


Patient Name	: Mrs.POOJA O N	Collected	: 23/Dec/2023 09:44AM
Age/Gender	: 33 Y 1 M 26 D/F	Received	: 23/Dec/2023 11:20AM
UHID/MR No	: CMYS.0000058989	Reported	: 23/Dec/2023 01:37PM
Visit ID	: CMYSOPV120674	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: APIPN1881M		

DEPARTMENT OF HAEMATOLOGY

PERIPHERAL SMEAR , WHOLE BLOOD EDTA

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

SIN No:BED230318870



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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
<b>HEMOGRAM , WHOLE BLOOD EDTA</b>				
<b>HAEMOGLOBIN</b>	13.4	g/dL	12-15	Spectrophotometer
PCV	41.50	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.8	Million/cu.mm	3.8-4.8	Electrical Impedance
MCV	86	fL	83-101	Calculated
MCH	28	pg	27-32	Calculated
MCHC	32.4	g/dL	31.5-34.5	Calculated
R.D.W	13.3	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	<b>10,300</b>	cells/cu.mm	4000-10000	Electrical Impedance
<b>DIFFERENTIAL LEUCOCYTIC COUNT (DLC)</b>				
NEUTROPHILS	57.3	%	40-80	Electrical Impedance
LYMPHOCYTES	34.9	%	20-40	Electrical Impedance
EOSINOPHILS	1.8	%	1-6	Electrical Impedance
MONOCYTES	5.5	%	2-10	Electrical Impedance
BASOPHILS	0.5	%	<1-2	Electrical Impedance
<b>ABSOLUTE LEUCOCYTE COUNT</b>				
NEUTROPHILS	5901.9	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	<b>3594.7</b>	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	185.4	Cells/cu.mm	20-500	Calculated
MONOCYTES	566.5	Cells/cu.mm	200-1000	Calculated
BASOPHILS	51.5	Cells/cu.mm	0-100	Calculated
<b>PLATELET COUNT</b>	319000	cells/cu.mm	150000-410000	Electrical impedance
<b>ERYTHROCYTE SEDIMENTATION RATE (ESR)</b>	12	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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**ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324**

**Platelets:** Adequate and are seen in singles and clumps.

**Hemoparasites:** Not seen.

**IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE.**

  
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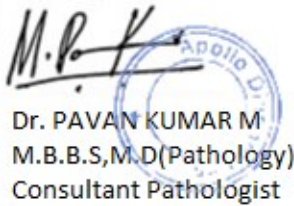


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**DEPARTMENT OF HAEMATOLOGY**

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

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



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Patient Name : Mrs.POOJA O N	Collected : 23/Dec/2023 09:44AM
Age/Gender : 33 Y 1 M 26 D/F	Received : 23/Dec/2023 02:15PM
UHID/MR No : CMYS.0000058989	Reported : 23/Dec/2023 03:29PM
Visit ID : CMYSOPV120674	Status : Final Report
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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	107	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.

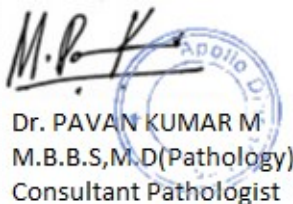
Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	142	mg/dL	70-140	GOD - POD

Comment:

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

Conditions which may lead to lower postprandial glucose levels as compared to fasting glucose levels may be due to reactive hypoglycemia, dietary meal content, duration or timing of sampling after food digestion and absorption, medications such as insulin preparations, sulfonylureas, amylin analogues, or conditions such as overproduction of insulin.

Test Name	Result	Unit	Bio. Ref. Range	Method
HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA				
HBA1C, GLYCATED HEMOGLOBIN	5.7	%		HPLC



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SIN No:EDT230118025



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**DEPARTMENT OF BIOCHEMISTRY**

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

ESTIMATED AVERAGE GLUCOSE (eAG)	117	mg/dL	Calculated
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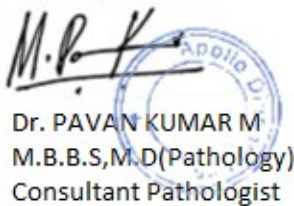
**Comment:**

