


Ashwini CP.

<p>Name : Mrs. Ashwini CP <i>Ashwini Dasgupta</i></p> <p>Address :blr</p> <p>Plan : ARCOFEMI MEDIWHEEL FEMALE AHC CREDIT PAN INDIA OP AGREEMENT</p>	<p>Age: <i>25</i> Y</p> <p>Sex: F</p>	<p>UHID:CBAS.0000091528</p>  <p>*CBAS.0000091528*</p> <p>OP Number:CBASOPV99982</p> <p>Bill No :CBAS-OCR-60763</p> <p>Date : 10.02.2024 09:26</p>
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Sno	Service Type/ServiceName	Department
1	ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324	
1	GAMMA GLUTAMYL TRANSFERASE (GGT)	
2	2-D ECHO	
3	LIVER FUNCTION TEST (LFT)	
4	GLUCOSE, FASTING	
5	HEMOGRAM + PERIPHERAL SMEAR	
6	GYNAECOLOGY CONSULTATION ✓	
7	DIET CONSULTATION	
8	COMPLETE URINE EXAMINATION	
9	URINE GLUCOSE(POST PRANDIAL)	
10	PERIPHERAL SMEAR	
11	ECG	
12	LBC PAP TEST- PAPSURE ✓	
13	RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)	
14	DENTAL CONSULTATION	
15	GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL)	
16	URINE GLUCOSE(FASTING)	
17	HbA1c, GLYCATED HEMOGLOBIN	
18	X-RAY CHEST PA	
19	ENT CONSULTATION	
20	FITNESS BY GENERAL PHYSICIAN	
21	BLOOD GROUP ABO AND RH FACTOR	
22	LIPID PROFILE	
23	BODY MASS INDEX (BMI)	
24	OPHTHAL BY GENERAL PHYSICIAN	
25	ULTRASOUND - WHOLE ABDOMEN	
26	THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)	

→ Physio

Ht - 153
 Wt - 54.2
 BP - 94/52
 PR - 86
 Wd - 82
 H-P - 87

ECHOCARDIOGRAPHY REPORT

Name: MISS ASHWINI

Age: 25 YEARS

GENDER: FEMALE

Consultant: Dr.VISHAL KUMAR.H.

Date : 10/02/2024

Findings

2D Echo cardiography

Chambers

- Left Ventricle: Normal, No RWMA'S,
- Left Atrium: Normal
- Right Ventricle: Normal
- Right Atrium: Normal

Septa

- IVS: Intact
- IAS: Intact

Valves

- Mitral Valve: Normal
- Tricuspid Valve: Normal
- Aortic Valve: Tricuspid, Normal Mobility
- Pulmonary Valve: Normal

Great Vessels

- Aorta: Normal
- Pulmonary Artery: Normal

Pericardium: Normal

Doppler echocardiography

Mitral Valve	E	0.80	m/sec	A	0.48	m/sec	No MR
Tricuspid Valve	E	0.60	m/sec	A	0.32	m/sec	No TR
Aortic Valve	Vmax	1.28	m/sec				No AR
Pulmonary Valve	Vmax	0.72	m/sec				No PR
astolic Dysfunction							

M-Mode Measurements

P	Parameter	Observed Value	Normal Range	
A	Aorta	2.4	2.6-3.6	cm
LI	left Atrium	2.8	2.7-3.8	cm
A	Aortic Cusp Separation	1.5	1.4-1.7	cm
II	IVS - Diastole	0.9	0.9-1.1	cm
L	left Ventricle-Diastole	4.4	4.2-5.9	cm
P	Posterior wall-Diastole	0.9	0.9-1.1	cm
I	IVS-Systole	1.1	1.3-1.5	cm
LL	left Ventricle-Systole	2.6	2.1-4.0	cm
P	Posterior wall-Systole	1.2	1.3-1.5	cm
E	Ejection Fraction	60	≥ 50	%
F	Fractional shortening	30	≥ 20	%
R	Right Ventricle	2.3	2.0-3.3	cm

Impression -

- Normal Sized Cardiac Chambers
- No RWMA,S
- normal LV and RV Systolic Function, LVEF 60%
- Normal valves
- No Pericardial Effusion/Vegetation/Clot

