

CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination of

Ms Sonam Gupta 314/F on 26/3/24

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

	Tick
Medically Fit	<input checked="" type="checkbox"/>
It Wit Restrictions Recommendations	
<p>Though following restrictions have been revealed, in my opinion, these are not impediments to the job.</p> <p>1. <u>Lifestyle modification</u></p> <p>2. <u>Rpt TFT after 3 mths and RLV E defns.</u></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> <p>Current Unfit.</p> <p>Review after _____ recommended</p> <p>Unfit</p>	

Height: 156 cm

Weight: 63 kg

Blood Pressure: 124/79 mmHg

D Dandhech

Dr. Dipti Dandhech
Medical Officer

This certificate is not meant for medico-legal purposes

Apollo One (Unit of Apollo Health and Lifestyle Ltd)

Plot no. 3, Block no. 34, Pusa Road, WEA, opposite metro pillar no. 77, Karol Bagh, New Delhi - 110005. Contact Number 011- 40393610 / Helpline No: 1860 500 7788
Emergency: 1066 / Email: ApolloOnePusaRoad@apolloclinic.com

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Ameerpet, Hyderabad-500038, U85110TG2000PLC115819

www.apolloclinic.com

TOUCHING LIVES

Patient Name : Mrs.SONAM KUMARI GUPTA
 Age/Gender : 31 Y 5 M 21 D/F
 UHID/MR No : CAOP.0000000076
 Visit ID : CAOPOPV81
 Ref Doctor : Dr.SELF
 Emp/Auth/TPA ID : spouse- 115964

Collected : 23/Mar/2024 08:10AM
 Received : 23/Mar/2024 09:55AM
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DEPARTMENT OF HAEMATOLOGY

PERIPHERAL SMEAR , WHOLE BLOOD EDTA

RBCs	Predominantly Normocytic Normochromic
WBCs	Are essentially unremarkable. No abnormal cells seen.
Platelets	Adequate in number, verified on smear
	No Hemoparasites seen in smears examined.
Impression	Normal peripheral smear study
Advice	Clinical correlation




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

SIN No: BED240078754

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DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	11.2	g/dL	12-15	Spectrophotometer
PCV	33.90	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.15	Million/cu.mm	3.8-4.8	Electrical Impedance
MCV	82	fL	83-101	Calculated
MCH	27.1	pg	27-32	Calculated
MCHC	33.2	g/dL	31.5-34.5	Calculated
R.D.W	16	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	5,700	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	60	%	40-80	Electrical Impedance
LYMPHOCYTES	35	%	20-40	Electrical Impedance
EOSINOPHILS	02	%	1-6	Electrical Impedance
MONOCYTES	03	%	2-10	Electrical Impedance
BASOPHILS	00	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	3420	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	1995	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	114	Cells/cu.mm	20-500	Calculated
MONOCYTES	171	Cells/cu.mm	200-1000	Calculated
Neutrophil lymphocyte ratio (NLR)	1.71		0.78- 3.53	Calculated
PLATELET COUNT	212000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	18	mm at the end of 1 hour	0-20	Modified Westergren
PERIPHERAL SMEAR				



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DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA				
BLOOD GROUP TYPE	B			Gel agglutination
Rh TYPE	POSITIVE			Gel 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	101	mg/dL	70-100	GOD - POD

Please correlate clinically.

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)	122	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.




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DEPARTMENT OF BIOCHEMISTRY

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Test Name	Result	Unit	Bio. Ref. Range	Method
HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA				
HBA1C, GLYCATED HEMOGLOBIN	5	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	97	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.

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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 M.B.B.S, M.D (Pathology)
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 SIN No: EDT240035933

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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	204	mg/dL	<200	CHE/CHO/POD
TRIGLYCERIDES	118	mg/dL	<150	Enzymatic
HDL CHOLESTEROL	59	mg/dL	>40	CHE/CHO/POD
NON-HDL CHOLESTEROL	145	mg/dL	<130	Calculated
LDL CHOLESTEROL	121.4	mg/dL	<100	Calculated
VLDL CHOLESTEROL	23.6	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.46		0-4.97	Calculated
ATHEROGENIC INDEX (AIP)	0.01		<0.11	Calculated


Comment:

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

	Desirable	Borderline High	High	Very High
TOTAL CHOLESTEROL	< 200	200 - 239	≥ 240	
TRIGLYCERIDES	<150	150 - 199	200 - 499	≥ 500
LDL	Optimal < 100; Near Optimal 100-129	130 - 159	160 - 189	≥ 190
HDL	≥ 60			
NON-HDL CHOLESTEROL	Optimal <130; Above Optimal 130-159	160-189	190-219	>220
ATHEROGENIC INDEX(AIP)	<0.11	0.12 - 0.20	>0.21	

Note:

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


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

cholesterol transport, the process by which cholesterol is eliminated from peripheral tissues.

5) As per NCEP guidelines, all adults above the age of 20 years should be screened for lipid status. Selective screening of children above the age of 2 years with a family history of premature cardiovascular disease or those with at least one parent with high total cholesterol is recommended.

6) VLDL, LDL Cholesterol Non-HDL Cholesterol, CHOL/HDL RATIO, LDL/HDL RATIO are calculated parameters when Triglycerides are below 400 mg/dl. When Triglycerides are more than 400 mg/dl LDL cholesterol is a direct measurement.

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



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Test Name	Result	Unit	Bio. Ref. Range	Method
LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.30	mg/dL	0.20-1.20	Colorimetric
BILIRUBIN CONJUGATED (DIRECT)	0.10	mg/dL	0.0-0.3	Calculated
BILIRUBIN (INDIRECT)	0.20	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	27	U/L	9-52	UV with P-5-P
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	20.0	U/L	14-36	UV with P-5-P
ALKALINE PHOSPHATASE	114.00	U/L	38-126	p-nitrophenyl phosphate
PROTEIN, TOTAL	7.80	g/dL	6.3-8.2	Biuret
ALBUMIN	4.00	g/dL	3.5 - 5	Bromocresol Green
GLOBULIN	3.80	g/dL	2.0-3.5	Calculated
A/G RATIO	1.05		0.9-2.0	Calculated

Comment:

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

Common patterns seen:

1. Hepatocellular Injury:

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

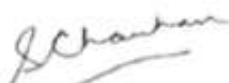
2. Cholestatic Pattern:

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

3. Synthetic function impairment:

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




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SIN No: SE04671835

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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
RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	0.48	mg/dL	0.5-1.04	Creatinine amidohydrolase
UREA	21.80	mg/dL	15-36	Urease
BLOOD UREA NITROGEN	10.2	mg/dL	8.0 - 23.0	Calculated
URIC ACID	4.80	mg/dL	2.5-6.2	Uricase
CALCIUM	9.40	mg/dL	8.4 - 10.2	Arsenazo-III
PHOSPHORUS, INORGANIC	4.20	mg/dL	2.5-4.5	PMA Phenol
SODIUM	140	mmol/L	135-145	Direct ISE
POTASSIUM	4.9	mmol/L	3.5-5.1	Direct ISE
CHLORIDE	100	mmol/L	98 - 107	Direct ISE
PROTEIN, TOTAL	7.80	g/dL	6.3-8.2	Biuret
ALBUMIN	4.00	g/dL	3.5 - 5	Bromocresol Green
GLOBULIN	3.80	g/dL	2.0-3.5	Calculated
A/G RATIO	1.05		0.9-2.0	Calculated




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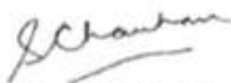
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Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	11.00	U/L	12-43	Glycylglycine Nitoranalide




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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)	1.32	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	10.55	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	0.040	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
High	High	High	High	Pituitary Adenoma; TSHoma/Thyrotropinoma




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 SIN No: SPL24052658

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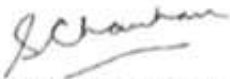
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DEPARTMENT OF CLINICAL PATHOLOGY

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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	6.5		5-7.5	Bromothymol Blue
SP. GRAVITY	1.025		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
NITRITE	NEGATIVE		NEGATIVE	Dipstick
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	PYRROLE HYDROLYSIS
CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY				
PUS CELLS	2-3	/hpf	0-5	Microscopy
EPITHELIAL CELLS	3-4	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY




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 Reported : 23/Mar/2024 02:45PM
 Status : Final Report
 Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF CLINICAL PATHOLOGY

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

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

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

*** End Of Report ***

Result/s to Follow:
 LBC PAP TEST (PAPSURE)



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



Height : 156	Weight : 63 Kg	BMI :	Waist Circum :
Temp :	Pulse : 86	Resp : 14	B.P : 124/79

General Examination / Allergies
History

no H/O T2DM / HTN

 Allergies / Allergies
 - Nil
 Surgery - Nil

Clinical Diagnosis & Management Plan

Adv
 - Lifestyle modifications
 - exercise

Dr. Dadheech
 Dr. Bipri Dadheech

Follow up date:

Doctor Signature

NAME:SONAM KUMARI	AGE: 31Y/ SEX: F
DATE: March 23, 2024	REF.BY: ARCOFEMI HEALTHCARE LIMITED
S.NO.: -47	UHID NO.: - CAOP.0000000076

ULTRASOUND WHOLE ABDOMEN

Liver is normal in size and in echotexture . No focal lesion seen in the liver. Intrahepatic bile ducts and portal radicals are normal in caliber.

