थदंड लगाया जा सकता है।
- The PAN card enclosed contains QR Code which is readable by a specific mobile App.
संलग्न पैन कार्ड में एनहान्स क्यूआर कोड शामिल है जो एक विशिष्ट एंड्रॉइड मोबाइल ऐप द्वारा पठनीय है।

आयकर विभाग
INCOME TAX DEPARTMENT



भारत सरकार
GOVT. OF INDIA

स्थायी लेखा संख्या
Permanent Account Number
FDBPB4458J



नाम / Name
KASTHURIBAI B

जन्म तिथि / Date of Birth
28/01/1971

हस्ताक्षर / Signature



इस कार्ड के खोने / पाने पर कृपया सूचित करें / लौटाएं:
संयुक्त निदेशक (पद्धति) -1, पैन मॉड्यूल
9वीं मंजिल, आयकर भवन, सेक्टर -3, वैशाली,
गाजियाबाद - 201010, उत्तर प्रदेश

If this card is lost / someone's lost card is found.
please inform / return to:
Joint Director (Systems)-1, PAN Module
9th floor, Aayakar Bhawan, Sector - 3, Vaishali,
Ghaziabad - 201010, Uttar Pradesh

Tel no: 0120-2770078; Fax : 0120-2770078
Mail-id : epan@incometax.gov.in

Patient Name	: Mrs. KASTHURIBAI	Age/Gender	: 53 Y/F
UHID/MR No.	: SALW.0000138283	OP Visit No	: SALWOPV208076
Sample Collected on	:	Reported on	: 10-03-2024 10:28
LRN#	: RAD2261541	Specimen	:
Ref Doctor	: DR VIJENDRA MAKK REDDY		
Emp/Auth/TPA ID	: 53982..		

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

Liver measures 14.1cm with fatty liver(Grade II).

Intra and extra hepatic biliary passages are not dilated.

Gall bladder appears normal with no evidence of calculus.

Wall thickness appear normal.

Pancreas appears normal.

Spleen measures 11.3cm and shows normal echotexture.

Visualised aorta and IVC are normal.

No evidence of ascites or lymphadenopathy.

Right kidney measures 11.1 x 4.3cm.

Left kidney measures 10.2 x 4.6cm.

Both kidneys show normal echopattern with no evidence of calculi or calyceal dilatation.

Uterus anteverted measures 8.5 x 3.7cm. Endometrial thickness - 5mm.

A calcified fibroid of 1.0cm is seen in the posterior wall of the uterus.

Both ovaries - Atretic.

Bladder is normal in contour.

IMPRESSION:

Grade II - Fatty liver.

Calcified posterior wall uterine fibroid.

Patient Name : Mrs. KASTHURIBAI

Age/Gender : 53 Y/F



Dr. ARUN KUMAR S
MBBS, DMRD, DNB
Radiology

Patient Name	: Mrs. KASTHURIBAI	Age/Gender	: 53 Y/F
UHID/MR No.	: SALW.0000138283	OP Visit No	: SALWOPV208076
Sample Collected on	:	Reported on	: 10-03-2024 09:41
LRN#	: RAD2261541	Specimen	:
Ref Doctor	: DR VIJENDRA MAKK REDDY		
Emp/Auth/TPA ID	: 53982..		

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Lung fields are clear.

Cardio thoracic ratio is normal.

Apices, costo and cardiophrenic angles are free.

Cardio vascular shadow and hila show no abnormal feature.

Bony thorax shows no significant abnormality.

Domes of diaphragm are well delineated.

Impression:

Normal study.



Dr. ARUN KUMAR S
MBBS, DMRD, DNB
Radiology

Patient Name : Mrs. KASTHURIBAI Age : 53 Y/F
UHID : SALW.0000138283 OP Visit No : SALWOPV208076
Conducted By: : Conducted Date : 09-03-2024 15:28
Referred By : SELF

2D-ECHO WITH COLOUR DOPPLER

Dimensions:

Ao (ed)	2.3 CM
LA (es)	2.8 CM
LVID (ed)	4.2 CM
LVID (es)	2.5 CM
IVS (Ed)	0.9 CM
LVPW (Ed)	0.8 CM
EF	71%
%FD	40%
MITRAL VALVE :	NORMAL
AML	NORMAL
PML	NORMAL
AORTIC VALVE	SCLEROSIS+
TRICUSPID VALVE	NORMAL
RIGHT VENTRICLE	NORMAL
INTER ATRIAL SEPTUM	INTACT
INTER VENTRICULAR SEPTUM	INTACT
AORTA	NORMAL
RIGHT ATRIUM	NORMAL
LEFT ATRIUM	NORMAL
Pulmonary Valve	NORMAL
PERICARDIUM	NORMAL
LEFT VENTRICLE:	

NO REGIONAL WALL MOTION ABNORMALITY

Patient Name : Mrs. KASTHURIBAI Age : 53 Y/F
UHID : SALW.0000138283 OP Visit No : SALWOPV208076
Conducted By: : Conducted Date : 09-03-2024 15:28
Referred By : SELF

NORMAL LEFT VENTRICULAR SYSTOLIC FUNCTION

COLOUR AND DOPPLER STUDIES

PWD: A>E AT MITRAL INFLOW

E/A-E: 0.7m/sec A: 0.9m/sec

VELOCITY ACROSS THE PULMONIC VALVE UPTO
0.7m/sec

VELOCITY ACROSS THE AV UPTO 1.3m/sec

TR VELOCITY UPTO 1.9m/sec 15mmHg

IMPRESSION

NO REGIONAL WALL MOTION ABNORMALITY
LEFT VENTRICLE NORMAL IN SIZE
NORMAL LEFT VENTRICULAR SYSTOLIC FUNCTION(LVEF-71%)
GRADE I LEFT VENTRICULAR DIASTOLIC DYSFUNCTION
TRIVIAL MITRAL REGURGITATION
SCLEROTIC AORTIC VALVE
MILD AORTIC REGURGITATION
TRIVIAL TRICUSPID REGURGITATION
NO PULMONARY ARTERY HYPERTENSION
NO PERICARDIAL EFFUSION / CLOT.

Done By Mrs. KALAIYARASI

Patient Name	: Mrs. KASTHURIBAI	Age	: 53 Y/F
UHID	: SALW.0000138283	OP Visit No	: SALWOPV208076
Conducted By:	:	Conducted Date	: 09-03-2024 15:28
Referred By	: SELF		

DR J CECILY MARY MAJELLA MD.DM (Cardio)