

bnakam-satish@gmail.com
2 bills

9989546123



Name : Mrs. Akula Lakshmi Sai	Age: 32 Y	UHID: CELE.0000128294
Address : ecity	Sex: F	
Plan : ARCOFEMI MEDIWHEEL FEMALE AHC CREDIT PAN INDIA OP AGREEMENT		OP Number: CELEOPV336721
		Bill No : CELE-OCR-54785
		Date : 10.02.2024 10:03

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) (12)	
2	D FCHO (11)	
3	LIVER FUNCTION TBST (LFT)	
4	GLUCOSE, FASTING	
5	HEMOGRAM + PERIPHERAL SMEAR	
6	GYNACCOLOGY CONSULTATION - 16	
7	DIET CONSULTATION	pending
8	COMPLETE URINE EXAMINATION	
9	URINE GLUCOSE (POST PRANDIAL)	
10	PERIPHERAL SMEAR	
11	ECG (13)	
12	LBC PAP TEST - PAPSURE (16) *	
13	RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)	
14	DENTAL CONSULTATION (15) *	
15	GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL)	
16	URINE GLUCOSE (FASTING)	
17	HbA1c, GLYCATED HEMOGLOBIN	
18	X-RAY CHEST PA (9)	
19	ENT CONSULTATION (4) *	
20	FITNESS BY GENERAL PHYSICIAN (29) *	POST test pending
21	BLOOD GROUP ABO AND RH FACTOR	
22	LIPID PROFILE	
23	BODY MASS INDEX (BMI) (10) *	
24	OPHTHAL BY GENERAL PHYSICIAN (5) *	
25	ULTRASOUND - WHOLE ABDOMEN (8)	
26	THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)	

27) physid - (14) *
28)

wt: 48.7 kg
ht: 149 cm
waist: 56 cm
hip: 58 cm
BP: 110/67
pulse: 79
BMI: 19



MEDICAL FITNESS CERTIFICATE



NAME: Mrs. Akula *Cardiac* AGE/SEX: 32yrs / F

10/02/20

CHIEF COMPLAINTS: _____

- c/o tiredness, breathless
c/o breathless

PAST/FAMILY HISTORY: Mother - HTN

ALLERGIES: _____

GENERAL EXAMINATION:

PULSE: 79/min BP: 110/67mmHg TEMP: 98.6°F RR: 22/min
HT: 149cm WT: 43.7kg WAIST: 56cm BMI: 19

Vision	Rt	Lt	With Correction
DISTANT			
NEAR			
COLOUR			

SYSTEMIC EXAMINATION

Chest: B/L RVR heard
Cvs: S₁S₂ (P), no murmurs
PIA: NAD

IMPRESSION:

FINAL RECOMMENDATION:

GENERAL PHYSICIAN

Personal Details
IHHID: G0XUJ1006SN0YAK

PatientID: 128294

Name: Mrs Akhila Lakshmi Sri

Age: 32

Gender: Female

Mobile: 9989546123

Pre-Existing Medical-
Conditions

Vitals

Measurements

HR: 89 BPM

PR: 159 ms

PD: 128 ms

QRSd: 86 ms

QRS Axis: 69 deg

QT/QTc: 391/351 ms

Report ID: A4LLP_30XJH_P116SN0YAK_V88N0008

Interpretation(Confirmed)

Normal Sinus Rhythm

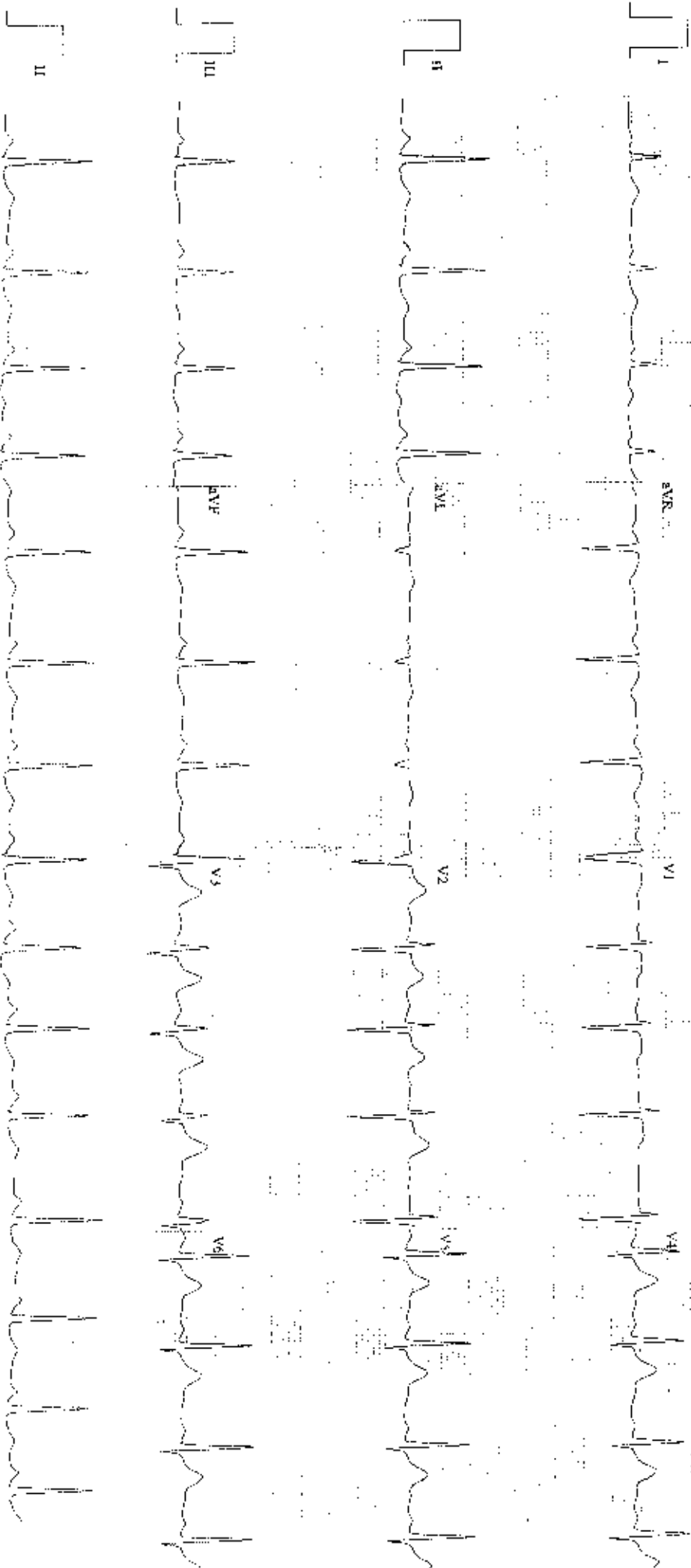
Normal Axis

Good R wave Progression in V1 to V3



Apollo
Clinics
Sri Lanka

APOLLO CLINICS SRI LANKA - GENERAL PHYSICIAN (CARDIOLOGY) - REPORT OF 12 LEAD ECG WITH VECTOCARDIOGRAM



2. Print Arrhythmia - Normal Sinus Rhythm

Speed: 25 mm/sec

P: 0.05 - 401 μ

1 mm = 10 mm/mV

Chest: 10 mm/mV

APOLLO CLINICS SRI LANKA

Patient Name : Mrs. Akula Lakshmi Sai
UHID : CELE.0000128294
Reported on : 10-02-2024 20:13
Adm/Consult Doctor :

Age : 32 Y F
OP Visit No : CELEOPV336721
Printed on : 10-02-2024 20:14
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.

