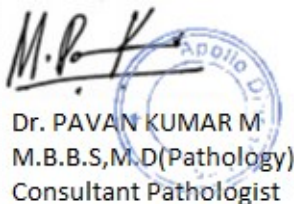


Patient Name	: Mrs.SHILPA N P	Collected	: 23/Dec/2023 08:38AM
Age/Gender	: 34 Y 6 M 20 D/F	Received	: 23/Dec/2023 11:20AM
UHID/MR No	: CMYS.0000058973	Reported	: 23/Dec/2023 01:36PM
Visit ID	: CMYSOPV120656	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: bobS2853		

DEPARTMENT OF HAEMATOLOGY

PERIPHERAL SMEAR , WHOLE BLOOD EDTA

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Dr. PAVAN KUMAR M
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Consultant Pathologist

SIN No:BED230318407



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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	13.2	g/dL	12-15	Spectrophotometer
PCV	41.20	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.73	Million/cu.mm	3.8-4.8	Electrical Impedance
MCV	87	fL	83-101	Calculated
MCH	27.9	pg	27-32	Calculated
MCHC	32.1	g/dL	31.5-34.5	Calculated
R.D.W	12.9	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	8,500	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	59.4	%	40-80	Electrical Impedance
LYMPHOCYTES	33.7	%	20-40	Electrical Impedance
EOSINOPHILS	2.5	%	1-6	Electrical Impedance
MONOCYTES	4.1	%	2-10	Electrical Impedance
BASOPHILS	0.3	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	5049	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2864.5	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	212.5	Cells/cu.mm	20-500	Calculated
MONOCYTES	348.5	Cells/cu.mm	200-1000	Calculated
BASOPHILS	25.5	Cells/cu.mm	0-100	Calculated
PLATELET COUNT	267000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	06	mm at the end of 1 hour	0-20	Modified Westergren
PERIPHERAL SMEAR				

R.B.C: Majority are normocytic normochromic.

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

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Dr. PAVAN KUMAR M
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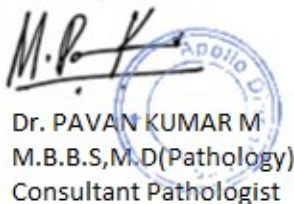
DEPARTMENT OF HAEMATOLOGY

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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SIN No:BED230318407



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Age/Gender : 34 Y 6 M 20 D/F	Received : 23/Dec/2023 11:20AM
UHID/MR No : CMYS.0000058973	Reported : 23/Dec/2023 01:50PM
Visit ID : CMYSOPV120656	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
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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
BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA				
BLOOD GROUP TYPE	B			Forward & Reverse Grouping with Slide/Tube Aggluti
Rh TYPE	POSITIVE			Forward & Reverse Grouping with Slide/Tube Agglutination



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

SIN No:BED230318407



Patient Name : Mrs.SHILPA N P	Collected : 23/Dec/2023 08:38AM
Age/Gender : 34 Y 6 M 20 D/F	Received : 23/Dec/2023 11:44AM
UHID/MR No : CMYS.0000058973	Reported : 23/Dec/2023 12:32PM
Visit ID : CMYSOPV120656	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobS2853	

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	127	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)	254	mg/dL	70-140	GOD - POD

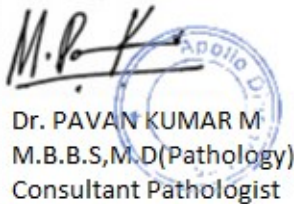
Comment:

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	6.8	%		HPLC

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Dr. PAVAN KUMAR M
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Consultant Pathologist

SIN No:EDT230117786



Patient Name	: Mrs.SHILPA N P	Collected	: 23/Dec/2023 08:38AM
Age/Gender	: 34 Y 6 M 20 D/F	Received	: 23/Dec/2023 11:44AM
UHID/MR No	: CMYS.0000058973	Reported	: 23/Dec/2023 12:32PM
Visit ID	: CMYSOPV120656	Status	: Final Report
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ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324

ESTIMATED AVERAGE GLUCOSE (eAG)	148	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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Age/Gender : 34 Y 6 M 20 D/F	Received : 23/Dec/2023 11:12AM
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Visit ID : CMYSOPV120656	Status : Final Report
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DEPARTMENT OF BIOCHEMISTRY