Gall bladder does not show any evidence of cholecystitis or cholelithiasis.
CBD is not dilated.
Portal vein is normal in caliber.

Both kidneys are of normal size (RK 11.4 X4.8cm, LK 11.0 X 5.0 cm in length), shape and echo pattern. No calculus, growth or hydro nephrotic changes seen in either kidney. The parenchymal thickness is normal & cortico-medullary differentiation is well maintained.

Spleen is normal in size and echotexture.
Pancreas does not show any pathology.

No free fluid seen in the peritoneal cavity.

Urinary bladder is distended and shows no mural or intraluminal pathology.
Uterus is anteverted, normal in size (5.6 X 3.9 cm), shape and echo pattern.
Endometrium echo is 7mm thick.
Both the ovaries appear normal in size, shape, and echopattern.
Bilateral adnexa are clear. No adnexal mass.
No free fluid or pelvic collection seen.

Please correlate clinically.

DR. KAWAL DEEP DHAM ,
CONSULTANT RADIOLOGIST

APOLLO SPECIALTY HOSPITALS PRIVATE LIMITED

(Formerly known as Nova Specialty Hospitals Private Limited)
CIN: U85100KA2009PTC049961

Apollo Spectra Hospitals
66A/2, New Rohtak Road, Karol Bagh,
New Delhi-110 005

Ph.: 011-49407700, 8448702877
www.apollospectra.com

Registered Address

#7-1-617/A, 615 & 616 Imperial Towers,
7th Floor, Opp. Ameerpet Metro Station,
Ameerpet, Hyderabad-500038, Telangana.

=====

NAME: SONAM KUMARI GUPTA
DATE: 23.03.2024
REF. BY:- HEALTH CHECKUP

=====

AGE : 31Y /SEX/F
MR. NO:- CAOP.0000000076
S.NO. :- 337

X-RAY CHEST PA VIEW

Both lung fields and hila are normal.

No obvious active pleuro-parenchymal lesion seen.

Both costophrenic and cardiophrenic angles are clear.

Both diaphragms are normal in position and contour.

Thoracic wall and soft tissues appear normal.

CONCLUSION :

No obvious abnormality seen.

Please correlate clinically and with lab. Investigations


DR. KAWAL DEEP DHAM
CONSULTANT RADIOLOGIST

Note: It is only a professional opinion. Kindly correlate clinically.

Apollo One (Unit of Apollo Health and Lifestyle Ltd)
Plot no. 3 , Block no. 34, Pusa Road, WEA, opposite metro pillar no. 77, Karol Bagh,
New Delhi - 110005. Contact Number 011- 40393610 / Helpline No: 1860 500 7788
Emergency: 1066 / Email: ApolloOnePusaRoad@apolloclinic.com

Registered Office: Apollo Health and Lifestyle Limited
7-1-617/A, 615 and 616, Imperial Towers, 7th Floor,
Ameerpet, Hyderabad-500038, U85110TG2000PLC115819

Dr. Sanjiv Dang

MBBS, MS (ENT)
Ear, Nose & Throat Consultant
DMC Regn. No. 9555
Timing : 5.30 pm - 8.30 pm
E : sanjivdang.mamc@gmail.com

For appointment please contact :
011-40043300-07, 8448702877

Sonam Kauri Gupta

ENT (ENT)

Adv

No medication

SD
23.3.2024

S.IgE



Chest : clear

APOLLO SPECIALTY HOSPITALS PRIVATE LIMITED

(Formerly known as Nova Specialty Hospitals Private Limited)
CIN: U85100KA2009PTCO49961

Apollo Spectra Hospitals
Plot No. 3, Block No. 34, Pusa Road,
WEA, Karol Bagh, New Delhi-110005

Ph.: 011 49407700, 8448702877
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Ameerpet, Hyderabad-500038, Telangana.

BENGALURU | CHENNAI | DELHI | GREATER NOIDA | GWALIOR | GURUGRAM | HYDERABAD | JAIPUR | KANPUR | MUMBAI | PATNA | PUNE

Apollo One

Eye Checkup

NAME:- Mrs Sonam Kumari Gupta

Age:- 31

Date: 23/3/24

SELF / CORPORATE:-

	Right Eye	Left Eye
Distant Vision	-0.50 SPH	-0.50 SPH
Near vision	6/6	6/6
Color vision		
Fundus examination		
Intraocular pressure		
Slit lamp exam		

Address: Apollo One
Plot No. 3, Block No. 34,
Pusa Road, New Delhi - 110005
Ph. No. 011-40393610

Signature



APOLLO SPECIALTY HOSPITALS PRIVATE LIMITED

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CIN: U85100KA2009PTC049961

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Ameerpet, Hyderabad-500038, Telangana.



23/03/24

NAME: - Sonam Kumari Gupta

AGE: - 31 Yr.

GENDER: - Female

Pt came for dental checkup

M/H :-
D/H :-
H/H :-
} Nil

O/E. Pit & fissure caries 45
calculus +
stain ++

Adv:- Restoration 45
scaling & Polishing

Dr. Ishita Agrawal

Signature: - 

ID caop0000000076	Height 156cm	Age 31	Gender Female	Test Date / Time 23.03.2024. 09:00
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Body Composition Analysis

	Values	Total Body Water	Soft Lean Mass	Fat Free Mass	Weight
Total Body Water (L)	26.5 (26.0~31.8)	26.5	34.1 (33.4~40.8)	36.3 (35.4~43.3)	62.7 (43.4~58.8)
Protein (kg)	7.2 (7.0~8.6)				
Minerals (kg)	2.63 (2.41~2.95)				
Body Fat Mass (kg)	26.4 (10.2~16.4)				

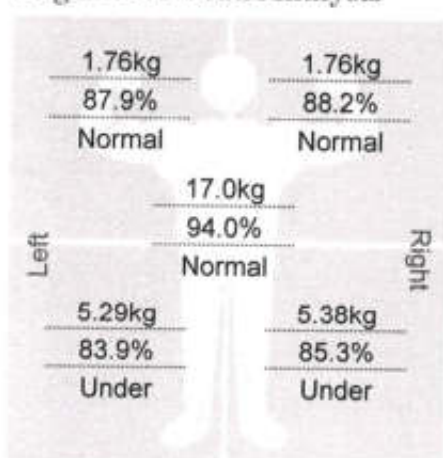
Muscle-Fat Analysis

	Under	Normal	Over
Weight (kg)	55 70 85 100 115 130 145 150 175 190 205 %	62.7	
SMM (kg) <small>Skeletal Muscle Mass</small>	70 80 90 100 110 120 130 140 150 160 170 %	19.5	
Body Fat Mass (kg)	40 60 80 100 160 220 280 340 400 460 520 %	26.4	

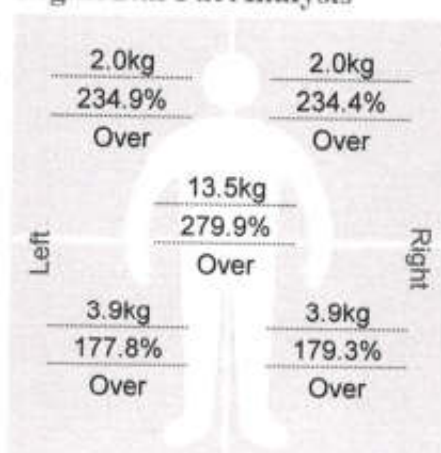
Obesity Analysis

	Under	Normal	Over
BMI (kg/m ²) <small>Body Mass Index</small>	10.0 15.0 18.5 21.0 25.0 30.0 35.0 40.0 45.0 50.0 55.0	25.8	
PBF (%) <small>Percent Body Fat</small>	8.0 13.0 18.0 23.0 28.0 33.0 38.0 43.0 48.0 53.0 58.0	42.2	

Segmental Lean Analysis



Segmental Fat Analysis



* Segmental fat is estimated.