CONCLUSION :

No obvious abnormality seen

Printed on:10-02-2024 20:13

---End of the Report---


Dr. VIGNESH K
MBBS, MD Radio-Diagnosis
Radiology

Apollo Health and Lifestyle Limited

(CIN - U85110TG2000PLC115819)

Regd. Office: 1-0-60/52, Ashoka Baghupath: Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016

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

APOLLO CLINICS NETWORK KARNATAKA

Bangalore (Basavanagudi | Bellandur | Electronic City | Fraser Town | HSI Layout | Indira Nagar | JP Nagar | Kundalahalli |
Koramangala, Sarjapur Road) Mysore (VV Mohalla)

Online appointments: www.apolloclinic.com

2-D ECHO-CARDIOGRAPHY DOPPLER & COLOUR DOPPLER REPORT

NAME : MRS AKULA LAKSHMI SAI

DATE :10/02/2024

AGE/SEX: 32Y /F

REF :ARCOFEMI MEDIWHEEL

UHID: 128294/02/58

*** MEASUREMENTS & FLOW VELOCITIES AS DEPICTED IN IMAGES OVERLEAF.

1. NORMAL VALVES.
2. NORMAL FLOW ACROSS ALL VALVES.
3. NO MR/ AR/ TR.
4. NORMAL GREAT VESSELS.
5. NORMAL SYSTEMIC VEINS & AT LEAST 3 PULMONARY VEINS SEEN DRAINING INTO LA.
6. NORMAL SIZED CHAMBERS.
7. NO REGIONAL WALL MOTION ABNORMALITIES.
8. INTACT SEPTAE (IVS & IAS).
9. GOOD LV & RV SYSTOLIC FUNCTION.
10. PERICARDIUM : NORMAL
11. NO OBVIOUS VEGETATION / CLOTS.



DR (CAPT.)S.V KRISHNA RAO

MD (PGI), DNB (Card)

Senior Consultant – Cardiologist

Reg No : ANP 19780000746KTK

To correlate with clinical findings & other relevant investigations .

Apollo Health and Lifestyle Limited

(CIN - U85111TG2009PLC115819)

