Your appointment is confirmed

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

Tue 2/20/2024 11:41 AM

To:Bh - Chennai - Nanganallur [Union Bank Of India] <ubin0907791@unionbankofindia.bank> Cc:velachery@apolloclinic.com <velachery@apolloclinic.com>;manojkumar@apolloclinic.com <manojkumar@apolloclinic.com>;syamsunder.m@apollohl.com <syamsunder.m@apollohl.com>

141966



You don't often get email from noreply@apolloclinics.info. Learn why this is important

कृपया सावधानी बरतें एवं ध्यान दें: यह ई- मेल बाहर से प्राप्त हुई है. कृपया प्रेषक के ई-मेल पते को पूर्ण रूप से जाँचे (केवल प्रेषक का नाम ही नहीं). प्रेषक की पहचान किए बिना लिंक पर क्लिक न करें एवं संलग्न की न खोले और पहचाने की दी गई सामग्री सुरक्षित है अथवा नहीं. संदिग्ध मेल के संबंध में, कृपया antiphishing[Dot]ciso[At the rate]unionbankofindia[Dot]bank पर रिपोर्ट करें

<u>CAUTION AND ATTENTION PLEASE:</u> This is an external email. Please check the sender's full email address (not just the sender name). Do not click links or open attachments unless you recognize the sender and know the content is safe. In case of any suspicious email, please report it to <u>antiphishing[Dot]ciso[At the rate]unionbankofindia[Dot]bank</u>

Dear N SRILAKSHMI,

Greetings from Apollo Clinics,

Your corporate health check appointment is confirmed at **VELACHERY clinic** on **2024-02-22** at **08:00-08:15**.

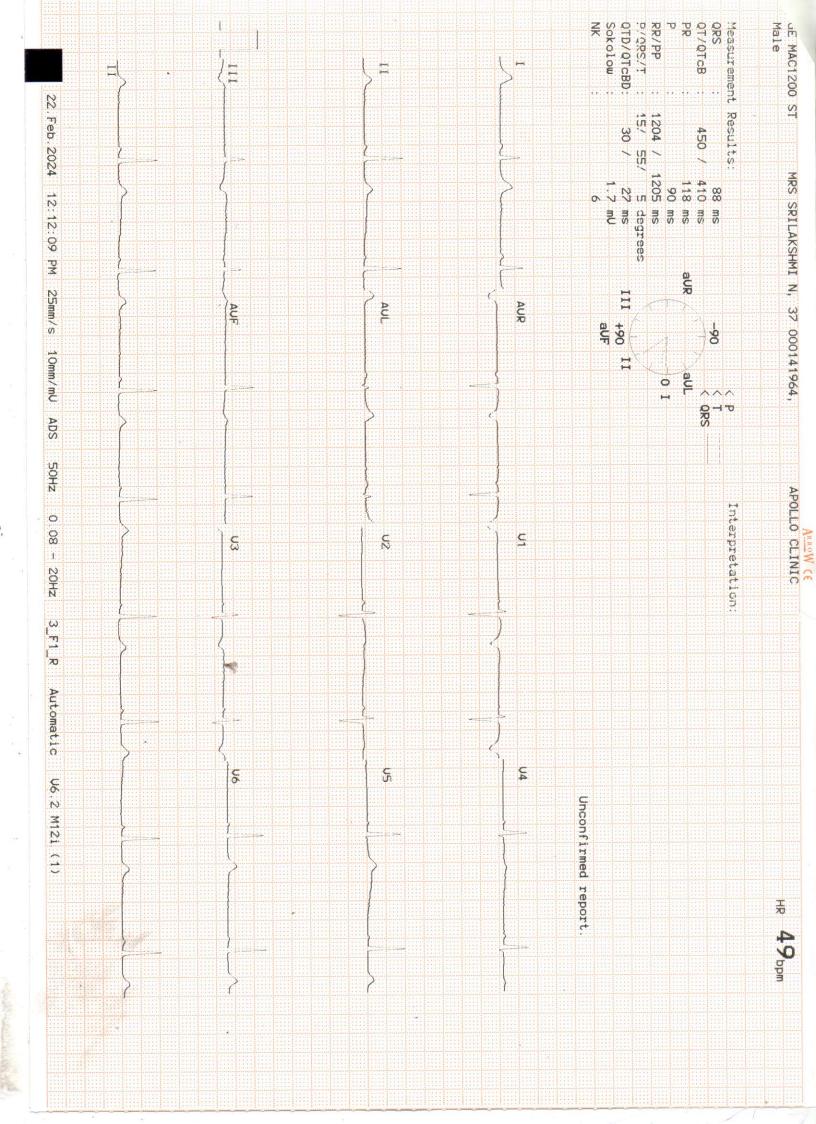
Payment Mode	
Corporate Name	ARCOFEMI HEALTHCARE LIMITED
Agreement Name	[ARCOFEMI MEDIWHEEL FEMALE AHC CREDIT PAN INDIA OP AGREEMENT]
Package Name	[ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324]

"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.