Body Composition History

	23.03.24 09:00				
Weight (kg)	62.7				
SMM (kg) <small>Skeletal Muscle Mass</small>	19.5				
PBF (%) <small>Percent Body Fat</small>	42.2				

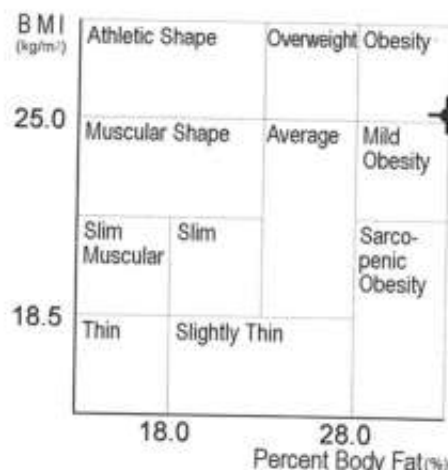
Recent Total

InBody Score

62/100 Points

* Total score that reflects the evaluation of body composition. A muscular person may score over 100 points.

Body Type



Weight Control

Target Weight	51.1 kg
Weight Control	- 11.6 kg
Fat Control	- 14.7 kg
Muscle Control	+ 3.1 kg

Obesity Evaluation

BMI Normal Under Slightly Over Over

PBF Normal Slightly Over Over

Body Balance Evaluation

Upper Balanced Slightly Unbalanced Extremely Unbalanced
 Lower Balanced Slightly Unbalanced Extremely Unbalanced
 Upper-Lower Balanced Slightly Unbalanced Extremely Unbalanced

Research Parameters

Basal Metabolic Rate	1153 kcal	(1309~1517)
Waist-Hip Ratio	0.94	(0.75~0.85)
Visceral Fat Level	14	(1~9)
Obesity Degree	123 %	(90~110)
Bone Mineral Content	2.20 kg	(1.98~2.42)
SMI	5.8 kg/m ²	
Recommended calorie intake	1566 kcal	

Impedance

	RA	LA	TR	RL	LL
Z(Ω) 5 kHz	458.8	461.1	27.8	348.0	355.7
50 kHz	417.3	420.6	26.5	303.6	315.0
250 kHz	379.8	383.4	22.8	274.0	283.9

ID: 000000076

SONAM

Female 31Years

Req. No. :

23-03-2024 08:53:40 AM

HR : 75 bpm

P : 92 ms

PR : 122 ms

QRS : 93 ms

QT/QTcBz : 357/401 ms

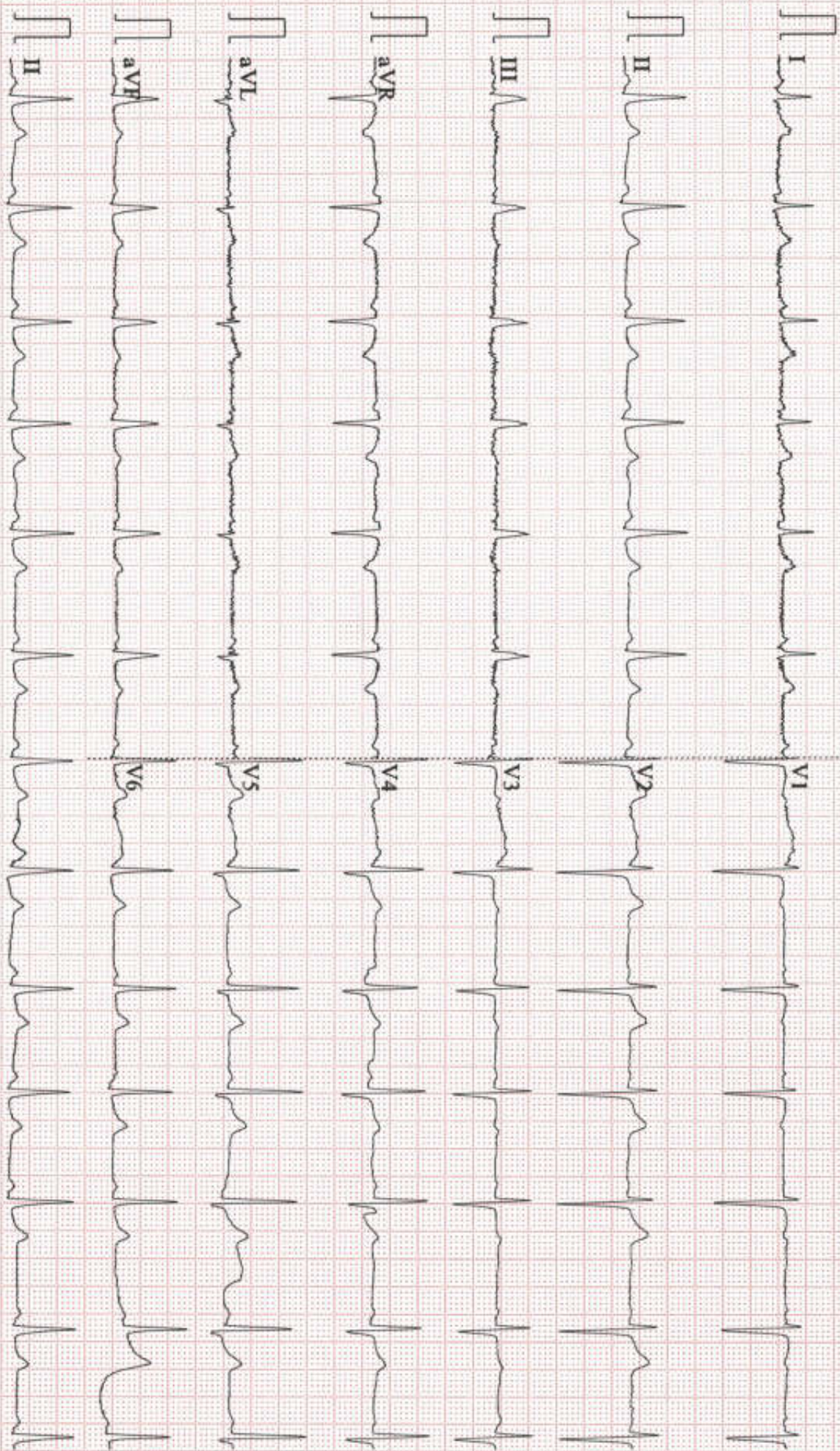
P/QRS/T : 27/57/41 °

RV5/SV1 : 1.286/1.177 mV

Diagnosis Information:

Sinus Arrhythmia

Report Confirmed by:



0.67-45Hz AC50 25mm/s 10mm/mV 2*5.0s+1r V2.23 SEMIP V1.92 APOLLO SPECTRA HOSPITLS

TREADMILL TEST REPORT

Name:SONAM KUMARI

Age/Sex: 31Yrs/F

Date:23.03.2024

ARCOFEMI HEALTHCARE LIMITED

Medication: None

Protocol: BRUCE

	Resting	Peak exercise	Recovery			
			3 (min)	4	6	8
HR/min	97	190	133			
B.P. mm Hg	124/80	144/90	134/80			

Reason for termination

- THR Achieved

APOLLO SPECIALITY HOSPITAL
PUSA ROAD KAROL BAGH
DELHI

Station
Telephone:

EXERCISE STRESS TEST REPORT

Patient Name: SONAM, KUMARI
Patient ID: 0000000076
Height: 156 cm
Weight: 63 kg

DOB: 02.10.1992
Age: 31 yrs
Gender: Female
Race: Asian

Study Date: 23.03.2024
Test Type: --
Protocol: BRUCE

Referring Physician: --
Attending Physician: --
Technician: --

Medications:
--

Medical History:
--

Reason for Exercise Test:
--

Exercise Test Summary

Phase Name	Stage Name	Time	Speed	Grade	HR	BP	Comment
		in Stage	[mph]	[%]	[bpm]	[mmHg]	
PRETEST	SUPINE	01:25	0.00	0.00	97		
EXERCISE	STAGE 1	03:00	1.70	10.00	141	124/80	
	STAGE 2	03:00	2.50	12.00	166	134/80	
	STAGE 3	02:10	3.40	14.00	190	144/90	
RECOVERY		02:59	0.00	0.00	133	134/80	

The patient exercised according to the BRUCE for 8:09 min:s, achieving a work level of Max. METS: 10.10. The resting heart rate of 97 bpm rose to a maximal heart rate of 193 bpm. This value represents 102 % of the maximal, age-predicted heart rate. The resting blood pressure of --/-- mmHg, rose to a maximum blood pressure of 144/90 mmHg. The exercise test was stopped due to Target heart rate achieved.

Interpretation

Summary: Resting ECG: normal.
Functional Capacity: normal.
HR Response to Exercise: appropriate.
BP Response to Exercise: normal resting BP - appropriate response.
Chest Pain: none.
Arrhythmias: none.
ST Changes: none.
Overall impression: Normal stress test.