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

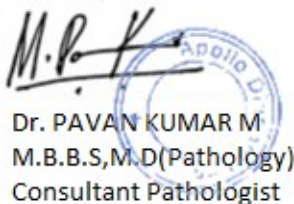
Test Name	Result	Unit	Bio. Ref. Range	Method
LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	207	mg/dl	0-200	CHOD
TRIGLYCERIDES	145	mg/dl	0-150	GPO, Trinder
HDL CHOLESTEROL	43	mg/dL	>40	CHE/CHO/POD
NON-HDL CHOLESTEROL	164	mg/dL	<130	Calculated
LDL CHOLESTEROL	134.88	mg/dL	<100	Calculated
VLDL CHOLESTEROL	28.92	mg/dL	<30	Calculated
CHOL / HDL RATIO	4.79		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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SIN No:SE04579675



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DEPARTMENT OF BIOCHEMISTRY

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


Dr. PAVAN KUMAR M
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SIN No:SE04579675



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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
LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.89	mg/dl	0-1.2	NBD
BILIRUBIN CONJUGATED (DIRECT)	0.23	mg/dl	0-0.2	Diazotized sulfanilic acid
BILIRUBIN (INDIRECT)	0.66	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	63	U/l	0-45	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	45.0	U/l	0-31	IFCC
ALKALINE PHOSPHATASE	78.00	U/l	42-98	IFCC (AMP buffer)
PROTEIN, TOTAL	8.40	g/dl	6.4-8.3	Biuret
ALBUMIN	4.45	g/dl	3.5-5.2	Bromcresol Green
GLOBULIN	3.95	g/dL	2.0-3.5	Calculated
A/G RATIO	1.13		0.9-2.0	Calculated

Result is rechecked. Kindly correlate clinically

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:

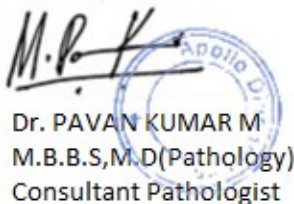
1. Hepatocellular Injury:

- 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.

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Dr. PAVAN KUMAR M
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SIN No:SE04579675



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DEPARTMENT OF BIOCHEMISTRY

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

- 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. PAVAN KUMAR M
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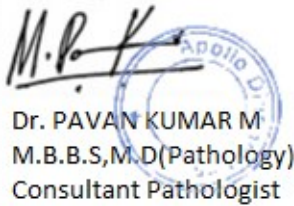


Patient Name	: Mrs.SHILPA N P	Collected	: 23/Dec/2023 08:38AM
Age/Gender	: 34 Y 6 M 20 D/F	Received	: 23/Dec/2023 11:12AM
UHID/MR No	: CMYS.0000058973	Reported	: 23/Dec/2023 02:43PM
Visit ID	: CMYSOPV120656	Status	: Final Report
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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	0.84	mg/dL	0.5-1.04	Creatinine amidohydrolase
UREA	12.55	mg/dl	13-43	Urease, UV
BLOOD UREA NITROGEN	5.9	mg/dL	8.0 - 23.0	Calculated
URIC ACID	5.10	mg/dL	2.5-6.2	Uricase
CALCIUM	10.18	mg/dl	8.6-10.3	Arsenazo III
PHOSPHORUS, INORGANIC	3.29	mg/dl	2.7-4.5	Molybdate
SODIUM	142	mmol/L	135-145	Direct ISE
POTASSIUM	4.8	mmol/L	3.5-5.1	Direct ISE
CHLORIDE	102	mmol/L	98 - 107	Direct ISE



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Age/Gender : 34 Y 6 M 20 D/F	Received : 23/Dec/2023 11:12AM
UHID/MR No : CMYS.0000058973	Reported : 23/Dec/2023 01:48PM
Visit ID : CMYSOPV120656	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
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	26.00	U/l	0-38	IFCC



Dr. PAVAN KUMAR M
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SIN No:SE04579675



Patient Name : Mrs.SHILPA N P	Collected : 23/Dec/2023 08:38AM
Age/Gender : 34 Y 6 M 20 D/F	Received : 23/Dec/2023 11:12AM
UHID/MR No : CMYS.0000058973	Reported : 23/Dec/2023 12:59PM
Visit ID : CMYSOPV120656	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
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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)	1.21	ng/mL	0.64-1.52	CMIA
THYROXINE (T4, TOTAL)	9.4	µg/dL	4.87-11.72	CMIA
THYROID STIMULATING HORMONE (TSH)	2.550	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