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

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

**Note:** Dietary preparation or fasting is not required.

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



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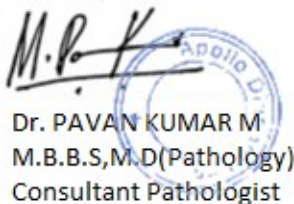
Test Name	Result	Unit	Bio. Ref. Range	Method
<b>LIPID PROFILE , SERUM</b>				
TOTAL CHOLESTEROL	258	mg/dl	0-200	CHOD
TRIGLYCERIDES	150	mg/dl	0-150	GPO, Trinder
HDL CHOLESTEROL	36	mg/dL	>40	CHE/CHO/POD
NON-HDL CHOLESTEROL	222	mg/dL	<130	Calculated
LDL CHOLESTEROL	192.19	mg/dL	<100	Calculated
VLDL CHOLESTEROL	29.92	mg/dL	<30	Calculated
CHOL / HDL RATIO	7.19		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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DEPARTMENT OF BIOCHEMISTRY

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

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

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>LIVER FUNCTION TEST (LFT) , SERUM</b>				
BILIRUBIN, TOTAL	0.66	mg/dl	0-1.2	NBD
BILIRUBIN CONJUGATED (DIRECT)	0.10	mg/dl	0-0.2	Diazotized sulfanilic acid
BILIRUBIN (INDIRECT)	0.56	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	26	U/l	0-45	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	21.0	U/l	0-31	IFCC
ALKALINE PHOSPHATASE	85.00	U/l	42-98	IFCC (AMP buffer)
PROTEIN, TOTAL	8.00	g/dl	6.4-8.3	Biuret
ALBUMIN	4.46	g/dl	3.5-5.2	Bromcresol Green
GLOBULIN	<b>3.54</b>	g/dL	2.0-3.5	Calculated
A/G RATIO	1.26		0.9-2.0	Calculated

**Comment:**

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

Common patterns seen:

**1. Hepatocellular Injury:**


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

**2. Cholestatic Pattern:**

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

**3. Synthetic function impairment:**

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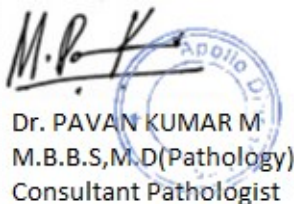


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- Albumin- Liver disease reduces albumin levels.
- Correlation with PT (Prothrombin Time) helps.



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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
<b>RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM</b>				
CREATININE	0.63	mg/dL	0.5-1.04	Creatinine amidohydrolase
UREA	19.78	mg/dl	13-43	Urease, UV
BLOOD UREA NITROGEN	9.2	mg/dL	8.0 - 23.0	Calculated
URIC ACID	4.70	mg/dL	2.5-6.2	Uricase
CALCIUM	10.25	mg/dl	8.6-10.3	Arsenazo III
PHOSPHORUS, INORGANIC	3.78	mg/dl	2.7-4.5	Molybdate
SODIUM	142	mmol/L	135-145	Direct ISE
POTASSIUM	4.1	mmol/L	3.5-5.1	Direct ISE
CHLORIDE	101	mmol/L	98 - 107	Direct ISE



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Test Name	Result	Unit	Bio. Ref. Range	Method
<b>GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM</b>	<b>52.00</b>	U/l	0-38	IFCC

  
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DEPARTMENT OF IMMUNOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM</b>				
TRI-IODOTHYRONINE (T3, TOTAL)	1.17	ng/mL	0.64-1.52	CMIA
THYROXINE (T4, TOTAL)	9.9	µg/dL	4.87-11.72	CMIA
THYROID STIMULATING HORMONE (TSH)	2.110	µIU/mL	0.35-4.94	CMIA

Comment:

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

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

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



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SIN No:SPL23189159



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DEPARTMENT OF IMMUNOLOGY

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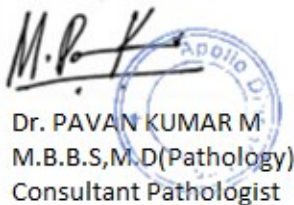


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DEPARTMENT OF CLINICAL PATHOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>COMPLETE URINE EXAMINATION (CUE) , URINE</b>				
<b>PHYSICAL EXAMINATION</b>				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pH	7.0		5-7.5	Bromothymol Blue
SP. GRAVITY	1.015		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:UR2248437