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

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

APOLLO CLINICS NETWORK KARNATAKA

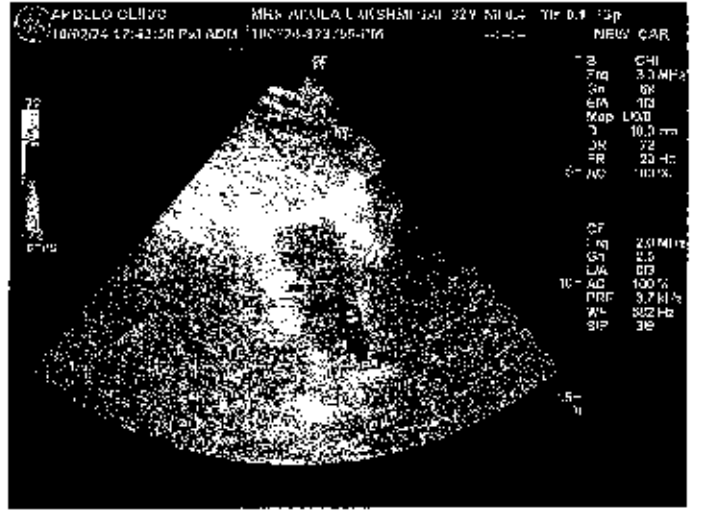
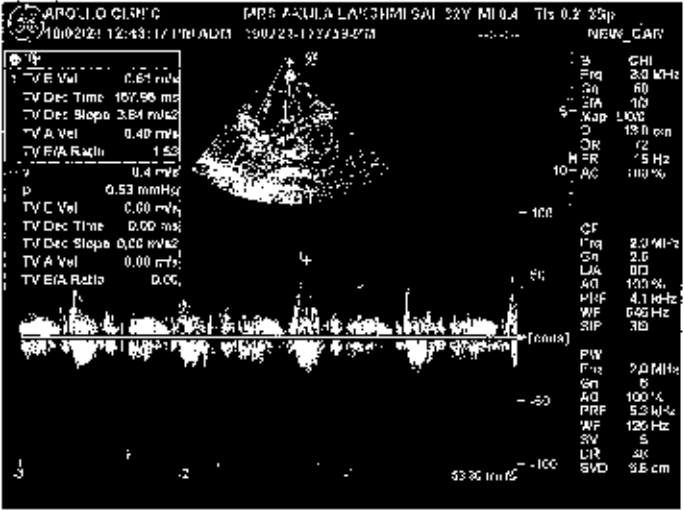
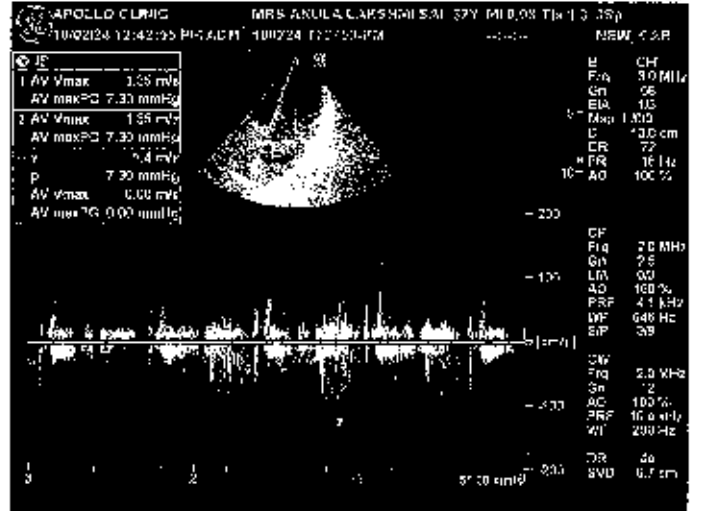
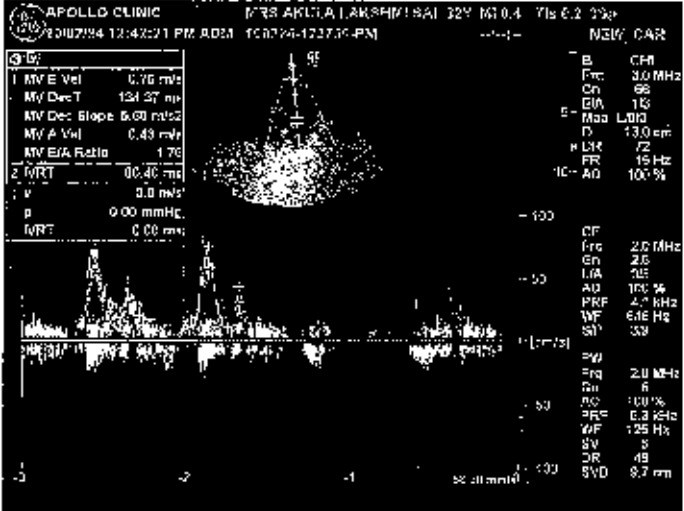
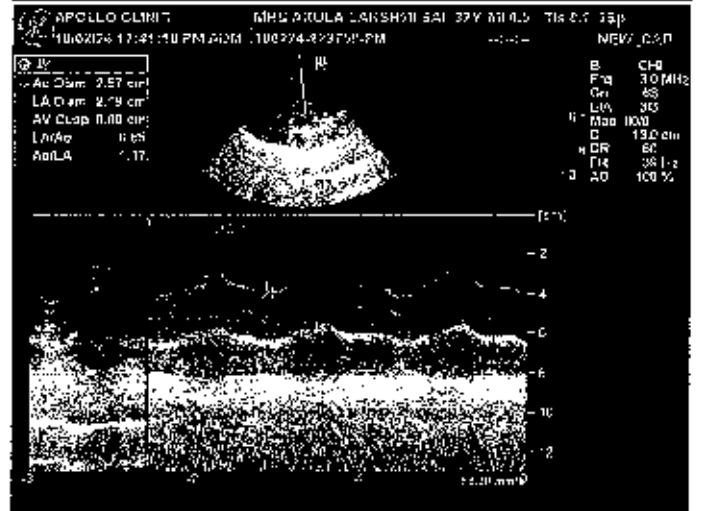
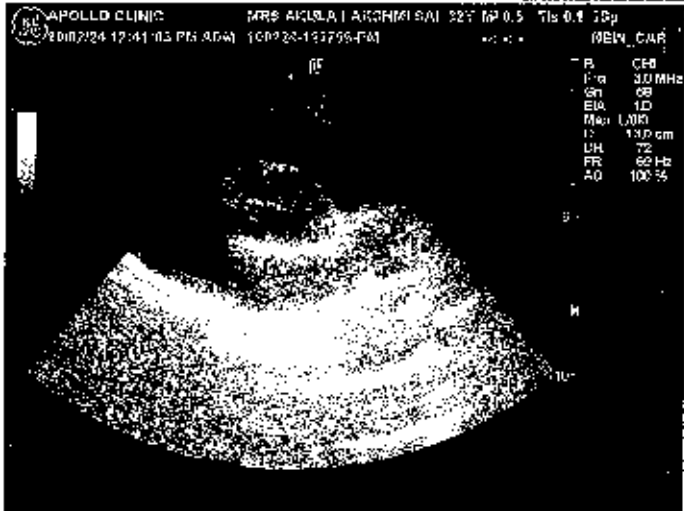
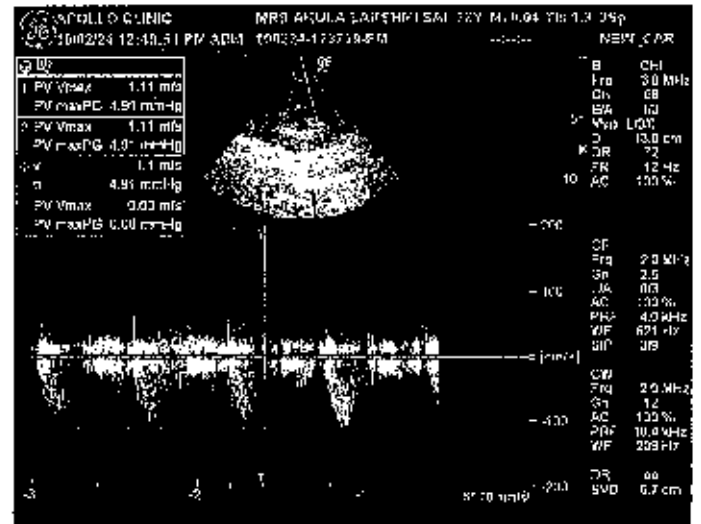
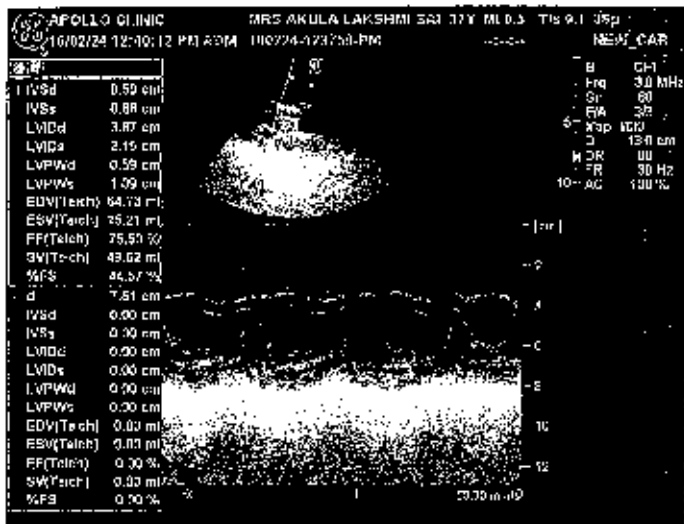
Bangalore (Bosavanagudi | Bellendur | Electronic City | Fraser Town | HSB Layout | Indira Nagar | JP Nagar - Kundalahalli |

Koramangala | Sarjapur Road) Mysore (VV Mahalle)

Online appointments: www.apoloclinic.com

TO BOOK AN APPOINTMENT

1860-100-7788



NAME:	MRS. AKULA LAKSHMI SAI
AGE / SEX:	32 YRS/ FEMALE
DATE:	10/02/2024
REFERRED BY:	ARCOFEMI

ABDOMINAL ULTRASONOGRAPHY REPORT

LIVER: Appear normal in size and echogenicity. No focal lesion seen. The intra hepatic biliary and portal venous radicals are normal. Portal vein and CBD is normal.

GALL BLADDER: moderately distended and appears normal. No abnormal wall thickening / pericholecystic fluid seen.

Pancreas: normal to the extend visualized.

SPLEEN: Normal in size and echo texture. No focal lesion noted

KIDNEYS: Both kidneys are normal in position, size and echo texture. Normal cortico-medullary differentiation is maintained. No calculus/ hydronephrosis on both sides. Hyperchoic areas seen along the medullary pyramids.

PELVIC ORGANS:

Urinary bladder well distended and appears normal in size, contour and wall thickness.

Uterus appear normal in size and echo texture . Myometrial echoes appear normal. ET measures ~ 9.6 mm.

Bilateral ovaries are normal in size, shape and echo texture.

No free fluid in the abdomen and pelvis.

IMPRESSION:

- Hyperchoic areas seen along the medullary pyramids-?Nephrocalcinosis.