Conclusions

NORMAL

Physician _____

Technician _____

SONAM, KUMARI

Patient ID: 0000000076

23.03.2024 Female 156 cm 63 kg

12:24:49pm 31 yrs Asian

Meds:

Test Reason:

Medical History:

Ref MD: Ordering MD:

Technician: Test Type:

Comment:

BRUCE: Exercise Time 08:09
 Max HR: 193 bpm 102 % of max predicted 189 bpm HR at rest: 97
 Max BP: 144/90 mmHg Max RPP: 27792 mmHg* bpm
 Maximum Workload: 10.10 METS
 Max. ST: -1.70 mm, -0.94 mV/s in III; EXERCISE STAGE 3 - 8:00

Arrhythmia: A:5
 ST/HR index: 1.18 μ V/bpm
 ST/HR slope: 1.23 μ V/bpm (AVF)
 HR reserve used: 101 %
 HR recovery: 30 bpm
 VE recovery: 0 VE/min

ST/HR hysteresis: -0.040 mV (III)

QRS duration: BASELINE: 94 ms, PEAK EX: 88 ms, REC: 92 ms

Reasons for Termination: Target heart rate achieved

Summary:

Resting ECG: normal. Functional Capacity: normal. HR Response to Exercise: appropriate. BP Response to Exercise: normal resting BP - appropriate response.

Chest Pain: none. Arrhythmias: none. ST Changes: none. Overall Impression: Normal stress test.

Conclusion: NORMAL

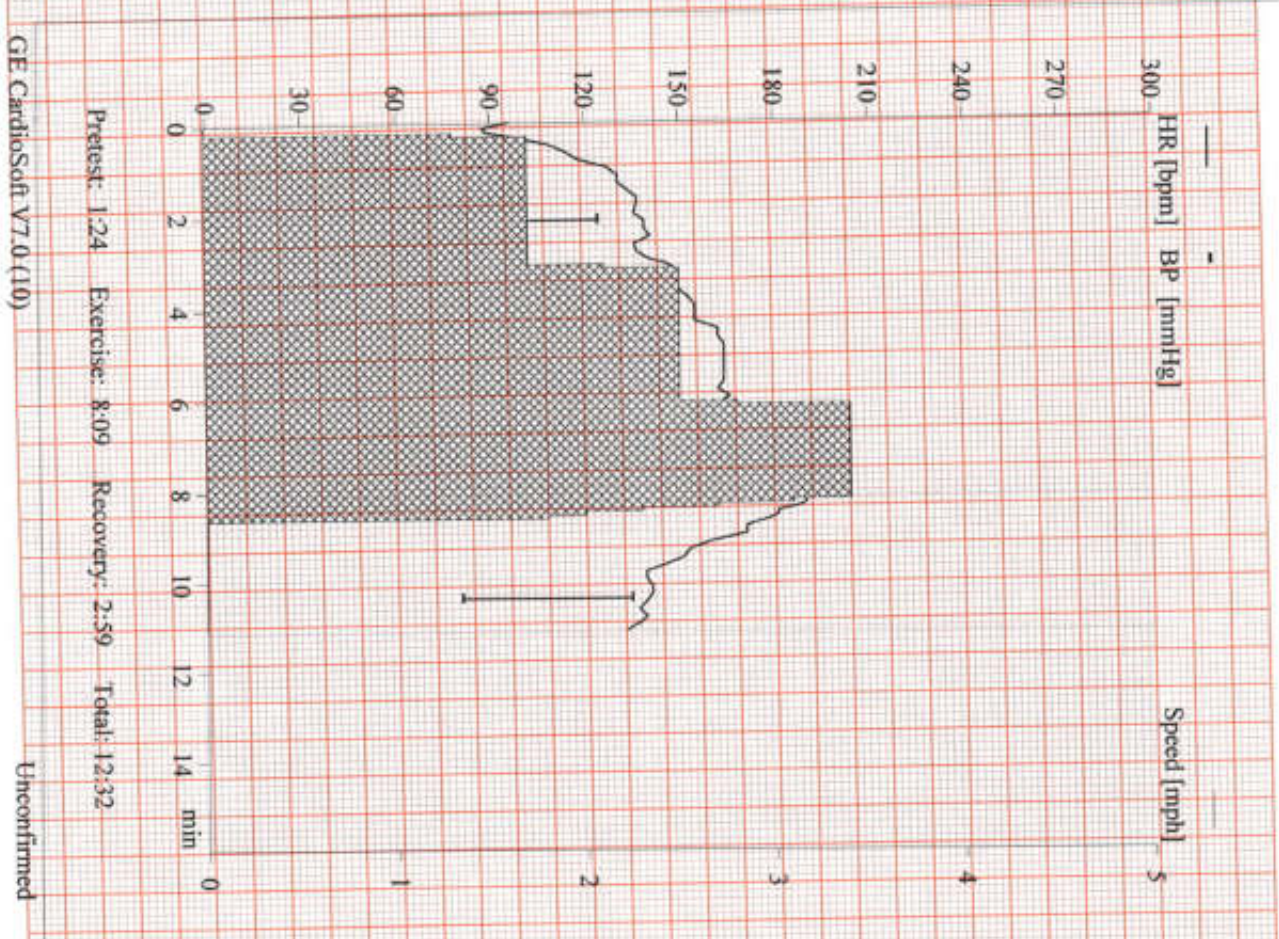
Room:

Location: * 0 *

Phase Name	Stage Name	Time in Stage	Speed [mph]	Grade [%]	Workload [METs]	HR [bpm]	BP [mmHg]	RPP [mmHg* bpm]	VE [l/min]	ST Level III [mm]	Comment
PRETEST	SUPINE	01:25	0.00	0.00	1.0	97			0	-0.55	
EXERCISE	STAGE 1	03:00	1.70	10.00	4.6	141	124/80	17484	0	-0.80	
	STAGE 2	03:00	2.50	12.00	7.0	166	134/80	22244	0	-1.35	
	STAGE 3	02:10	3.40	14.00	10.1	190	144/90	27360	0	-1.65	
RECOVERY		02:59	0.00	0.00	1.0	133	134/80	17822	0	-0.80	

SONAM, KUMARI
 Patient ID: 0000000076
 23.03.2024 Female 156 cm 63 kg
 12:24:49pm 31 yrs Asian

Protocol: BRUCE



GE CardioSoft V7.0 (10)

Pretest: 1:24 Exercise: 8:09 Recovery: 2:59 Total: 12:32

Unconfirmed

Max HR: 193 bpm 102 % of max predicted 189 bpm HR at rest: 97
 Max BP: 144/90 mmHg Max RPP: 27792 mmHg*²bpm

Maximum Workload: 10.10 METS
 Max. ST: -1.70 mm, -0.94 mV/s in III; EXERCISE STAGE 3 8:00

Arrhythmia: A:5
 ST/HR index: 1.18 μ V/bpm
 ST/HR slope: 1.23 μ V/bpm (aVF)

HR reserve used: 101 %
 HR recovery: 30 bpm
 VE recovery: 0 VE/min

ST/HR hysteresis: -0.040 mV (III)
 QRS duration: BASELINE: 94 ms, PEAK EX: 88 ms, REC: 92 ms

Reasons for Termination: Target heart rate achieved

Resting ECG: normal
 Functional Capacity: normal

HR Response to Exercise: appropriate.
 BP Response to Exercise: normal resting BP - appropriate response.

Chest Pain: none
 Arrhythmias: none
 ST Changes: none

Overall Impression: Normal stress test.
 Conclusion: NORMAL

Location: * 0 *

Attending MD:

SONAM, KUMARI

Patient ID: 0000000076

23.03.2024 Female 156 cm 63 kg

12:25:11pm 31 yrs Asian

Exercise Test / 12-Lead Report

PRETEST

SUPINE

00:16

APOLLO SPECIALITY HOSPITAL

BRUCE

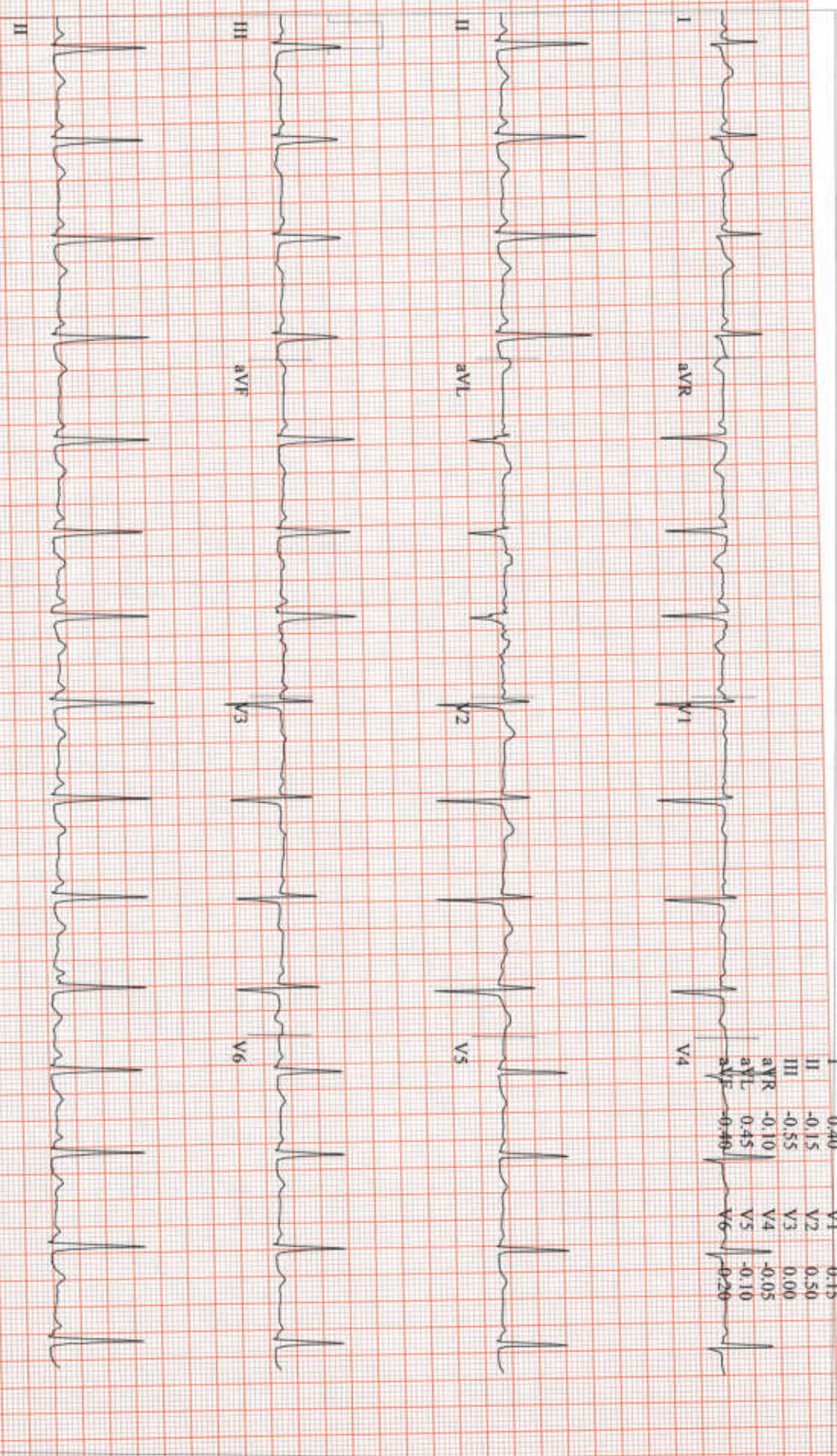
0.0 mph

0.0 % Measured at 60 ms Post J (10mm/mV)

Auto Points

Lead ST(mm) Lead ST(mm)

I	0.40	V1	0.15
II	-0.15	V2	0.50
III	-0.55	V3	0.00
aVR	-0.10	V4	-0.05
aVL	0.45	V5	-0.10
aVF	-0.40	V6	-0.20



GE CardioSoft V7.0 (10)
25 mm/s 10 mm/mV 50 Hz 0.05Hz FRF+ HR(II,VI)

Start of Test: 12:24:49pm

SONAM, KUMARI

Patient ID: 0000000076

23.03.2024

12:25:57pm

Female 156 cm 63 kg

31 yrs Asian

Exercise Test / 12-Lead Report

112 bpm

PRETEST

SUPINE

01:02

APOLLO SPECIALITY HOSPITAL

BRUCE

0.0 mph

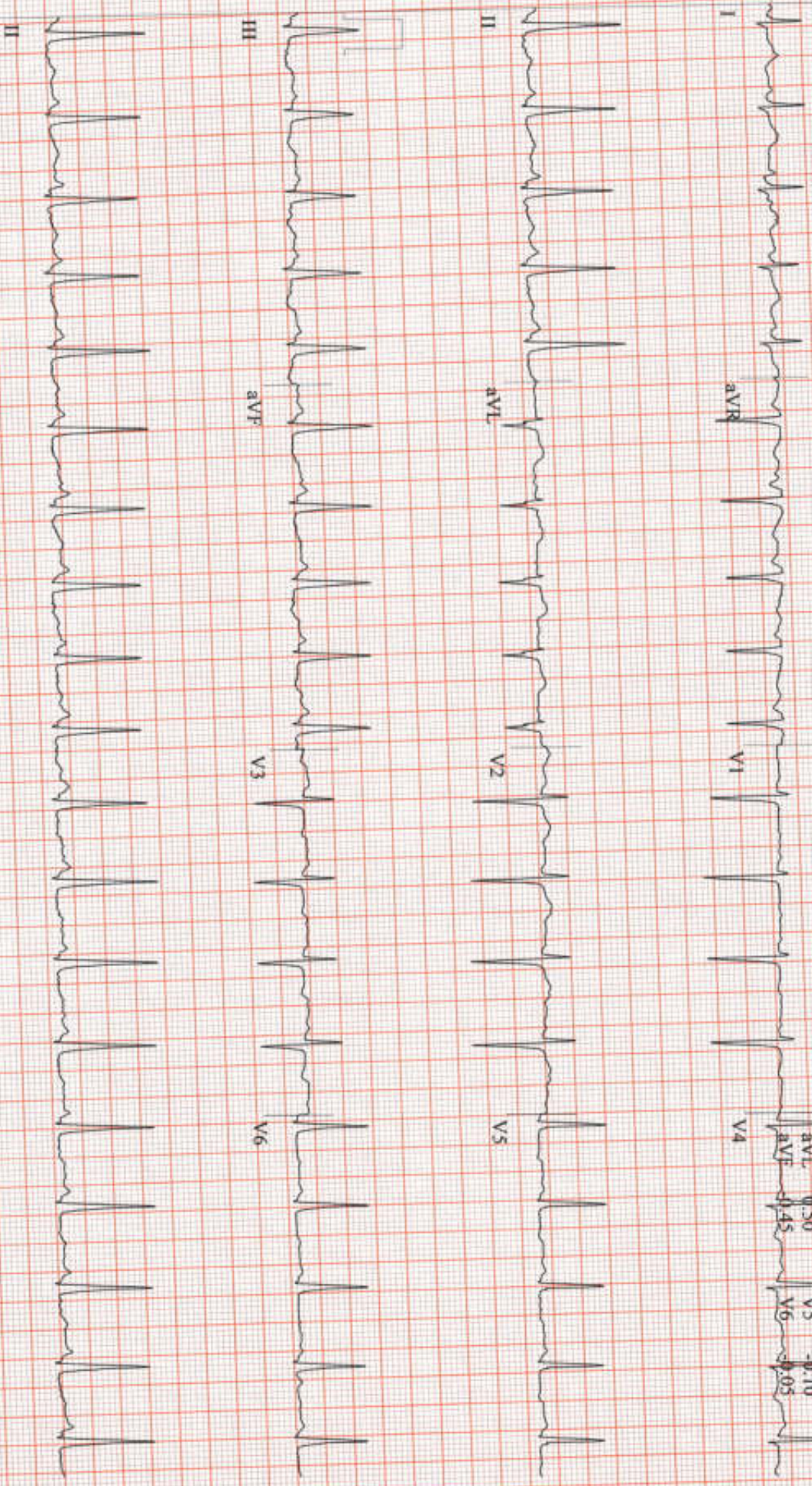
0.0 % Measured at 60 ms Post J (10mm/mV)

Auto Points

Lead ST(mm)

Lead ST(mm)

I	0.35	V1	0.10
II	-0.25	V2	0.45
III	-0.60	V3	-0.10
aVR	-0.05	V4	-0.15
aVL	0.50	V5	-0.10
aVF	0.45	V6	-0.05



GE CardioSoft V7.0 (10)
25 mm/s 10 mm/mV 50 Hz 0.05Hz FRF+ HR(QI, V1)