DR. VISHAL KUMAR .H

CLINICAL CARDIOLOGIST

Author:

je

Dr. Yogesh
MD, DNB, J
Reg. No- K

Measurements

HR: 82 BPM
PR: 162 ms
PD: 126 ms
QRSD: 81 ms
QRS Axis: 62 deg
QT/QTc: 367/367 ms

Interpretation

Sinus rhythm
Normal axis
No significant ST-T changes

Pre-Existing Medical-
Conditions

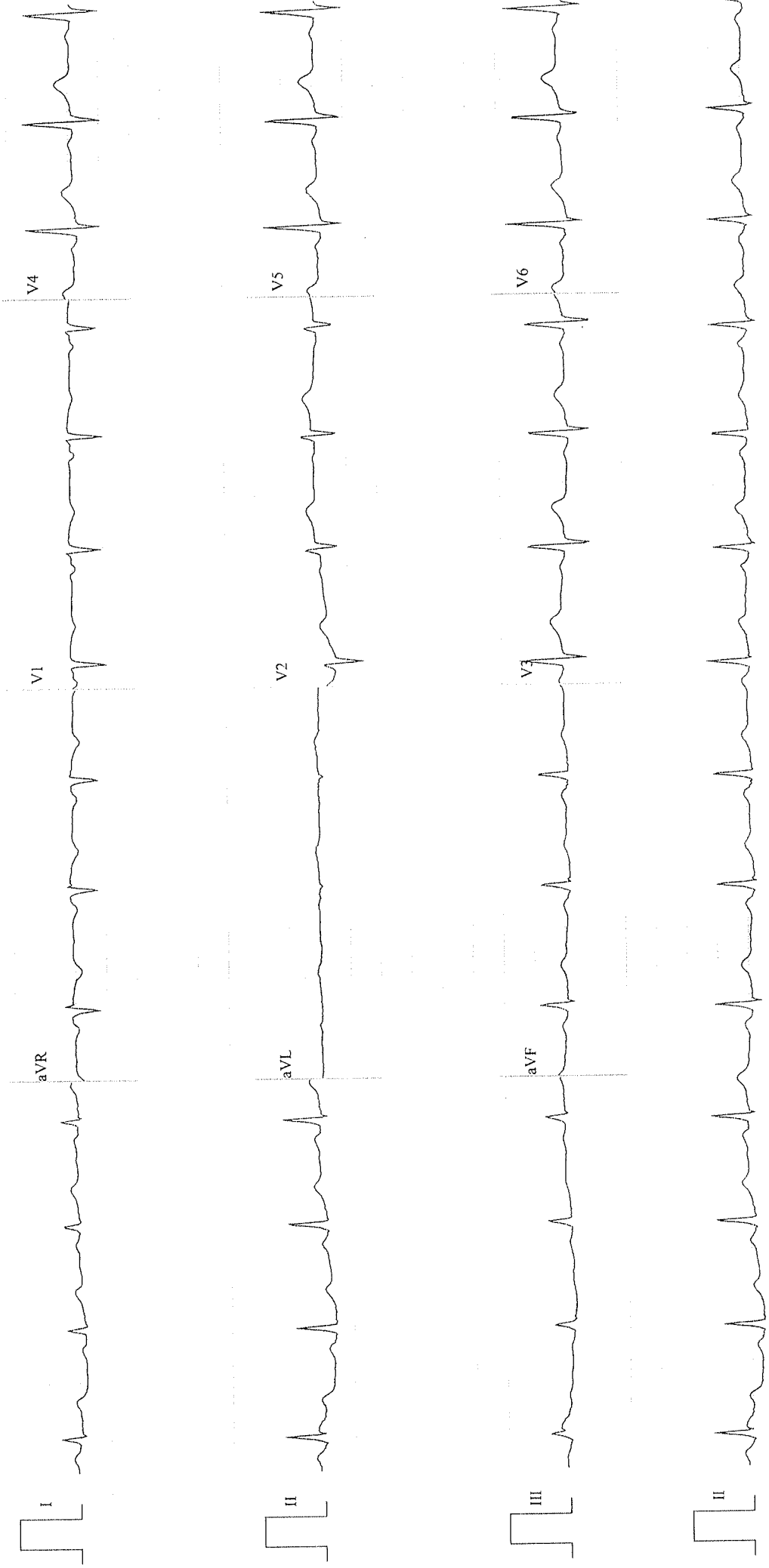
Symptoms

Vitals

Personal Details

UHID: 01P3FGAT6SN160Q
PatientID: 91528
Name: ASHWINI CP
Age: 25
Gender: Female
Mobile: 36985214769

This trace is generated by KardiosScreen: Cloud-Connected, Portable, Digital, 6-12 Lead Scalable ECG Platform from IMERIX



Speed: 25 mm/sec F: 0.05 - 40 Hz Limb: 10 mm/mV Chest: 10 mm/mV
Disclaimer: Analysis in this report is based on ECG alone and should be used as an adjunct to clinical history. Symptoms and results of other non-invasive tests and must be interpreted by a qualified physician.
Normal ECG does not rule out heart disease. Abnormal ECG does not always mean severe heart disease. Comments & report is based on available data. Clinical correlation is important.