Dr. PAVAN KUMAR M
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Consultant Pathologist


SIN No:SPL23188803



Patient Name	: Mrs.SHILPA N P	Collected	: 23/Dec/2023 08:38AM
Age/Gender	: 34 Y 6 M 20 D/F	Received	: 23/Dec/2023 11:12AM
UHID/MR No	: CMYS.0000058973	Reported	: 23/Dec/2023 12:59PM
Visit ID	: CMYSOPV120656	Status	: Final Report
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DEPARTMENT OF IMMUNOLOGY

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


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

SIN No:SPL23188803

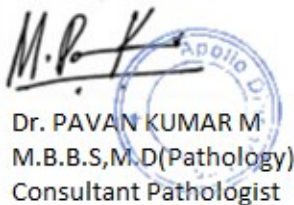


Patient Name : Mrs.SHILPA N P	Collected : 23/Dec/2023 08:38AM
Age/Gender : 34 Y 6 M 20 D/F	Received : 23/Dec/2023 11:29AM
UHID/MR No : CMYS.0000058973	Reported : 23/Dec/2023 12:01PM
Visit ID : CMYSOPV120656	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobS2853	

DEPARTMENT OF CLINICAL PATHOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
COMPLETE URINE EXAMINATION (CUE) , URINE				
PHYSICAL EXAMINATION				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pH	6.0		5-7.5	Bromothymol Blue
SP. GRAVITY	1.010		1.002-1.030	Dipstick
BIOCHEMICAL EXAMINATION				
URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE		NEGATIVE	GOD-POD
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	NITROPRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	EHRlich
BLOOD	NEGATIVE		NEGATIVE	Dipstick
NITRITE	NEGATIVE		NEGATIVE	Dipstick
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	PYRROLE HYDROLYSIS
CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY				
PUS CELLS	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:UR2248009



Patient Name : Mrs.SHILPA N P	Collected : 23/Dec/2023 08:38AM
Age/Gender : 34 Y 6 M 20 D/F	Received : 23/Dec/2023 11:29AM
UHID/MR No : CMYS.0000058973	Reported : 23/Dec/2023 12:01PM
Visit ID : CMYSOPV120656	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobS2853	

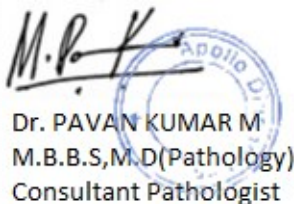
DEPARTMENT OF CLINICAL PATHOLOGY

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)	POSITIVE (++)		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:UF010043



Patient Name	: Mrs. SHILPA N P	Age/Gender	: 34 Y/F
UHID/MR No.	: CMYS.0000058973	OP Visit No	: CMYSOPV120656
Sample Collected on	:	Reported on	: 27-12-2023 10:44
LRN#	: RAD2187951	Specimen	:
Ref Doctor	: SELF		
Emp/Auth/TPA ID	: bobS2853		

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

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

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

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

PANCREAS: It is normal.

RIGHT KIDNEY: It measures 110x50 mm with parenchymal thickness of 14 mm. It is normal in size, outline and echotexture. No e/o calculus or hydronephrosis seen.

LEFT KIDNEY: It measures 108x46 mm with parenchymal thickness of 13 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 66x45x49 mm with ET=7 mm. It is normal in size, outline and echotexture. **Multiple hypoechoic lesions noted, largest measuring 17x18 mm seen in posterior wall**

Rt. OVARY: It measures 26x27 mm. It is normal. No mass lesion seen.

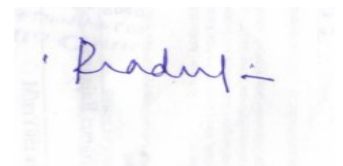
Lt. OVARY: It measures 35x28 mm. It is normal. No mass lesion seen.

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: MULTIPLE UTERINE FIBROIDS.

Pradeep Kumar C N, DNB
Consultant Radiologist.



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



Patient Name : Mrs. SHILPA N P

Age/Gender : 34 Y/F

CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

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

Pravda
Dr. _____
Medical Officer
The Apollo Clinic, Mysore.