Start of Test: 12:24:49pm

SONAM, KUMARI

Patient ID: 0000000076

23.03.2024 Female 156 cm 63 kg

12:29:03pm 31 yrs Asian

Exercise Test / Comparative Medians Report

EXERCISE

STAGE 1

02:50

BRUCE

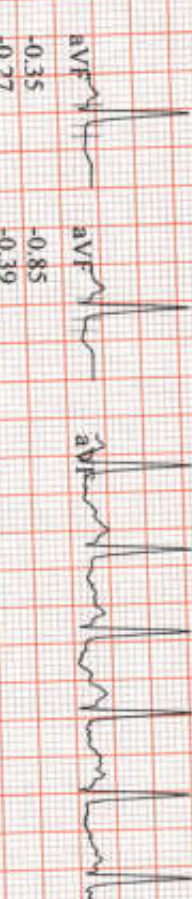
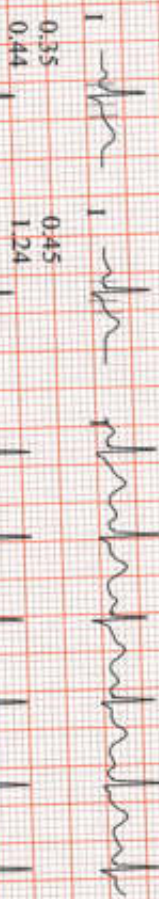
1.7 mph

10.0 %

APOLLO SPECIALITY HOSPITAL

Lead
ST Level (mm)
ST Slope (mV/s)

BASELINE CURRENT
60 ms post J 60 ms post J



GE CardioSoft V7.0 (10)
25 mm/s 10 mm/mV 50 Hz 0.05Hz FRF+ HR(II,V1)

Start of Test: 12:24:49pm

SONAM, KUMARI

Patient ID: 0000000076

23.03.2024

12:32:03pm

Exercise Test / Comparative Medians Report

EXERCISE

STAGE 2

05:50

BRUCE

2.5 mph

12.0 %

APOLLO SPECIALITY HOSPITAL

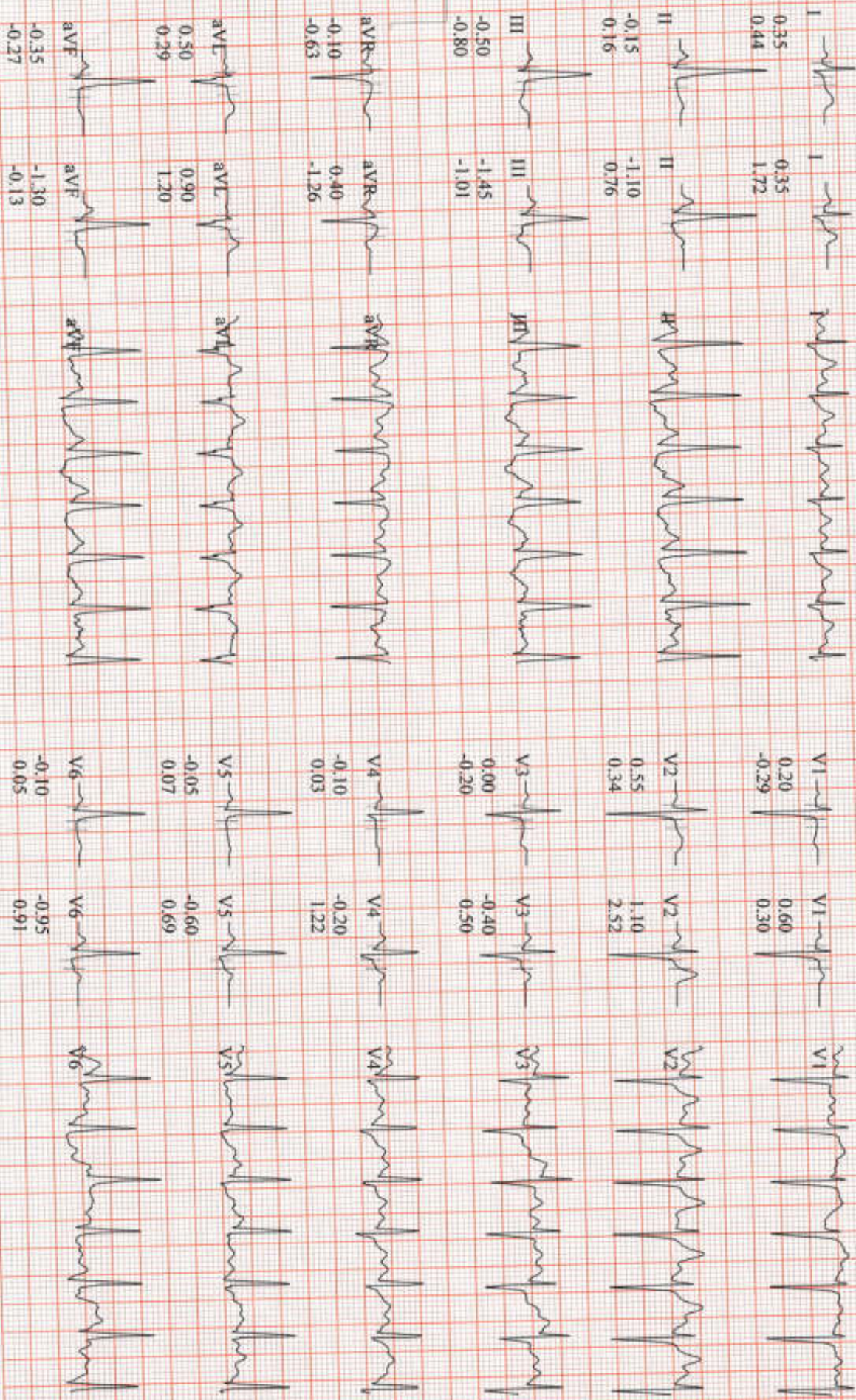
Lead

ST Level (mm)

ST Slope (mV/s)

BASELINE 60 ms post J

CURRENT 60 ms post J



GE CardioSoft V7.0 (10)
25 mm/s 10 mm/mV 50 Hz 0.05Hz FRF+ HR(II,V1)

Start of Test: 12:24:49pm

SONAM, KUMARI

Patient ID: 0000000076

23.03.2024 Female 156 cm 63 kg

12:34:28pm 31 yrs Asian

Exercise Test / 12-Lead Report (PEAK EXERCISE)