*To correlate clinically & with other investigations.
Not for medico-legal purpose*

DR. VIGNESH K

CONSULTANT RADIOLOGIST

Apollo Health and Lifestyle Limited

(CIN - UB5110TG2000PIC115819)

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

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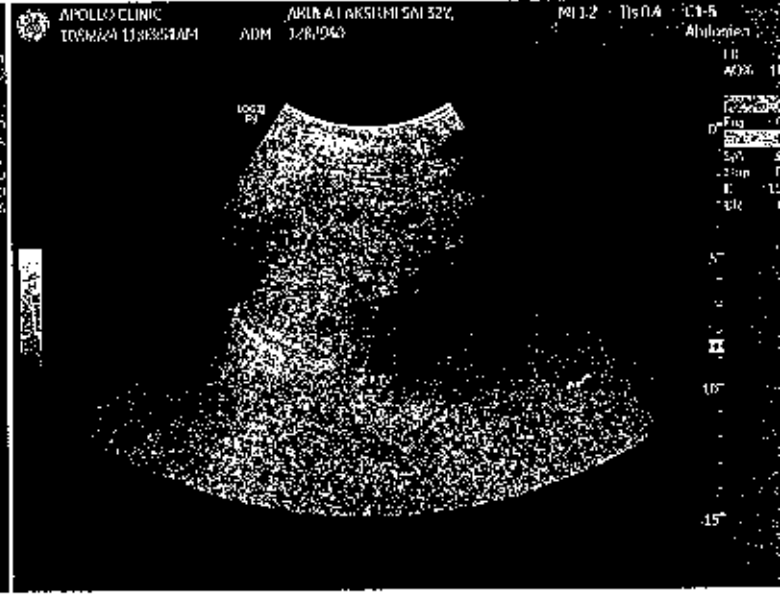
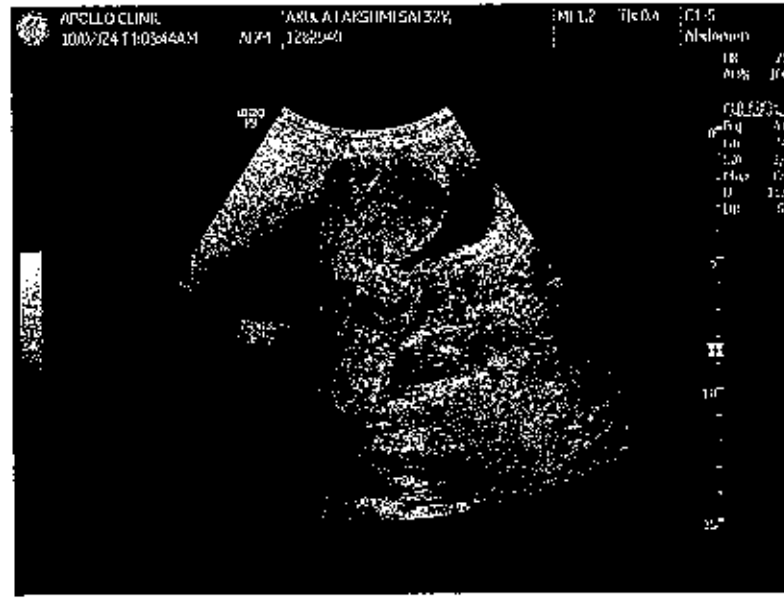
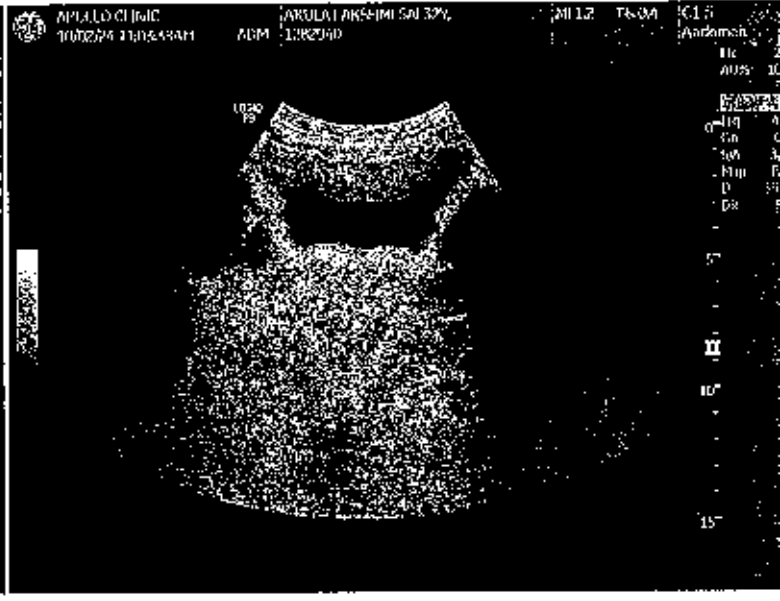
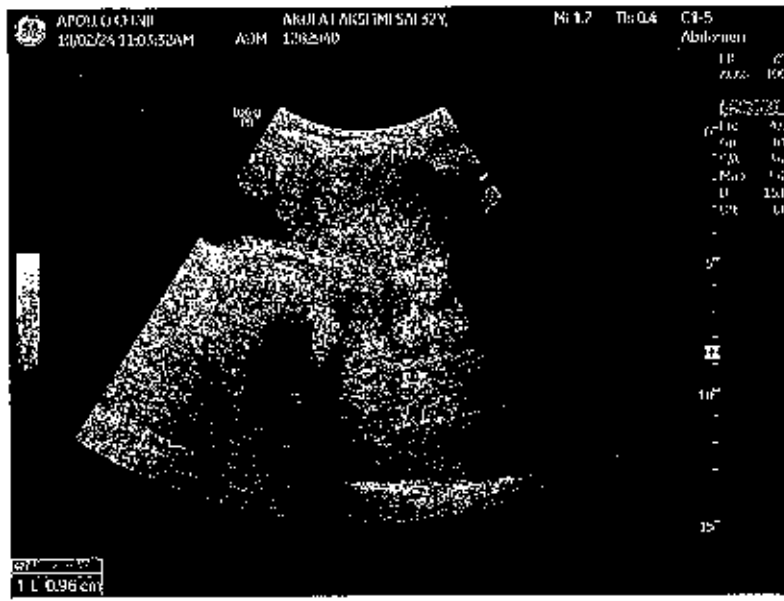
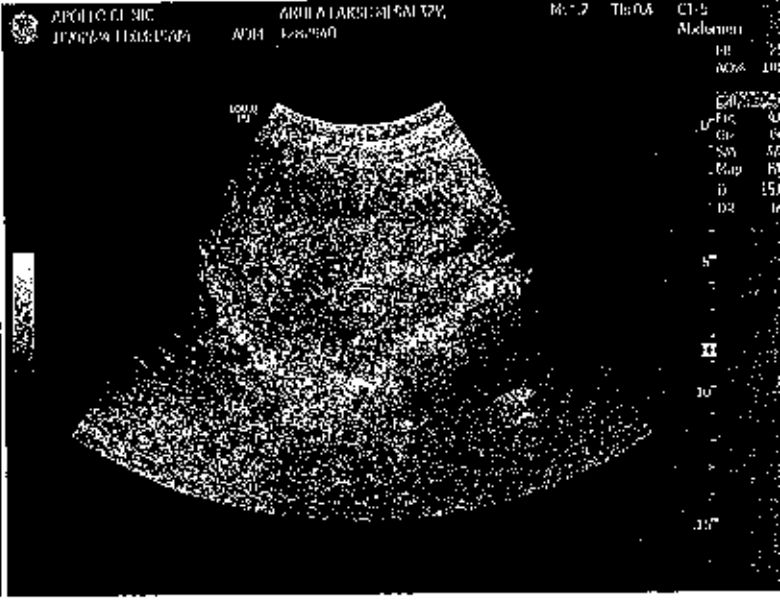
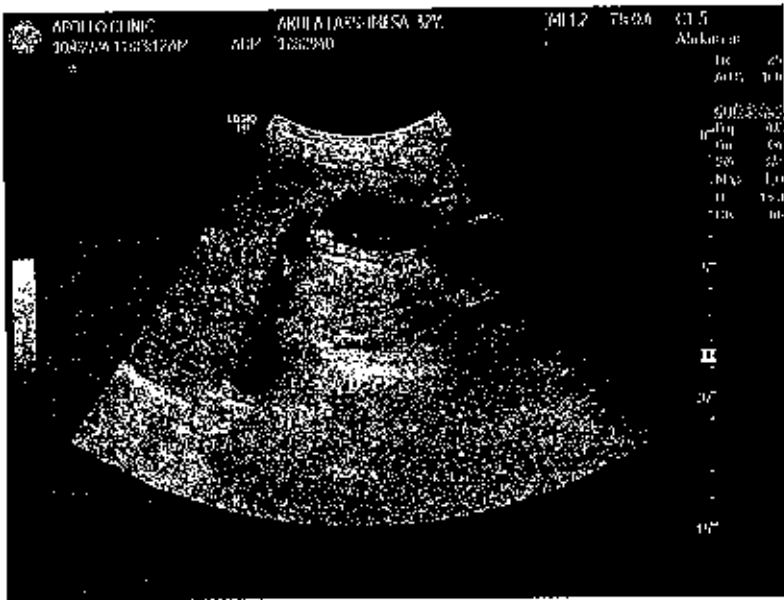
APOLLO CLINICS NETWORK (KARNATAKA)