आयकर विभाग
INCOME TAX DEPARTMENT

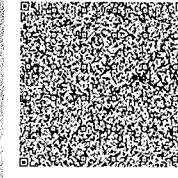


भारत सरकार
GOVT. OF INDIA



स्थायी लेखा संख्या कार्ड
Permanent Account Number Card

EOZPA5670B



नाम / Name
ASHWINI C P

पिता का नाम / Father's Name
CHOWDIPALYA PUTTAPPA

जन्म की तारीख /
Date of Birth
31/05/1998

Ashwini C.P

26042022

हस्ताक्षर / Signature

Fwd: Health Check up Booking Request(bobE8593), Beneficiary Code-135299

shankar dk <dkshankar01@gmail.com>

Fri 09-02-2024 13:04

To: Vanivilas Road , Bengaluru South Region <VJVANI@bankofbaroda.com>

12412

You don't often get email from dkshankar01@gmail.com. [Learn why this is important](#)

****सावधान:** यह मेल बैंक डोमेन के बाहर से आया है. अगर आप प्रेषक को नहीं जानते तो मेल में दी गयी
****CAUTION:** THIS MAIL IS ORIGINATED FROM OUTSIDE OF THE BANK'S DOMAIN. DO N

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

From: **Mediwheel** <wellness@mediwheel.in>

Date: Thu, 8 Feb 2024, 12:14

Subject: Health Check up Booking Request(bobE8593), Beneficiary Code-135299

To: <dkshankar01@gmail.com>

Cc: <customercare@mediwheel.in>

011-41195959

Dear MR. D K SHANKARA,

We have received your booking request for the following health checkup, please upload HRM Letter as soon as possible.

Upload HRM Letter

Booking Date : 08-02-2024

User Package Name : Mediwheel Full Body Health Checkup Male Below 40

Hospital Package Name : Mediwheel Full Body Annual Plus

Health Check Code : PKG10000366

Name of Diagnostic/Hospital : Apollo Clinic - Basavanagudi

Address of Diagnostic/Hospital- Apollo Clinic, # 99, Bull Temple Road , Next to Ramakrishna mutt, Basavanagudi - 560019

Appointment Date : 10-02-2024

Preferred Time : 8:00am

Member Information		
Booked Member Name	Age	Gender
MR. D K SHANKARA	33 year	Male

Mon. Aswini, 25 Jan.

10/2/24

Fuly 11000 HRW.

Alerts 18000 High Zinder low Zinder.

BF in Dims Phys bullet / market.

Egg 10000

Waters up sold => (1) (2) (3) (4) Pen, sell, up.

Flour up to 3.5 kith
wheat, 2 Jan => 350 kith
Bark, Logos
Cotton 1/2.

Egg - 1/2.

zind & sundal / dy.

oil -> 4 food kith.

D. H. ...
9449349333

PAP SMEAR CONSENT FORM

PATIENT NAME: *Ashwin* AGE: *25* GENDER: *F* DATE: *10.2/24*

MENSTRUAL AND REPRODUCTIVE HISTORY

AGE OF MENARCHE : *13*

AGE OF MENOPAUSAL IF APPLICABLE : *—*

MENSTRUAL REGULARITY : *REGULAR*

FIRST DAY OF LAST MENSTRUATION PERIOD: *3m back*

AGE AT MARRIAGE : *23*

YEAR'S OF MARRIED LIFE : *2*

CONTRACEPTION : YES()NO()IF YES WHAT KIND?

HORMONAL TREATMENT : YES() NO() IF YES WHAT KIND?

GRAVIDA (NO OF TIME'S CONCEIVED) : *PIU → 1/10, 1 1/2 back.*

PARA(NO OF CHILDBIRTH) :

LIVE(NO OF LIVING CHILDREN) :

ABORTIONS :

MISCARRIAGES/ABORTION :

AGE OF FIRST CHILD :

AGE OF LAST CHILD :

PREVIOUS PAP SMEAR REPORT :

SPECULUM EXAMINATION FINDINGS

EXTERNAL GENITALIA
VAGINA
CERVIX
SMEAR THAKEN FROM – ENDOCERVIX
ECTOCERVIX
POSTERIOR VAGINA

HEREBY DECLARE THAT THE ABOVE INFORMINFORMATION TRUE I HAVE BEEN EXPLAINED THE PROCEDURE AND GIVEN MY CONSENT TO UNDERGO THE SAME.

SIGNATURE OF THE PATEINT

SIGNATURE OF THE DOCTOR

Mr. Ashwini. C.P. 25/R 91528 10/2/24

EYE CHECK UP REPORT

Vision Acuity $\left\{ \begin{array}{l} 6/6 \\ \text{unaided} \\ 6/6 \end{array} \right.$

Near Vision $\left\{ \begin{array}{l} N6 \\ \text{unaided} \\ N6 \end{array} \right.$

Digital IOP $\left\{ \begin{array}{l} \text{N} \\ \text{N} \end{array} \right.$

Colour Vision $\left\{ \begin{array}{l} \text{Normal} \\ \text{Normal} \end{array} \right.$

• Fundus: Normal @ study

• Ant. Segment :- WNL

• Media: Normal

• Pupil: N/A

ICAC