EXERCISE

STAGE 3

08:10

APOLLO SPECIALITY HOSPITAL

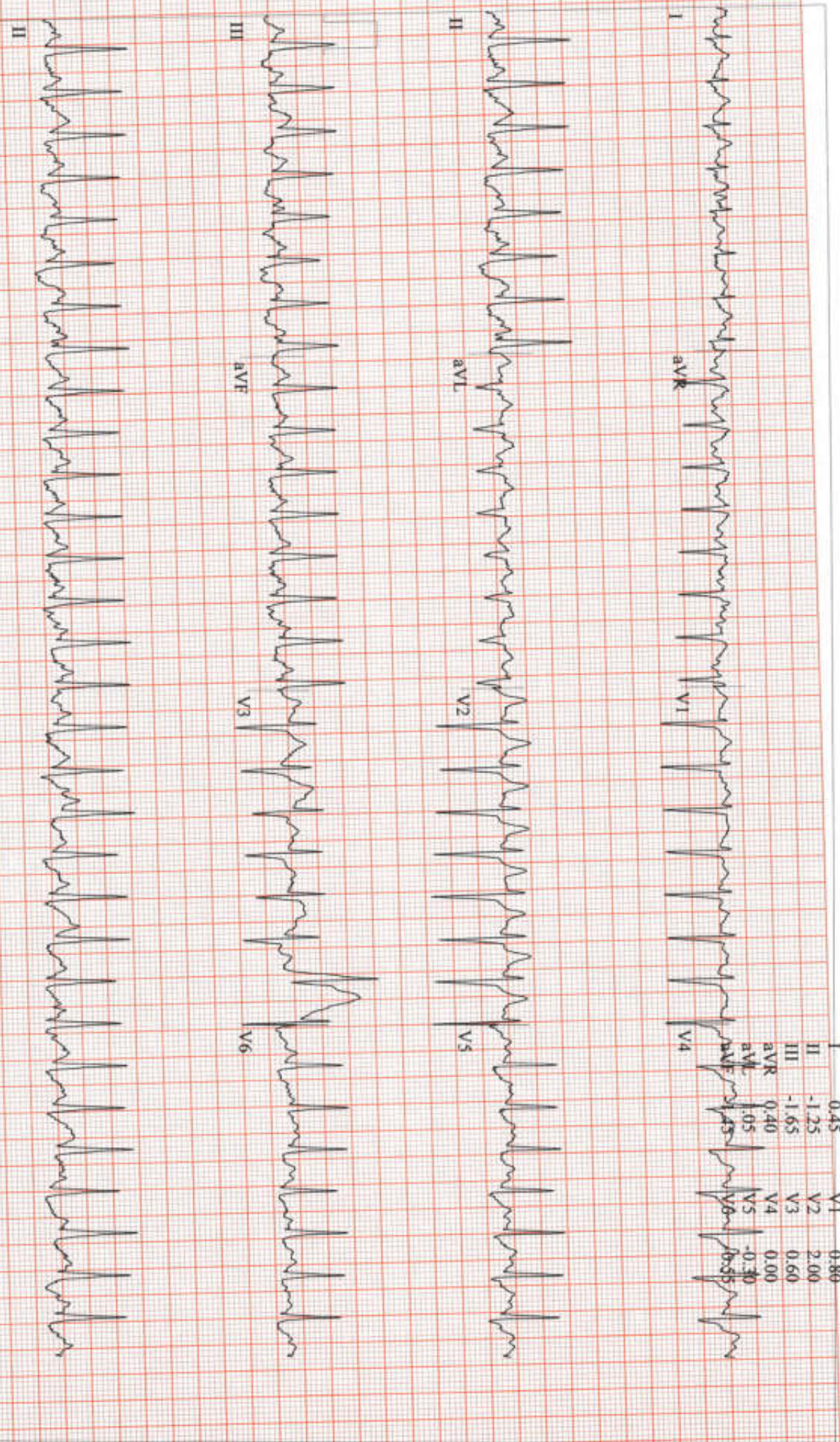
BRUCE

3.4 mph

14.0 % Measured at 60 ms Post J (10mm/mV)

Auto Points
Lead ST(mm) Lead ST(mm)

I	0.45	V1	0.80
II	-1.25	V2	2.00
III	-1.65	V3	0.60
aVR	0.40	V4	0.00
aVL	-0.05	V5	-0.30
aVF	0.55	V6	0.55



GE CardioSoft V7.0 (10)
25 mm/s 10 mm/mV 50 Hz 0.05Hz FRF+ HR(V2,V5)

Start of Test: 12:24:49pm

SONAM, KUMARI

Patient ID: 0000000076

23.03.2024 Female 156 cm 63 kg

12:35:17pm 31 yrs Asian

Exercise Test / 12-Lead Report

RECOVERY

171 bpm

144/90 mmHg

#1

00:50

APOLLO SPECIALITY HOSPITAL

BRUCE

0.0 mph

0.0 % Measured at 60 ms Post J (10mm/mV)

Auto Points

Lead ST(mm) Lead ST(mm)

I 1.25

II 0.55

III -0.70

aVR -0.85

aVL 1.00

aVF 1.00

V1 1.00

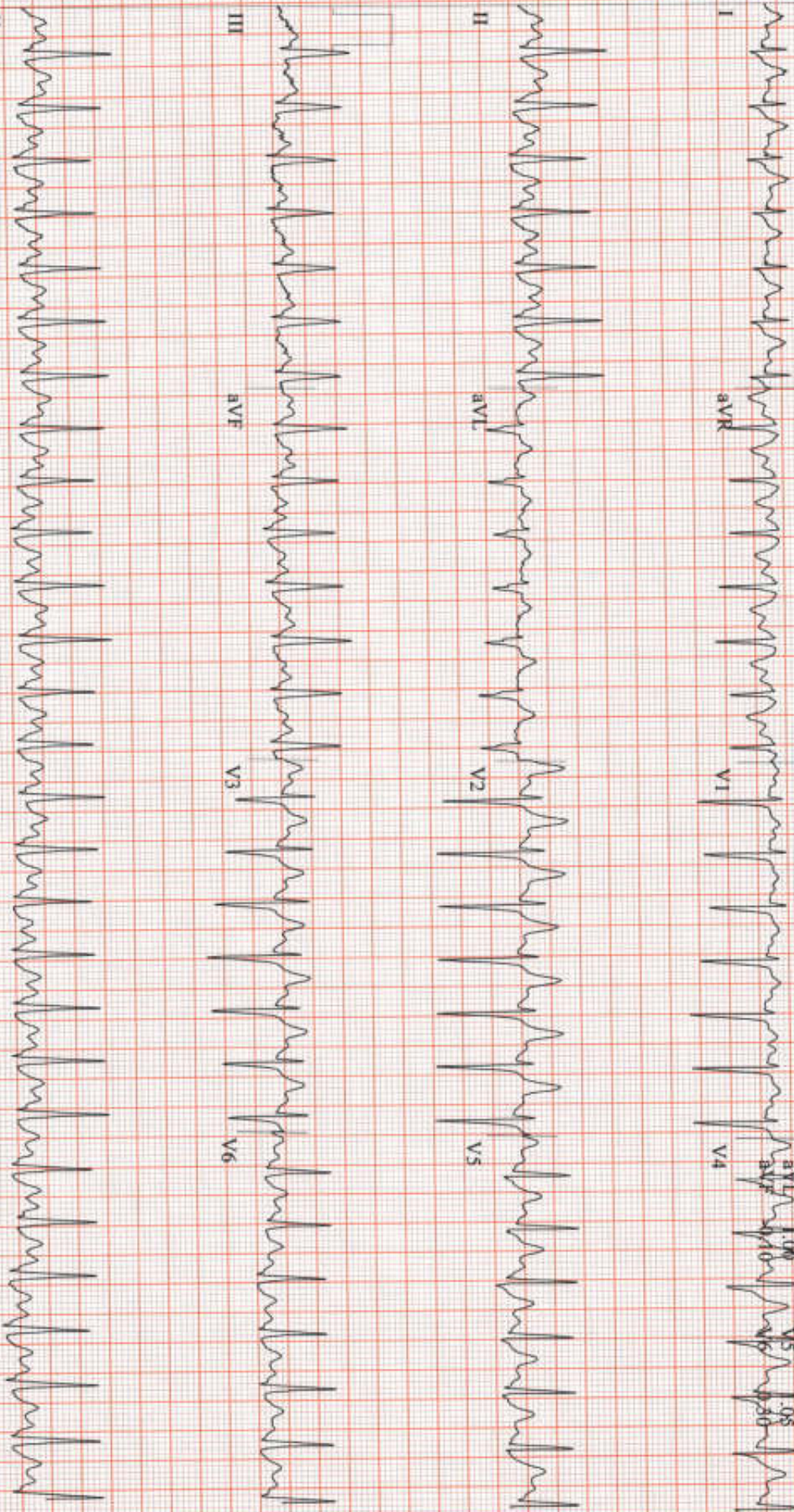
V2 3.35

V3 2.00

V4 1.70

V5 1.05

V6 1.50



GE CardioSoft V7.0 (10)

25 mm/s 10 mm/mV 50 Hz 0.05Hz FRF+ HR(V2,V5)