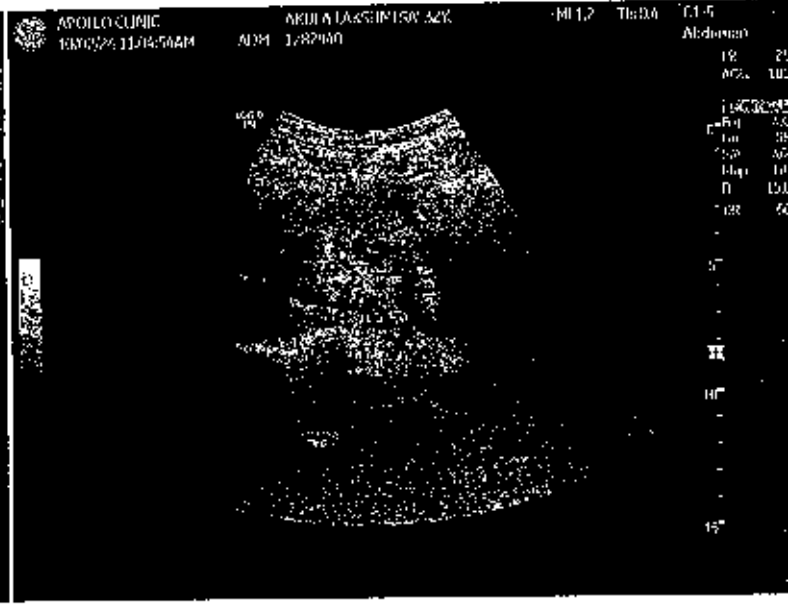
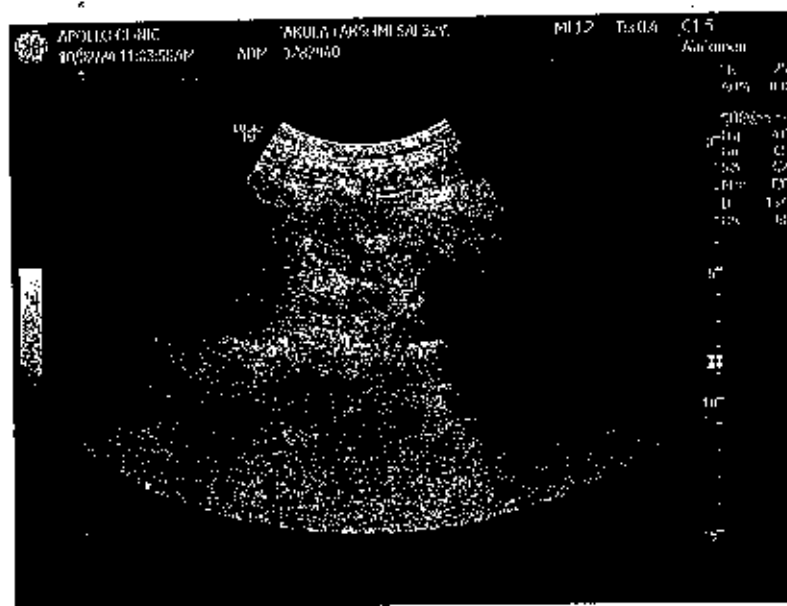
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Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

1860 500 7788







Ms S Akshaya Lakshmi Smt

Apollo Clinic
Expertise. Closer to you.

10/2/24.

Dr. KRISHNA SHAI

Gynaec

HC + LBC

Height :	Weight :	BMI :	Waist Circum :
Temp :	Pulse :	Resp :	B.P :

General Examination / Allergies
History

Clinical Diagnosis & Management Plan

P/H. MR

10/15/24.