This certificate is not meant for medico-legal purposes

Apollo Health and Lifestyle Limited

ICRN: URS110TG2000PLC115819

Regd. Office: 1, 10th & 2, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016

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Online appointments: www.apolloclinic.com

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

TO BOOK AN APPOINTMENT

1860 500 7788

Date : 23-12-2023
MR NO : CMYS.0000058973
Name : Mrs. SHILPA N P
Age/ Gender : 34 Y / Female

Department : GENERAL
Doctor :
Registration No :
Qualification :

Consultation Timing: 08:32

Height : 1.57	Weight : 78.2	BMI : 32	Waist Circum :
Temp :	Pulse : 2	Resp :	B.P : 100/70

General Examination /
Allergies History

Clinical Diagnosis & Management Plan

H/o 2 C-sections
- Father - Diabetic.

HbA1c - 6.8

- Adv No sugar in diet.
- Rpt FBS/PPBS/
HbA1c
after six week
- Regular 1 hr walking.

Follow up date : - weight reduction
Doctor Signature

Review after 6 wks

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

Date : 23-12-2023
MR NO : CMYS.0000058973

Department : GENERAL
Doctor : *Neeleshwari K.*

Name : Mrs. SHILPA NP

Registration No :

Qualification :

Age/ Gender : 34 Y / Female

Consultation Timing: 08:32

Height : 157	Weight : 78.2	BMI :	Waist Circum : 71/70
Temp :	Pulse :	Resp :	

General Examination /
Allergies History

nil

Clinical Diagnosis & Management Plan

Ear - GP - normal
Abc
throat - NAD.

Neeleshwari K.

Follow up date :

Doctor Signature

Apollo Clinic
23, 1st Floor,
Kalidasa Road, Mysore - 07
Ph : 0821-4006040/41

Date : 23-12-2023
MR NO : CMYS.0000058973

Department : GENERAL Dietetics
Doctor : Madhura . B.P

Name : Mrs. SHILPA N P

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

Age/ Gender : 34 Y / Female

Consultation Timing: 08:32

IBW - 54.2kg

Height : 157	Weight : 78.2	BMI : 31 kg/m ²	Waist Circum :
Temp :	Pulse :	Resp :	B.P : 110/70

General Examination /
Allergies History

FBS - 127
PPBS - 254
HSAIC - 6.8%
Total cholesterol - 207
NON HDL - 164
LDL - 134.88
ALT / SGPT - 63
AST / SGOT - 45

Clinical Diagnosis & Management Plan

- Δ^{dic} - Multiple uterine fibroids
- Advised low fat diabetic diet with complex carbohydrates and avoid simple sugars.
 - Take small frequent meals. Do not skip meals.
 - Include all variety of seasonal vegetables & green leafy vegetables.
 - *Fruits like Apple, Papaya, Muskmelon, orange, Mosambi & Guava can be taken 100gms/day if FBS is below 100mg/dl.
 - *Avoid roots like potato, sweet potato, Yam & Arbi.
 - Include nuts like Almonds and walnuts.
 - Regular physical exercise is necessary.
- Follow up date : Doctor Signature

Apollo Clinic

23, 1st Floor,

Kalidasu Road, Mysore

Ph : 0821-4006111, 112

Date: _____
 Page: _____
 Title: _____
 Author: _____
 Editor: _____

Copyright © _____

Page 1 of 1	Page 2 of 2	Page 3 of 3	Page 4 of 4
Page 5 of 5	Page 6 of 6	Page 7 of 7	Page 8 of 8

This document is a collection of notes and observations related to the project. It contains a detailed description of the system architecture and the implementation details. The notes are organized into several sections, each covering a different aspect of the project.

The first section discusses the overall goals and objectives of the project. It outlines the scope of the work and the key deliverables. The second section provides a high-level overview of the system architecture, including the main components and their interactions.

The third section describes the implementation details, including the choice of technologies and the development process. It also includes a list of the resources used and the timeline of the project. The fourth section discusses the results of the project and the lessons learned.

The fifth section contains a list of references and a glossary of terms. The sixth section is a list of appendices, which provide additional information related to the project. The seventh section is a list of figures and tables, which illustrate the system architecture and the implementation details.