Start of Test: 12:24:49pm

SONAM, KUMARI

Patient ID: 0000000076

23.03.2024 Female 156 cm 63 kg

12:36:17pm 31 yrs Asian

Exercise Test / 12-Lead Report

RECOVERY

#1

01:50

APOLLO SPECIALITY HOSPITAL

BRUCE

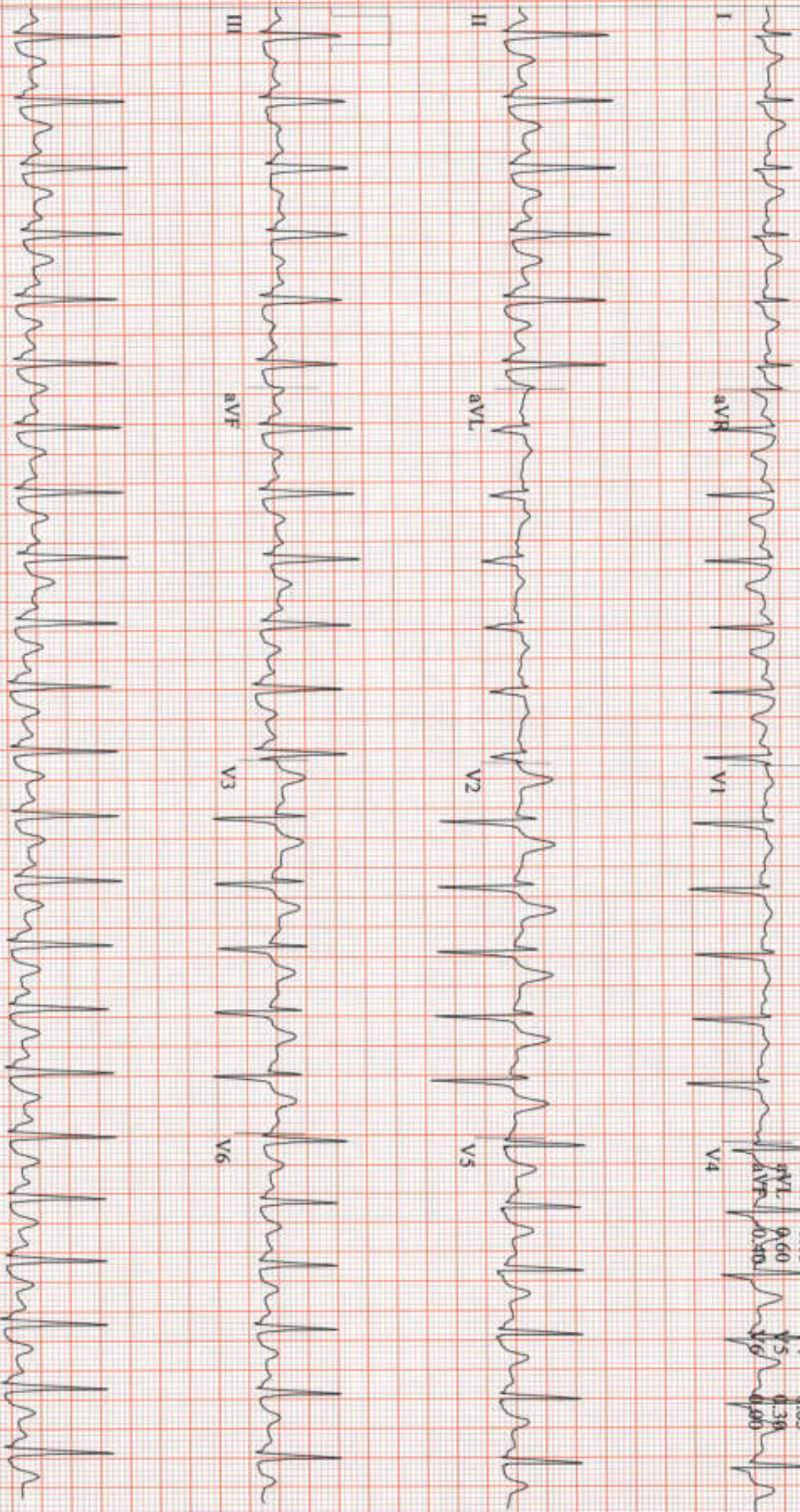
0.0 mph

0.0% Measured at 60 ms Post J (10mm/mV)

Auto Points

Lead ST(mm) Lead ST(mm)

I	0.55	V1	0.70
II	-0.15	V2	1.70
III	-0.65	V3	1.00
aVR	-0.15	V4	0.65
aVL	0.60	V5	1.30
aVF	0.40	V6	1.00



GE CardioSoft V7.0 (10)

25 mm/s 10 mm/mV 50 Hz 0.05Hz FRF+ HR(V2,V5)

Start of Test: 12:24:49pm

SONAM, KUMARI

Patient ID: 0000000076

23.03.2024 Female 156 cm 63 kg

12:37:17pm 31 yrs Asian

Exercise Test / 12-Lead Report

RECOVERY

#1

137 bpm

02:50

APOLLO SPECIALITY HOSPITAL

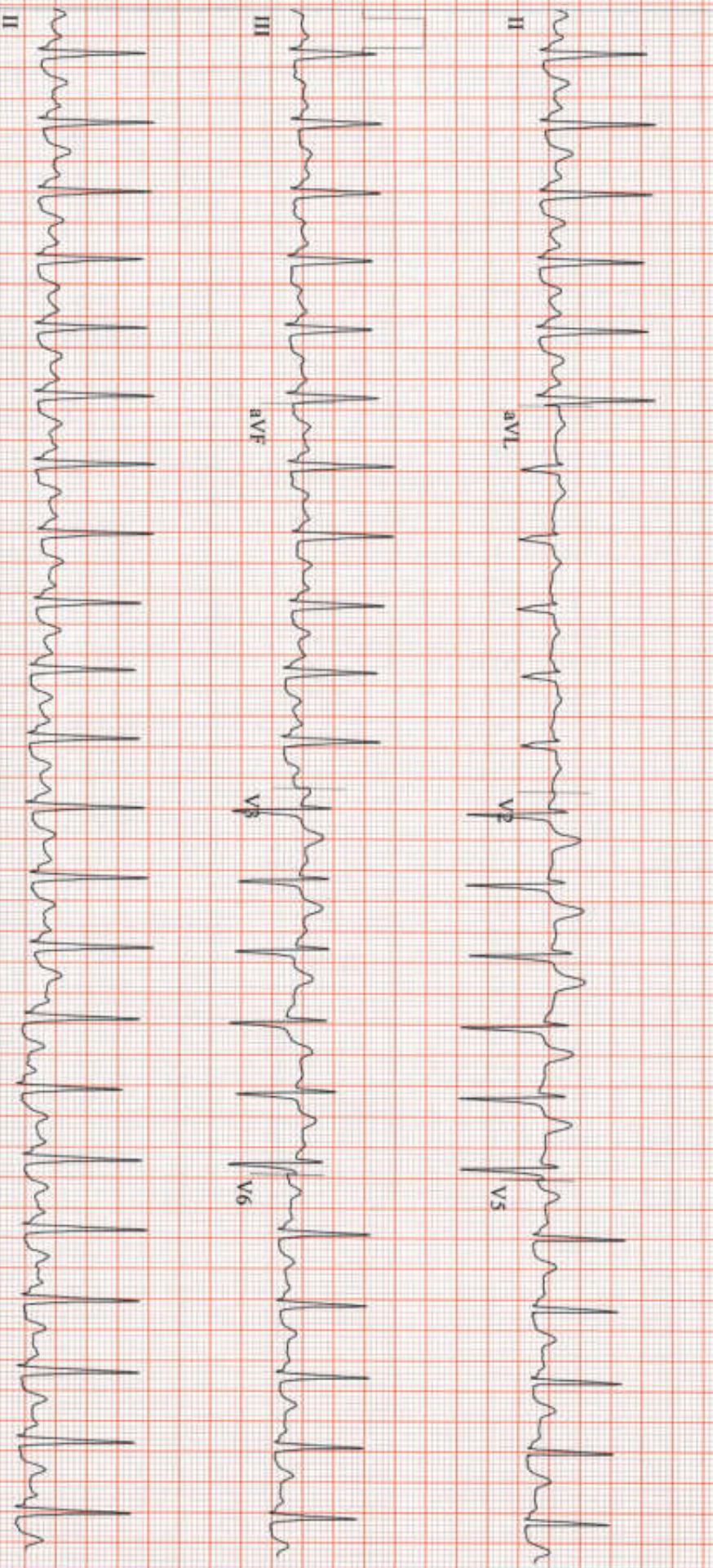
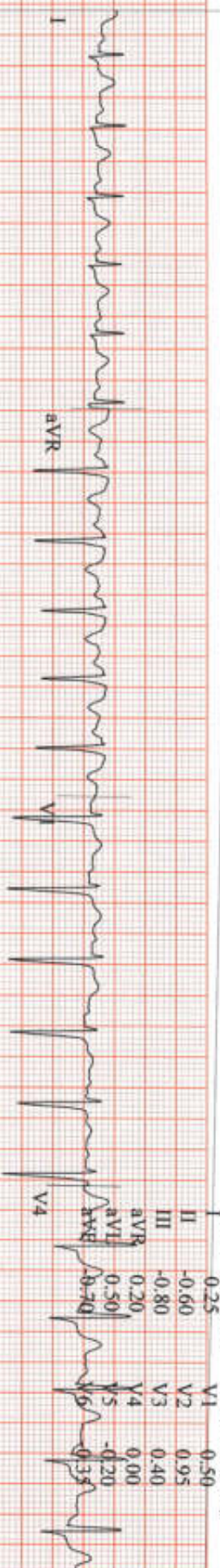
BRUCE

0.0 mph

0.0 % Measured at 60 ms Post J (10mm/mV)

Auto Points

Lead ST(mm) Lead ST(mm)



GE CardioSoft V7.0 (10)
 25 mm/s 10 mm/mV 50 Hz 0.05Hz FRF+ HR(V2,V5)

Start of Test: 12:24:49pm


Apollo One

CONSENT FORM

Patient Name: Sonam Kumari Gupta Age: 32
UHID Number: CAOP000000076 Company Name: ARCOFEMI

I Mr/Mrs/Ms. Sonam Ranjeet Baramwal Employee of Bank of Baroda
(Company) Want to inform you that I am not interested in getting Echo test in place of
Tests done which is a part of my routine health check package. echo Neck TMT test

And I claim the above statement in my full consciousness.

Patient Signature:  Date: 23/3/2024
Sonam Kumari Gupta

Apollo One - New Delhi Address:

Apollo One, Plot no. 3 - Block no. 34, Pusa Road,
WEA, Opposite Metro Pillar No. 77, Karol Bagh, Pusa Road
NEW DELHI, DELHI INDIA

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