P of 2 R/O L60

P/A NAD
P/V (N)
P/S

B/L H. Bv. NO hyp

How Repetitive

Follow up date:

Doctor Signature

Apollo Clinic, Electronic City
323-100-123, Neeladri Main Road, Neeladri Nagar, Electronic City, Phase-1,
Bangalore-560100 | Phone: 080-46657334/35

BOOK YOUR APPOINTMENT TODAY!
Whatsapp Number : 970 100 3333
Toll Number : 1860 500 7788

Mr. Akula Lakshmi Sai
32 y/F

10/2/24

Dr. Yashwanth, MBBS, DLO
All India Institute of Medical Sciences
New Delhi, India
MOB: 9440011111

Height :	Weight :	BMI :	Waist Circum :
Temp :	Pulse :	Resp :	B.P :

General Examination / Allergies
History

Clinical Diagnosis & Management Plan

Came for regular health
check

O/E

Nose - mild rhinitis

Throat - NAD

Eyes - B/L TM (+) & intax

Neck - Tenderness (+) over
enoid cartilage



INKDA

Adv
① Tab. ZERODOL-SP
1-0-1 x 30 days


② Tab. MONTAIR-FX
0-0-1 x 10 days

Follow up date:


Doctor Signature

ಅಧಿಕಾರಿಗಳಿಗೆ
 Akshya Lakshmi Sui
 ಸಂಖ್ಯೆ: 86/DOB: 12/06/1991
 FEMALE



2956 9957 3663
UID : 9102 0437 7650 7224

ಭಾರತ ಸರ್ಕಾರ - ಭಾರತ ಸರ್ಕಾರ

Your appointment is confirmed

Satish Bhaskar <bhaskar.satish@ymail.com>

Fri 09-02-2024 16:20

To: Veppanapalli Branch Puducherry Region <VEPANA@bankofbaroda.com>

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

यह को नहीं जानने से पहले से ही यहाँ लिंक पर क्लिक न करें या अटैचमेंट न खोलें.
DO NOT CLICK ON LINKS OR OPEN ATTACHMENTS BEFORE YOU

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

From: noreply@apolloclinics.info <noreply@apolloclinics.info>

To: "bhaskar.satish@ymail.com" <bhaskar.satish@ymail.com>

Cc: "ecity@apolloclinic.com" <ecity@apolloclinic.com>; "dcm.ecity@apolloclinic.com"

<dcm.ecity@apolloclinic.com>; "neethu.roshan@apolloclinic.com" <neethu.roshan@apolloclinic.com>;

"syamsunder.m@apollohl.com" <syamsunder.m@apollohl.com>

Sent: Monday, 5 February, 2024 at 03:54:21 pm IST

Subject: Your appointment is confirmed

Dear A Laitshmi Sai ,

Greetings from Apollo Clinics,

Your corporate health check appointment is confirmed at ELECTRONIC CITY clinic on
2024-02-10 at 09:30-08:45.

Payment Mode	
Corporate Name	ARCOFEMI HEALTHCARE LIMITED
Agreement Name	[ARCOFEMI MEDIWHEEL FEMALE AIO 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.

Established Patient: No

Vitals

Date	Pulse (Beats/min)	B.P (mmHg)	Resp (Rate/min)	Temp (F)	Height (cms)	Weight (Kgs)	Body Fat Percentage (%)	Visceral Fat Level (%)	Body Age (Years)	BMI	Waist Circum (cms)	Hip (cms)	Waist (cms)	Waist & Hip Ratio	User
19-02-2024 15:09	90 Beats/min	120/70 mmHg	24 Rate/min	97.8 F	169 cms	67 Kgs	%	%	Years	23.46	cms	cms	cms		AHLL07132

Established Patient: No

Vitals

Date	Pulse (Beats/min)	B.P (mmHg)	Resp (Rate/min)	Temp (F)	Height (cms)	Weight (Kgs)	Body Fat Percentage (%)	Visceral Fat Level (%)	Body Age (Years)	BMI	Waist Circum (cms)	Hip (cms)	Waist (cms)	Waist & Hip Ratio	User
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Name: Mrs. Akula Lakshmi Sai
Age/Gender: 32 Y/F
Address: ecity
Location: BANGALORE, KARNATAKA
Doctor:
Department: GENERAL
Rate Plan: Electronic City_03122022
Sponsor: ARCOFEMI HEALTHCARE LIMITED
Consulting Doctor: Dr. SWAPNA

MR No: CELE.0000128294
Visit ID: CELEOPV336721
Visit Date: 10-02-2024 10:03
Discharge Date:
Referred By: SELF

Doctor's Signature

Established Patient: No

Vitals

Date	Pulse (Beats/min)	B.P (mmHg)	Resp (Rate/min)	Temp (F)	Height (cms)	Weight (Kgs)	Body Fat Percentage (%)	Visceral Fat Level (%)	Body Age (Years)	BMI	Waist Circum (cms)	Hip (cms)	Waist (cms)	Waist & Hip Ratio	User
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Location: BANGALORE, KARNATAKA
Doctor:
Department: GENERAL
Rate Plan: Electronic City_03122022
Sponsor: ARCOFEMI HEALTHCARE LIMITED
Consulting Doctor: Dr. PAVITRA RAMAN

MR No: CELE.0000128294
Visit ID: CELEOPV336721
Visit Date: 10-02-2024 10:03
Discharge Date:
Referred By: SELF

HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

SYSTEMIC REVIEW

HT-HISTORY

PHYSICAL EXAMINATION

SYSTEMIC EXAMINATION

IMPRESSION

RECOMMENDATION

Doctor's Signature

Name: Mrs. Akula Lakshmi Sai
Age/Gender: 32 Y/F
Address: ecity
Location: BANGALORE, KARNATAKA
Doctor:
Department: GENERAL
Rate Plan: Electronic City_03122022
Sponsor: ARCOFEMI HEALTHCARE LIMITED
Consulting Doctor: Dr. DAYANAND BALAPPA YALIGAR

MR No: CELE.0000128294
Visit ID: CELEOPV336721
Visit Date: 10-02-2024 10:03
Discharge Date:
Referred By: SELF

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RECOMMENDATION

Doctor's Signature

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Age/Gender: 32 Y/F
Address: ecity
Location: BANGALORE, KARNATAKA
Doctor:
Department: GENERAL
Rate Plan: Electronic City_03122022
Sponsor: ARCOFEMI HEALTHCARE LIMITED
Consulting Doctor: Dr. DAYANAND BALAPPA YALIGAR

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Visit Date: 10-02-2024 10:03
Discharge Date:
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HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

SYSTEMIC REVIEW

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Vitals

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Age/Gender: 32 Y/F
Address: ecity
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Doctor:
Department: GENERAL
Rate Plan: Electronic City_03122022
Sponsor: ARCOFEMI HEALTHCARE LIMITED
Consulting Doctor: Dr. YASHASWI R G

MR No: CELE.0000128294
Visit ID: CELEOPV336721
Visit Date: 10-02-2024 10:03
Discharge Date:
Referred By: SELF

Doctor's Signature



Patient Name	: Mrs. Akula Lakshmi Sai	Age/Gender	: 32 Y/F
UHID/MR No.	: CELE.0000128294	OP Visit No	: CELEOPV336721
Sample Collected on	:	Reported on	: 10-02-2024 20:14
LRN#	: RAD2232398	Specimen	:
Ref Doctor	: SELF		
Emp/Auth/TPA ID	: 9989546123		

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.

CONCLUSION :

No obvious abnormality seen

Dr. VIGNESH K
MBBS, MD Radio-Diagnosis
Radiology

Patient Name : Mrs. Akula Lakshmi Sai

Age/Gender : 32 Y/F

UHID/MR No. : CELE.0000128294

OP Visit No : CELEOPV336721

Sample Collected on :

Reported on : 11-02-2024 16:50

LRN# : RAD2232398

Specimen :

Ref Doctor : SELF

Emp/Auth/TPA ID : 9989546123

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

LIVER: Appear normal in size and echogenicity. No focal lesion seen. The intra hepatic biliary and portal venous radicals are normal. Portal vein and CBD is normal.