Patient Name : Mrs.POOJA O N	Collected : 23/Dec/2023 09:44AM
Age/Gender : 33 Y 1 M 26 D/F	Received : 23/Dec/2023 01:35PM
UHID/MR No : CMYS.0000058989	Reported : 23/Dec/2023 02:25PM
Visit ID : CMYSOPV120674	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : APIPN1881M	

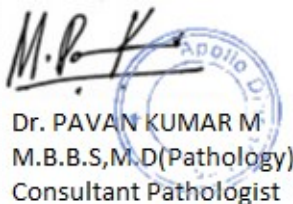
**DEPARTMENT OF CLINICAL PATHOLOGY**

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

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

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

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



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

SIN No:UF010068





<b>Patient Name</b>	: Mrs. POOJA O N	<b>Age/Gender</b>	: 33 Y/F
<b>UHID/MR No.</b>	: CMYS.0000058989	<b>OP Visit No</b>	: CMYSOPV120674
<b>Sample Collected on</b>	:	<b>Reported on</b>	: 27-12-2023 11:40
<b>LRN#</b>	: RAD2188316	<b>Specimen</b>	:
<b>Ref Doctor</b>	: SELF		
<b>Emp/Auth/TPA ID</b>	: APIPN1881M		

## DEPARTMENT OF RADIOLOGY

### ULTRASOUND - WHOLE ABDOMEN

**LIVER:** It is increased in size(17.6 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 99x42mm with parenchymal thickness of 11mm. It is normal in size, outline and echotexture. No e/o calculus or hydronephrosis seen.

**LEFT KIDNEY:** It measures 108x50 mm with parenchymal thickness of 14 mm. It is normal in size, outline and echotexture. No e/o calculus or hydronephrosis seen.

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

**UTERUS:** It is anteverted and measures 71x36x46mm with ET=7 mm. It is normal in size, outline and echotexture. No mass lesion.

**Rt. OVARY:** It measures 33x23 mm. It is normal. No mass lesion seen.

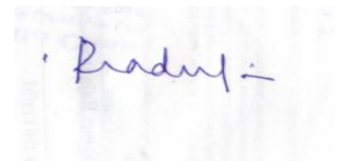
**Lt. OVARY:** It measures 29x31 mm. It is normal. No mass lesion seen.

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

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

**IMPRESSION:** FATTY LIVER.

Pradeep Kumar C N, DNB  
Consultant Radiologist.



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

## CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

of poorna on 23/12/2015

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. Aravind  
**Medical Officer Clinic**  
**The Apollo Clinic, Mysore.**  
**Kalidasa Road, Mysore - 02**

*This certificate is not meant for medico-legal purposes*

**Apollo Health and Lifestyle Limited**

(CIN: DR5110TG2000PLC115819)  
 Regd. Office: T-10/60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016  
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 Koramangala | Sarjapur Road: Mysore (VV Mohalla)

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

**1860 500 7788**

Date : 23-12-2023  
 MR NO : CMYS.0000058989  
 Name : Mrs. POOJA O N  
 Age/ Gender : 33 Y / Female

Department : GENERAL  
 Doctor :  
 Registration No :  
 Qualification :

Consultation Timing: 09:18

Height: 1.54	Weight: 65.6	BMI:	Waist Circum: 110/80
Temp:	Pulse:	Resp:	

General Examination /  
 Allergies History

Clinical Diagnosis & Management Plan

Come for medical health check

2024 - Normal

Blood Au - IPBS - 142 , FBS - 107

TC - 258 | LDL - 192

Urinary R<sub>2</sub> - Normal

Chest xray - Normal Study

USG Abdomen & Pelvis - Fatty Liver

Life Life style modification



Follow up date :

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

Date : 23-12-2023  
MR NO : CMYS.0000058989

Department : GENERAL Dietetics  
Doctor : Madhura. B.P

Name : Mrs. POOJA O N

Registration No :

Age/ Gender : 33 Y / Female

Qualification : M.Sc Nutrition & Dietetics  
PHD\*

Consultation Timing: 09:18

IBW - 52 kg

Height : 1.54	Weight : 65.6	BMI : 28 kg/m <sup>2</sup>	Waist Circum :
Temp :	Pulse :	Resp :	B.P : 110/86