Appendix A
 Appendix B
 Appendix C
 Appendix D
 Appendix E

now Shilpa N.P

Date : 23-12-2023
MR NO : CMYS.0000058973

Department : GENERAL
Doctor :

Name : Mrs. SHILPA N P

Registration No :

Age/ Gender : 34 Y / Female

Qualification :

Consultation Timing: 08:32

Height : 157	Weight : 78.2	BMI :	Waist Circum :
Temp :	Pulse :	Resp :	B.P : 110/70

General Examination /
Allergies History

Clinical Diagnosis & Management Plan

Rt eye

L eye

Near

6/6

6/6

vision

Distant

6/6

6/6

vision

Colour

(N)

(N)

vision.

Follow up date :

Doctor Signature

Apollo Clinic
23, 1st Floor,
Kalidasa Road, Mysore - 02
Ph : 0821-400601, 4

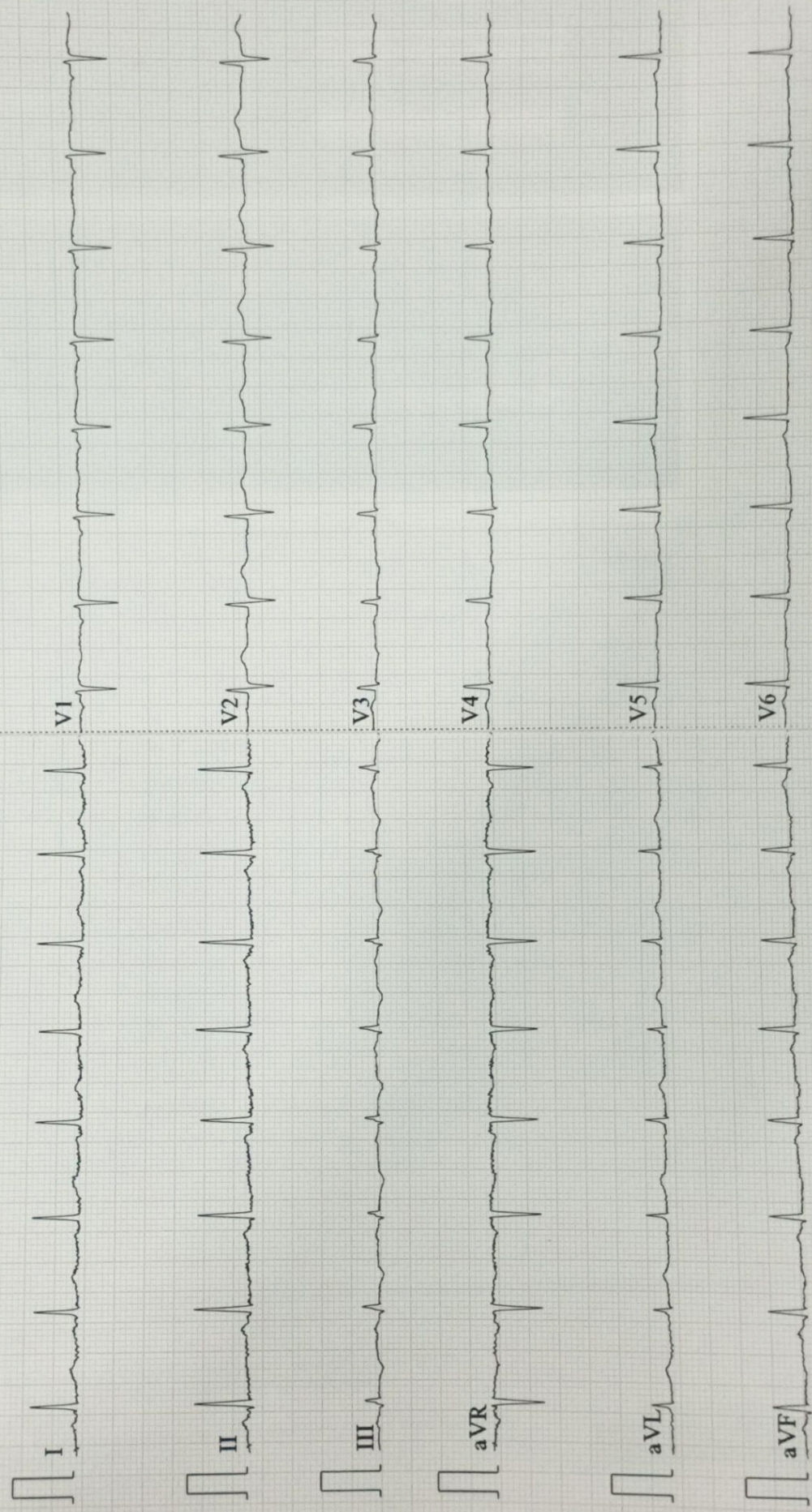
23-12-2023 10:24:51 AM

MRS SHILPA N P
Female 34Years
157cm 78kg 110/70 mmHg

Diagnosis Information:

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

Unconfirmed Report.