GALL BLADDER: moderately distended and appears normal. No abnormal wall thickening / pericholecystic fluid seen.

Pancreas: normal to the extend visualized.

SPLEEN: Normal in size and echo texture. No focal lesion noted

KIDNEYS: Both kidneys are normal in position, size and echo texture. Normal cortico-medullary differentiation is maintained. No calculus/hydronephrosis on both sides.
Hyperechoic areas seen along t he medullary pyramids.

PELVIC ORGANS:

Urinary bladder well distended and appears normal in size, contour and wall thickness.

Uterus appear normal in size and echo texture . Myometrial echoes appear normal.
ET measures ~ 9.6 mm.

Bilateral ovaries are normal in size, shape and echo texture.

No free fluid in the abdomen and pelvis.

IMPRESSION:

- **Hyperechoic areas seen along t he medullary pyramids-?Nephrocalcinosis.**

To correlate clinically & with other investigations.

Not for medico-legal purpose

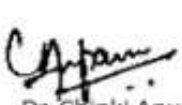
Patient Name : Mrs.AKULA LAKSHMI SAI	Collected : 10/Feb/2024 10:48AM
Age/Gender : 32 Y 7 M 28 D/F	Received : 10/Feb/2024 04:10PM
UHID/MR No : CELE.0000128294	Reported : 10/Feb/2024 05:44PM
Visit ID : CELEOPV336721	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9989546123	

DEPARTMENT OF HAEMATOLOGY

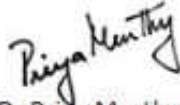
ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	10.3	g/dL	12-15	Spectrophotometer
PCV	31.10	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.43	Million/cu.mm	3.8-4.8	Electrical Impedance
MCV	70.2	fL	83-101	Calculated
MCH	23.3	pg	27-32	Calculated
MCHC	33.1	g/dL	31.5-34.5	Calculated
R.D.W	16.7	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	7,780	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	59.4	%	40-80	Electrical Impedance
LYMPHOCYTES	32.5	%	20-40	Electrical Impedance
EOSINOPHILS	1.1	%	1-6	Electrical Impedance
MONOCYTES	6.9	%	2-10	Electrical Impedance
BASOPHILS	0.1	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	4621.32	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2528.5	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	85.58	Cells/cu.mm	20-500	Calculated
MONOCYTES	536.82	Cells/cu.mm	200-1000	Calculated
BASOPHILS	7.78	Cells/cu.mm	0-100	Calculated
PLATELET COUNT	357000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	40	mm at the end of 1 hour	0-20	Modified Westegren method
PERIPHERAL SMEAR				

RBCs: Show mild anisocytosis with microcytic hypochromic RBCs.



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



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



SIN No:BED240034050

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APOLLO CLINICS NETWORK

Telangana: Hyderabad (AS Rao Nagar | Chanda Nagar | Kondapur | Nallakurta | Nizampet | Manikonda) | Uppal | Andhra Pradesh: Vijay (Seethamma Peta) | Karnataka: Bangalore (Basavanagudi | Bellandur | Electronics City | Fraser Town | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli | Koramangala | Sarjapur Road) | Mysore (VV Mohalla) | Tamil Nadu: Chennai (Annanagar | Kotturpuram | Mogappair | T.Nagar) | Volasarakkham | Velachery | Maharashtra: Pune (Aundh | Nigdi Pradhikaran | Viman Nagar | Wanowrie) | Uttar Pradesh: Ghaziabad (Indrapuram) | Gujarat: Ahmedabad (Satellite) | Punjab: Amritsar (Court Road) | Haryana: Faridabad (Railway Station Road)

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Karnataka - 560034

 **1860 500 7788**
www.apolloclinic.com

Patient Name : Mrs.AKULA LAKSHMI SAI	Collected : 10/Feb/2024 10:48AM
Age/Gender : 32 Y 7 M 28 D/F	Received : 10/Feb/2024 04:10PM
UHID/MR No : CELE.0000128294	Reported : 10/Feb/2024 05:44PM
Visit ID : CELEOPV336721	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9989546123	

DEPARTMENT OF HAEMATOLOGY

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WBCs: are normal in total number with normal distribution and morphology.

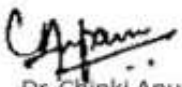
PLATELETS: appear adequate.

HEMOPARASITES: negative

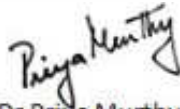
IMPRESSION: MICROCYTIC HYPOCHROMIC ANEMIA

Note: Kindly evaluate for iron deficiency status.

Kindly correlate clinically.



Dr. Chinki Anupam
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Consultant Pathologist



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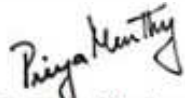
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Test Name	Result	Unit	Bio. Ref. Range	Method
BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA				
BLOOD GROUP TYPE	O			Microplate Hemagglutination
Rh TYPE	Positive			Microplate Hemagglutination



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Dr. Priya Murthy
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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	96	mg/dL	70-100	HEXOKINASE

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)	102	mg/dL	70-140	HEXOKINASE

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	5.8	%		HPLC



DR.SHIVARAJA SHETTY
M.B.B.S,M.D(Biochemistry)
CONSULTANT BIOCHEMIST

SIN No:EDT240015097

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ESTIMATED AVERAGE GLUCOSE (eAG)	120	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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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	161	mg/dL	<200	CHO-POD
TRIGLYCERIDES	47	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	63	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	98	mg/dL	<130	Calculated
LDL CHOLESTEROL	88.8	mg/dL	<100	Calculated
VLDL CHOLESTEROL	9.4	mg/dL	<30	Calculated
CHOL / HDL RATIO	2.56		0-4.97	Calculated

Comment:

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

	Desirable	Borderline High	High	Very High
TOTAL CHOLESTEROL	< 200	200 - 239	≥ 240	
TRIGLYCERIDES	<150	150 - 199	200 - 499	≥ 500
LDL	Optimal < 100 Near Optimal 100-129	130 - 159	160 - 189	≥ 190
HDL	≥ 60			
NON-HDL CHOLESTEROL	Optimal <130; Above Optimal 130-159	160-189	190-219	>220

1. Measurements in the same patient on different days can show physiological and analytical variations.
2. NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.
3. Primary prevention algorithm now includes absolute risk estimation and lower LDL Cholesterol target levels to determine eligibility of drug therapy.
4. Low HDL levels are associated with Coronary Heart Disease due to insufficient HDL being available to participate in reverse cholesterol transport, the process by which cholesterol is eliminated from peripheral tissues.
5. As per NCEP guidelines, all adults above the age of 20 years should be screened for lipid status. Selective screening of children above the age of 2 years with a family history of premature cardiovascular disease or those with at least one parent with high total cholesterol is recommended.
6. VLDL, LDL Cholesterol Non HDL Cholesterol, CHOL/HDL RATIO, LDL/HDL RATIO are calculated parameters when Triglycerides are below 350mg/dl. When Triglycerides are more than 350 mg/dl LDL cholesterol is a direct measurement.