General Examination /  
Allergies History

Clinical Diagnosis & Management Plan

ICLCL - PCOD

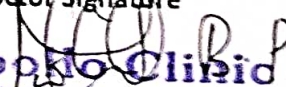
4<sup>th</sup> - fatty liver

FBS - 107  
PPBS - 142  
HbA1c - 5.7%  
Total cholesterol - 258  
HDL - 36  
NON HDL - 222  
LDL - 192.19  
chol / HDL - 7.19

- Advise low fat diet with complex carbony - dates and avoid simple sugars.
- Take small frequent meals. Do not skip meals.
- Include all variety of seasonal fruits, vegetables and green leafy vegetables daily.
- Include nuts like Almonds, walnuts & dry fruits like dried dates & raisins.
- seed cycle - 1 teaspoon each, dry roasted.  
\* 1<sup>st</sup> day - 15<sup>th</sup> day of periods - Flax seeds & Pumpkin seeds.  
\* 16<sup>th</sup> day - 30<sup>th</sup> day - Sesame seeds & Sunflower seeds
- Drink 12-14 big glasses of water / day.

Follow up date :

Doctor Signature

  
**Apollonia Clinic**  
# 23, 1st Floor  
Kalidasa Road, Mysore 57  
Ph : 0821-4006040/41

Date : 23-12-2023  
MR NO : CMYS.0000058989  
Name : Mrs. POOJA O N  
Age/ Gender : 33 Y / Female

Department : GENERAL  
Doctor : Neethu Piyajale  
Registration No :  
Qualification :

Consultation Timing: 09:18

Height : 154	Weight : 65.6	BMI :	Waist Circum :
Temp :	Pulse :	Resp :	B.P : 110/80

General Examination /  
Allergies History

Clinical Diagnosis & Management Plan

Res - Sh - normal  
Lungs - NAD  
Throat - NAD.

Follow up date :

  
**Apollo Clinic**  
# 23, 1st Floor,  
Kalidasa Road, Mysore - 02  
Ph : 0822 222040/41  
Doctor Signature

Date : 23-12-2023  
 MR NO : CMYS.0000058989 . 900JA

Department : GENERAL  
 Doctor : 3211F . 23/12/23

Name : Mrs. POOJA O N

Registration No :

Age/ Gender : 33 Y / Female

Qualification :

Consultation Timing: 09:18

Height : 154	Weight : 65.6	BMI :	Waist Circum :
Temp :	Pulse :	Resp :	B.P : 110 / 80

General Examination /  
Allergies History

Clinical Diagnosis & Management Plan

uses → fatty liver.

menus & ovumies (N)

10<sup>th</sup> - 20<sup>th</sup>

↓

Fertile period

TI

x3m

wants to conceive

onlasts → NAD .

- regular walk / yoga .

- avoid junk foods .

- low ut / low fat diet .

- TAB. FOLYMIC ACT 0-1-0 (30) .

x3m-  
4m

Follow up date :

Dr. S. S.  
 Doctor Signature  
 Apollo Clinic  
 # 23, 1st Floor,  
 Kalidasa Road, Mysore - 02  
 Ph : 0821-4006040/61

Date : 23-12-2023  
 MR NO : CMYS.0000058989  
 Name : Mrs. POOJA O N  
 Age/ Gender : 33 Y / Female

Department : GENERAL  
 Doctor :  
 Registration No :  
 Qualification :

Consultation Timing: 09:18

Height : 154	Weight : 65.6	BMI :	Waist Circum :
Temp :	Pulse :	Resp :	B.P : 110/80

General Examination /  
Allergies History

Clinical Diagnosis & Management Plan

Near  
vism

Distant  
vism.

Close  
vism.

Rt eye

N6

6/6

(N)

Left eye

N6.