0.5~45Hz AC50 25mm/s 10mm/mV 2*5.0s ♡96 CARDIART

D V1.43 Glasgow V28.60 APOLLO CLINIC MYSURU

Patient's Name : Mrs. Shilpa N P	Age & Sex; 34Yrs /Female
Date : 23.12.2023	UHID No:58973

2D ECHOCARDIOGRAPHY STUDY

Impression:

- Normal chambers and valves
- No regional wall motion abnormality
- Normal left ventricular systolic function. EF 61 %
- 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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 Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

1860 500 7788

Patient's Name : Mrs. Shilpa N P
Date : 23.12.2023

Age & Sex; 34Yrs /Female
UHID No:58973

Measurements


AO : 2.20 cm
LA : 2.50 cm

RV : 2.10 cm
LVIDd : 3.52 cm
LVIDs : 2.38 cm
IVSd : 0.86 cm
IVSs : 1.05 cm
PWd : 0.86 cm
PWs : 1.27 cm
EF : 61.0 %
FS : 31.0 %

Doppler

MV TV
E 0.72 m/s E --- m/s V max AV 1.62 m/s PV V max 1.14 m/s
A: 0.60 m/s A --- m/s
MR Nil TR Nil AR Nil PR Nil

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

 **Dr. GURU PRASAD. B. V**
MBBS, PGDCC (CARDIO)
CCML, CHFC(CEPR), PGCC, CCLBDM
Consultant, Non-Invasive Cardiology
RMC No. 58168

Apollo Health and Lifestyle Limited

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Koramangala | Sarajpet Road | Mysore (VV Mohalla)
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TO BOOK AN APPOINTMENT
1860 500 7788

Patient Name: Mrs .Shilpa N P	Date : 23.12.2023	Referring Doctor: Dr .Self
Age / Sex: 34Yrs/Female	UHID NO:58973	Location : OP
ULTRASONOGRAPHY- ABDOMEN & PELVIS		

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

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

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

PANCREAS: It is normal.

RIGHT KIDNEY: It measures 110x50 mm with parenchymal thickness of 14 mm. It is normal in size, outline and echotexture. No e/o calculus or hydronephrosis seen.

LEFT KIDNEY: It measures 108x46 mm with parenchymal thickness of 13 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 66x45x49 mm with ET=7 mm. It is normal in size, outline and echotexture. **Multiple hypoechoic lesions noted, largest measuring 17x18 mm seen in posterior wall**

Rt. OVARY: It measures 26x27 mm. It is normal. No mass lesion seen.

Lt. OVARY: It measures 35x28 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: MULTIPLE UTERINE FIBROIDS.

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

Apollo Health and Lifestyle Limited

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Koramangala (Sarjapur Road) | Mysore (VV Mohalla)

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

1860 500 7788

Patient Name	: Mrs. SHILPA N P	Age	: 34 Y F
UHID	: CMYS.0000058973	OP Visit No	: CMYSOPV120656
Reported on	: 23-12-2023 15:31	Printed on	: 23-12-2023 15:31
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 15:31

---End of the Report---

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

Apollo Health and Lifestyle Limited


(CIN: UR5110TG2000PLC115819)
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Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

 **1860 500 7788**

Informed Consent/Declaration For Test Exclusion

Patient Name: Mr. Shilpa R Age: 34yr

UHID Number: 58973

Please tick and sign the relevant part

I certify that I will skip LRL pap test Test from my own.

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

Patient signature [Signature] Date 23/12/23

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

Patient Name	: Mrs. SHILPA N P	Age/Gender	: 34 Y/F
UHID/MR No.	: CMYS.0000058973	OP Visit No	: CMYSOPV120656
Sample Collected on	:	Reported on	: 23-12-2023 15:31
LRN#	: RAD2187951	Specimen	:
Ref Doctor	: SELF		
Emp/Auth/TPA ID	: bobS2853		

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Both lung fields and hila are normal .