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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
LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.55	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.08	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.47	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	10	U/L	<35	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	20.0	U/L	<35	IFCC
ALKALINE PHOSPHATASE	58.00	U/L	30-120	IFCC
PROTEIN, TOTAL	7.51	g/dL	6.6-8.3	Biuret
ALBUMIN	4.56	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.95	g/dL	2.0-3.5	Calculated
A/G RATIO	1.55		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 > 1In 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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Test Name	Result	Unit	Bio. Ref. Range	Method
RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	0.60	mg/dL	0.51-0.95	Jaffe's, Method
UREA	13.00	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	6.1	mg/dL	8.0 - 23.0	Calculated
URIC ACID	2.70	mg/dL	2.6-6.0	Uricase PAP
CALCIUM	9.60	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	2.99	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	138	mmol/L	136-146	ISE (Indirect)
POTASSIUM	4.6	mmol/L	3.5-5.1	ISE (Indirect)
CHLORIDE	107	mmol/L	101-109	ISE (Indirect)



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Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	12.00	U/L	<38	IFCC



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Karnataka- 560034



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Patient Name : Mrs.AKULA LAKSHMI SAI	Collected : 10/Feb/2024 10:47AM
Age/Gender : 32 Y 7 M 28 D/F	Received : 10/Feb/2024 05:11PM
UHID/MR No : CELE.0000128294	Reported : 10/Feb/2024 07:24PM
Visit ID : CELEOPV336721	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9989546123	

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)	1.1	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	7.10	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	1.557	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

- 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.SHIVARAJA SHETTY
M.B.B.S,M.D(Biochemistry)
CONSULTANT BIOCHEMIST

SIN No:SPL24022468

This test has been performed at Apollo Health & Lifestyle Ltd, RRL BANGALORE Laboratory

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Patient Name : Mrs.AKULA LAKSHMI SAI	Collected : 10/Feb/2024 10:47AM
Age/Gender : 32 Y 7 M 28 D/F	Received : 10/Feb/2024 05:11PM
UHID/MR No : CELE.0000128294	Reported : 10/Feb/2024 07:24PM
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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



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APOLLO CLINICS NETWORK

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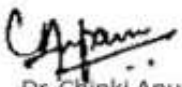


Patient Name : Mrs.AKULA LAKSHMI SAI	Collected : 10/Feb/2024 10:48AM
Age/Gender : 32 Y 7 M 28 D/F	Received : 10/Feb/2024 04:47PM
UHID/MR No : CELE.0000128294	Reported : 10/Feb/2024 05:27PM
Visit ID : CELEOPV336721	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9989546123	

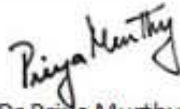
DEPARTMENT OF CLINICAL PATHOLOGY

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	7.0		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	1.010		1.002-1.030	Bromothymol Blue
BIOCHEMICAL EXAMINATION				
URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE		NEGATIVE	GLUCOSE OXIDASE
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING REACTION
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	SODIUM NITRO PRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	MODIFIED EHRlich REACTION
BLOOD	NEGATIVE		NEGATIVE	Peroxidase
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	LEUCOCYTE ESTERASE
CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY				
PUS CELLS	1-2	/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. Chinki Anupam
M.B.B.S.,M.D(Pathology)
Consultant Pathologist



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



SIN No:UR2279988

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APOLLO CLINICS NETWORK

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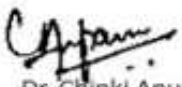
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Patient Name : Mrs.AKULA LAKSHMI SAI	Collected : 10/Feb/2024 01:05PM
Age/Gender : 32 Y 7 M 28 D/F	Received : 10/Feb/2024 10:40PM
UHID/MR No : CELE.0000128294	Reported : 10/Feb/2024 10:43PM
Visit ID : CELEOPV336721	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9989546123	

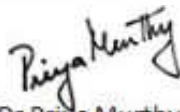
DEPARTMENT OF CLINICAL PATHOLOGY

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



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



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



SIN No:UPP016534

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Patient Name : Mrs.AKULA LAKSHMI SAI	Collected : 10/Feb/2024 10:48AM
Age/Gender : 32 Y 7 M 28 D/F	Received : 10/Feb/2024 04:47PM
UHID/MR No : CELE.0000128294	Reported : 10/Feb/2024 06:45PM
Visit ID : CELEOPV336721	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9989546123	

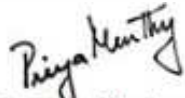
DEPARTMENT OF CLINICAL PATHOLOGY

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

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



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



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



SIN No: UF010562

This test has been performed at Apollo Health & Lifestyle Ltd, RRL BANGALORE Laboratory

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Patient Name : Mrs.AKULA LAKSHMI SAI	Collected : 10/Feb/2024 06:12PM
Age/Gender : 32 Y 7 M 28 D/F	Received : 12/Feb/2024 11:13AM
UHID/MR No : CELE.0000128294	Reported : 13/Feb/2024 05:47PM
Visit ID : CELEOPV336721	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9989546123	

DEPARTMENT OF CYTOLOGY

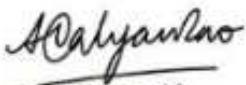
LBC PAP TEST (PAPSURE) , CERVICAL BRUSH SAMPLE

	CYTOLOGY NO.	2858/24
I	SPECIMEN	
a	SPECIMEN ADEQUACY	ADEQUATE
b	SPECIMEN TYPE	LIQUID-BASED PREPARATION (LBC)
	SPECIMEN NATURE/SOURCE	CERVICAL SMEAR
c	ENDOCERVICAL-TRANSFORMATION ZONE	ABSENT
d	COMMENTS	SATISFACTORY FOR EVALUATION
II	MICROSCOPY	Superficial and intermediate squamous epithelial cells with benign morphology. Inflammatory cells, predominantly neutrophils. Negative for intraepithelial lesion/malignancy.
III	RESULT	
a	EPITHELIAL CELL	
	SQUAMOUS CELL ABNORMALITIES	NOT SEEN
	GLANDULAR CELL ABNORMALITIES	NOT SEEN
b	ORGANISM	NIL
IV	INTERPRETATION	NEGATIVE FOR INTRAEPITHELIAL LESION OR MALIGNANCY

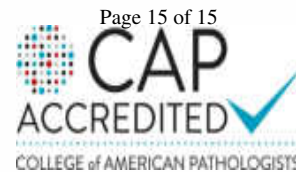
Pap Test is a screening test for cervical cancer with inherent false negative results. Regular screening and follow-up is recommended (Bethesda-TBS-2014) revised

*** End Of Report ***

Result/s to Follow:
PERIPHERAL SMEAR



Dr.A.Kalyan Rao
M.B.B.S, M.D(Pathology)
Consultant Pathologist



SIN No:CS074310

This test has been performed at Apollo Health & Lifestyle Ltd, Global Reference Laboratory,Hyderabad

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