6/6

(N)

Follow up date :

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

ID: 58989  
 MRS. POOJA O N  
 23-12-2023 12:20:11 PM

ID: 58989

MRS POOJA O N

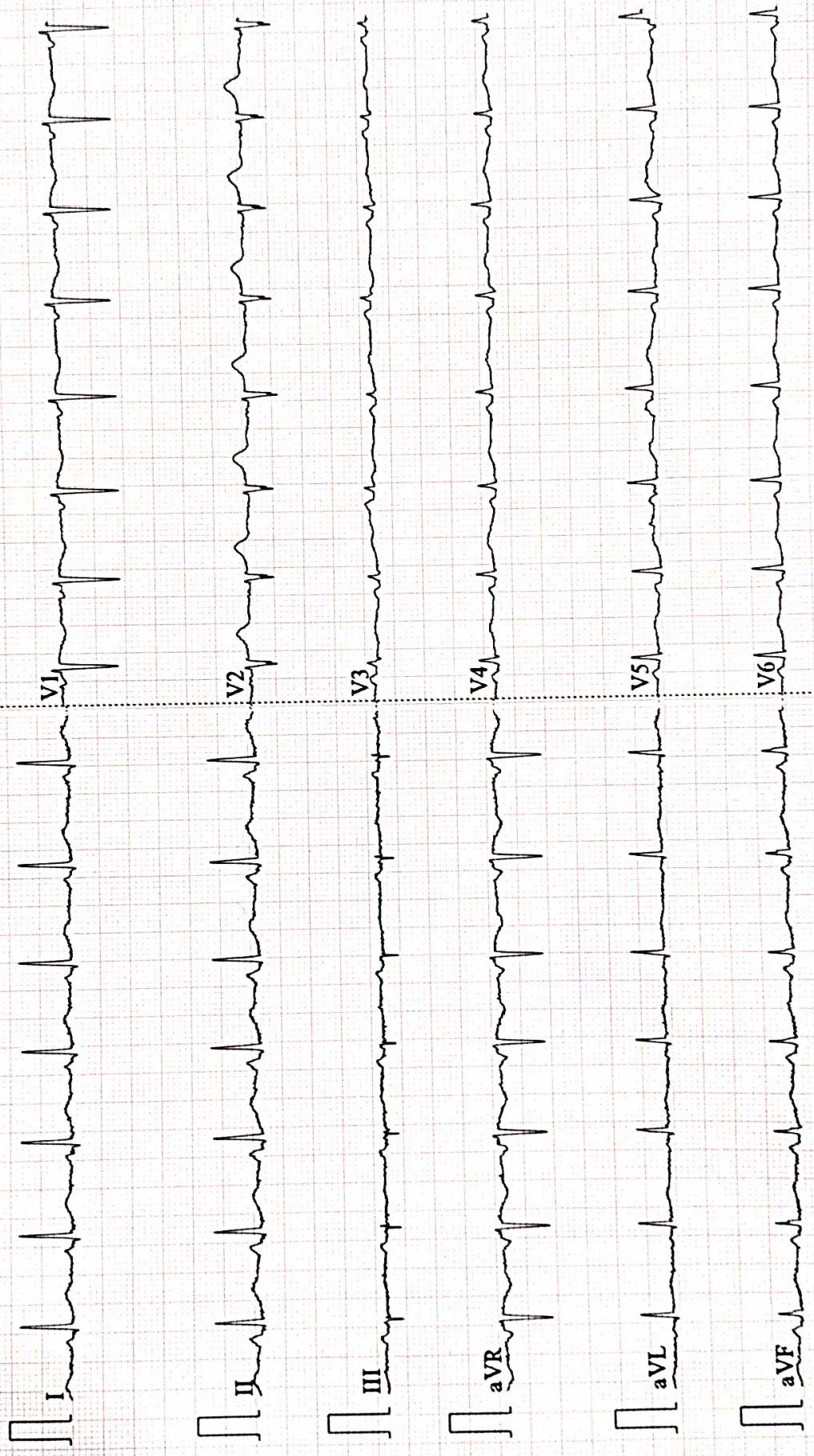
Female 33Years

154cm 65kg 110/80 mmHg

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

Diagnosis Information:

Unconfirmed Report.