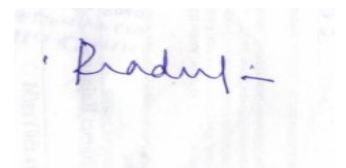
No obvious active pleuro-parenchymal lesion seen .

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. SHILPA N P
Age/Gender: 35 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.0000058973
Visit ID: CMYSOPV120656
Visit Date: 23-12-2023 08:32
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: 78.2,

-=: 157,

HT-HISTORY

Past Medical History

PAST MEDICAL HISTORY: Nil Significant,

**Cancer: nil,

PHYSICAL EXAMINATION

SYSTEMIC EXAMINATION

IMPRESSION

EKG

: NORMAL,

RECOMMENDATION

DISCLAIMER

Disclaimer: The health checkup examinations and routine investigations have certain limitations and may not be able to detect all the diseases. Any new or persisting symptoms should be brought to the attention of the consulting physician. Additional tests, consultations and follow up may be required in some cases.,

Doctor's Signature

Bill Of Supply



Name : Mrs. SHILPA N P
 Age/Gender : 34 Y F
 Contact No : +918497887782
 Address : MYSORE
 UHID : CMYS.0000058973
 Corporate Name : ARCOFEMI HEALTHCARE LIMITED
 Plan : ARCOFEMI MEDIWHEEL FEMALE AHC CREDIT PAN INDIA OP AGREEMENT

Bill No : CMYS-OCR-21953
 Bill/Reg Date : 23.12.2023 08:32
 Referred by : SELF
 Center : Mysore
 Emp No/Auth Code : bobS2853

#	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

Bill Amount: 2,400.00
Total Discount: 0.00
Patient Payment: 0.00
Corporate Due: 2,400.00
Patient Due: 0.00

Received with thanks: Zero Rupees only

Authorized Signature : (Nikhitha R)

You can download your report from "www.apolloclinic.com" Enter user name as CMYSOPV120656 and password as 296432

Please log on to AskApollo.com for booking Appointments

Apollo Health and Lifestyle Limited

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

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 Sreechandra Petal Karnataka: Bangalore | Basavanagudi | Bellandur | Electronics City | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli |
 Kuvempu Nagar | Sarjapur Road | Mysore | V.N. Krishnaiah | Taranthota | Chennai: | Anandaraman | Kotturamallu | T. Nagar | Gulabpet |
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Online appointments: www.apolloclinic.com

GSTIN: 29AADCA0733E123

Address:
 22, 23, 24, 25/101/3, Sree Rama Layout,
 BNR Complex, OPP RRI Layout, JP Nagar
 7th Phase, Bengaluru, Karnataka

1860 500 7788



ಭಾರತ ಸರ್ಕಾರ

Government of India

ಶಿಲ್ಪ ಎನ್ ಪಿ
Shilpa N P



ಜನ್ಮ ದಿನಾಂಕ / DOB: 01/06/1989

ಸ್ತ್ರೀ / Female

7119 1803 5053



ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು

Health Check up Booking Confirmed Request(bobS2853),Package Code-PKG10000377,
Beneficiary Code-302908

Wellness : Mediwheel : New Delhi <wellness@mediwheel.in>

Thu 21-12-2023 13:33

To:silpanp47@gmail.com <silpanp47@gmail.com>

Cc:Customer Care :Mediwheel : New Delhi <customercare@mediwheel.in>



Mediwheel
Your wellness partner

011-41195959

Dear **MR. N MADHU K**,

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

Booking Date : 15-12-2023
Hospital Package Name : Mediwheel Full Body Health Annual Plus Check
Patient Package Name : Mediwheel Full Body Health Checkup Female Below 40
Name of Diagnostic/Hospital : Apollo Clinic
Address of Diagnostic/Hospital- : Apollo Clinic, 23, Kalidasa Road, VV Mohalla, Mysore - 570002
City : Mysore
State :
Pincode : 570002
Appointment Date : 23-12-2023
Confirmation Status : Booking Confirmed
Preferred Time : 8:00am-9:00am
Booking Status : Booking Confirmed

Member Information		
Booked Member Name	Age	Gender
Silpa N P	34 year	Female

Note - Please note to not pay any amount .

Instructions to undergo Health Check:

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