Patient Name	: Mrs. POOJA O N	Age	: 33 Y F
UHID	: CMYS.0000058989	OP Visit No	: CMYSOPV120674
Reported on	: 23-12-2023 15:52	Printed on	: 23-12-2023 15:53
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 15:52

---End of the Report---

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

**Apollo Health and Lifestyle Limited**

CIN: URS110TG2000PLC1158191

Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016

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Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

**1860 500 7788**

Patient Name: Mrs .Pooja O N	Date : 23.12.2023	Referring Doctor: Dr .Self
Age / Sex: 33 Yrs/Female	UHID NO:58989	Location : OP
<b>ULTRASONOGRAPHY- ABDOMEN &amp; PELVIS</b>		

**LIVER:** It is increased in size(17.6 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 99x42mm with parenchymal thickness of 11mm. It is normal in size, outline and echotexture. No e/o calculus or hydronephrosis seen.

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**Rt. OVARY:** It measures 33x23 mm. It is normal. No mass lesion seen.

**Lt. OVARY:** It measures 29x31 mm. It is normal. No mass lesion seen.

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

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

**IMPRESSION: FATTY LIVER.**

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

Apollo Health and Lifestyle Limited

10th Floor, Apollo Hospitals, 100 Feet Road, Banjara Hills, Hyderabad, Telangana - 500 016

Phone: 080 4749 4749 | Fax: 080 4749 7744 | Email: info@apollohospitals.com | www.apollohospitals.com

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Online Appointment: www.apollohospitals.com

TO BOOK AN APPOINTMENT

**1860 500 7788**

Patient's Name : Mrs.Pooja O N	Age & Sex; 33Yrs /Female
Date : 23.12.2023	UHID No:58989

**2D ECHOCARDIOGRAPHY STUDY**

**Impression:**

- Normal chambers and valves
- No regional wall motion abnormality
- Normal left ventricular systolic function. EF 69 %
- No clots. No pericardial effusion

**Findings**

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

**Apollo Health and Lifestyle Limited**

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TO BOOK AN APPOINTMENT

**1860 500 7788**

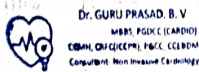
Patient's Name : Mrs.Pooja O N	Age & Sex; 33Yrs /Female
Date : 23.12.2023	UHID No:58989

Measurements

AO : 1.9 cm  
 LA : 2.0 cm  
  
 RV : 2.1 cm  
 LVIDd 3.61 cm  
 LVIDs : 2.22 cm  
 IVSd : 0.80 cm  
 IVSs : 1.08 cm  
 PWd : 0.90 cm  
 PWs : 1.01 cm  
 EF : 69.0 %  
 FS : 32.0 %

Doppler  
 MV TV AV PV  
 E 0.73 m/s E --- m/s V max 1.27 m/s V max 1.27 m/s  
 :  
 A: 0.56 m/s A --- m/s  
 MR Nil TR Nil AR Nil PR Nil

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



Apollo Health and Lifestyle Limited

(CIN: U28511TG2000PLC115819)  
 Regd Office: 110/63/62, Ashoka Rajbhushathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016  
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TO BOOK AN APPOINTMENT

**1860 500 7788**

**Informed Consent/Declaration For Test Exclusion**

Patient Name: Mrs Pooja ON Age: 33

UHID Number: 58989

Please tick and sign the relevant part

I certify that I will skip PBC Pap smear Test from my own.

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

Patient signature: Pooja ON Date: 23/12/23

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

<b>Patient Name</b>	: Mrs. POOJA O N	<b>Age/Gender</b>	: 33 Y/F
<b>UHID/MR No.</b>	: CMYS.0000058989	<b>OP Visit No</b>	: CMYSOPV120674
<b>Sample Collected on</b>	:	<b>Reported on</b>	: 23-12-2023 15:53
<b>LRN#</b>	: RAD2188316	<b>Specimen</b>	:
<b>Ref Doctor</b>	: SELF		
<b>Emp/Auth/TPA ID</b>	: APIPN1881M		

**DEPARTMENT OF RADIOLOGY**

**X-RAY CHEST PA**

Both lung fields and hila are normal .

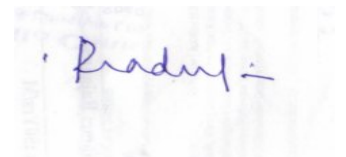
No obvious active pleuro-parenchymal lesion seen .

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. POOJA O N  
Age/Gender: 33 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.0000058989  
Visit ID: CMYSOPV120674  
Visit Date: 23-12-2023 09:18  
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: **65.6,**

-=: **154,**

## **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 : Miss. POOJA O N  
 Age Gender : 33 Y F  
 Contact No : +918660760288  
 Address : MYSORE  
 UHID : CMYS.0000058989  
 Corporate Name : ARCOFEMI HEALTHCARE LIMITED  
 Plan : ARCOFEMI MEDIWHEEL FEMALE AHC CREDIT PAN INDIA OP AGREEMENT

Bill No : CMYS-OCR-21968  
 Bill/Reg Date : 23.12.2023 09:18  
 Referred by : SELF  
 Center : Mysore  
 Emp No/Auth Code : APIPN1881M

#	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 HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324	999312	1	2,400.00	2,400.00	0.00	0.00	0.00	0.00	0.00	2,400.00
<b>Bill Amount:</b>											2,400.00	

You can download your report from "www.apolloclinic.com" Enter user name as CMYSOPV120674 and password as 33771  
 Please log on to AskApollo.com for booking Appointments

**Apollo Health and Lifestyle Limited**  
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 Regd. Office: # 1, 61/2, A, G15 & G16, Imperial Towers, 7th Floor, Amberpet, Hyderabad - 500048, Telangana |  
 www.apollohl.com | Email ID: enquiry@apollohl.com | Ph No: 040-4904 7777, Fax No: 4904 7744

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 Karnataka: Bengaluru (Basavurthi) | Bellary | Bangalore (Cherry) | HSR Layout | Indira Nagar | JP Nagar | Kumbalur  
 Karnataka: Bengaluru (Koramangala) | Sarjapur Road | Mysore (VV Mohalla) | Tamil Nadu: Chennai (Anna Nagar) | Kotturpuram | I Nagar | Valsaravakkam | Velachery  
 Maharashtra: Pune (Aundh) | High Street | Viman Nagar | West Bengal: Kolkata (Uttar Pradesh) | Ghazalbad (Bhubaneswar)

**GSTIN: 29AADCA0733E1Z3**  
**Address:**  
 22, 23, 24, 25/101/3, Sree Rama Layout,  
 BNR Complex, OPP RR Layout, JP Nagar,  
 7th Phase, Bengaluru, Karnataka

**1860 500 7788**



आयकर विभाग  
INCOME TAX DEPARTMENT



भारत सरकार  
GOVT. OF INDIA

POOJA O N  
OUSANA ERE GOWDA NAGESH  
GOWDA  
28/10/1990

Permanent Account Number

**APIPN1881M**

*Pooja. O. N.*

Signature



Sent from Yahoo Mail for iPhone

Reply Forward

our appointment is confirmed

noreply@apolloclinics.info <noreply@apolloclinics.info>

Fri 15-12-2023 16:53

To:gaganas21@yahoo.in <gaganas21@yahoo.in>

Cc:Mysore Apolloclinic <mysore@apolloclinic.com>;Yogeesh KV <mkt.mysore@apolloclinic.com>;Syamsunder M <syamsunder.m@apollohl.com>



Dear POOJA O N .,

Greetings from Apollo Clinics,

Your corporate health check appointment is confirmed at KALIDASA RAOD clinic on 2023-12-23 at 08:30-08:45.

Payment Mode	Credit
Corporate Name	ARCOFEMI HEALTHCARE LIMITED
Agreement Name	ARCOFEMI MEDIWHEEL FEMALE AHC CREDIT PAN INDIA OP AGREEMENT
Package Name	[ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324]

"Kindly carry with you relevant documents such as HR issued authorization letter and or appointment confirmation mail and or valid government ID proof and or company ID card and or voucher as per our agreement with your company or sponsor." Note: Video recording or taking photos inside the clinic premises or during camps is not allowed and would attract legal consequences."

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Note: Also once appointment is booked, based on availability of doctors at clinics tests will happen, any pending test will happen based on doctor availability and clinics will be updating the same to customers.

Instructions to be followed for a health check:

1. Please ensure you are on complete fasting for 10-To-12-Hours prior to check.
2. During fasting time do not take any kind of alcohol, cigarettes, tobacco or any other liquids (except Water) in the morning. If any medications taken, pls inform our staff before health check.
3. Please bring all your medical prescriptions and previous health medical records with you.
4. Kindly inform our staff, if you have a history of diabetes and cardiac problems.