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:



DEPT. OF APOLLO HEALTH CHECK



GYNAECOLOGY CONSULT

Name:		00	1 110	P
ivame.	1187 "	201	Laurs	shaw!

141964 UHID:

22/02/24 Date:

Age : 34 L

Consultant Gynaecologist: Dr. Dun Here

DRUG ALLERGIES

Complaints (related to Gynaec) - NIL SPECIFIC / YES

Known to have Diabetes / Hypertension / IHD	/ Asthma / Thyroid / Others
Past Medical / Surgical History : 2 LSCS	Post Choleystertomy Status
Family History :	OTHER SYSTEMS:
GYNAEC HISTORY:	
Data No. 19 22 Process Co.	

Marital Status - S/M/Others

Children

Pala, 215cs. LNP-17/02/24 **Deliveries** L.C.B.

Abortion

Present Medication: Contraception -

Periods

L.M.P.

Menopause

P/R

GYNAEC EXAMINATION:

P/A So

S/E PN

en & nogina healthy

PAP SMEAR: Taken / Not Taken (Reason)

OPINION & ADVICE:

BREASTS: B LSOL

Height:

Weight:

Thyroid:

Others:

BMI:

REVIEW DETAILS: (with date) With Patient / With reports only

General Condition:

Blood Pressure:

GENERAL EXAMINATION:

Signature with Date & Time :

P.T.O. for more space

OPTHALMOLOGY



Name MRs. Stilakyhmi. N	Date 201 00 2024
Age 87 yrs	UHID No. 14/964
Sex: Male Female	

OPHTHAL FITNESS CERTIFICATE

RE

LE

DV-UCVA

8/3654

DV-BCVA

NEAR VISION

ANTERIOR SEGMENT

IOP

FIELDS OF VISION

EOM

COLOUR VISION

FUNDUS

IMPRESSION

ADVICE

fit /R/A- 6 mouths

* Refush tears efol 1-1-1-

Established Patient: No

Vitals

II)afe	Pulse (Beats/min)	_	Resp (Rate/min)	Temp (F)	Height (cms)	Weight	Percentage	Fat Level	Body Age (Years)	BMI	Circum	Hip (cms)	(cms)	Waist & Hip Ratio	User
22-02-2024 17:23	-		18 Rate/min	98 F	157 cms	58 Kgs	%	%	Years	23.53	76 cms	96 cms	cms		AHLL02475

Established Patient: No

Vitals

II)afe	Pulse (Beats/min)	_	Resp (Rate/min)	Temp (F)	Height (cms)	Weight	Percentage	Fat Level	Body Age (Years)	BMI	Circum	Hip (cms)	(cms)	Waist & Hip Ratio	User
22-02-2024 17:23	-		18 Rate/min	98 F	157 cms	58 Kgs	%	%	Years	23.53	76 cms	96 cms	cms		AHLL02475

Name: Mrs. SRILAKSHMI N
Age/Gender: 37 Y/F
Address: chennai
Location: CHENNAI, TAMIL NADU

Doctor:

Department: GENERAL
Rate Plan: VELACHERY_03122022
Sponsor: ARCOFEMI HEALTHCARE LIMITED

Consulting Doctor: Dr. SHILFA NIGAR N

HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

SYSTEMIC REVIEW

HT-HISTORY

PHYSICAL EXAMINATION

SYSTEMIC EXAMINATION

IMPRESSION

RECOMMENDATION

Doctor's Signature

MR No: Visit ID: Visit Date:

CVEL.0000141964 CVELOPV199630 22-02-2024 10:02

Discharge Date:

Referred By: SELF Name: Mrs. SRILAKSHMI N

Age/Gender: 37 Y/F Address: chennai

Location: CHENNAI, TAMIL NADU

Doctor:

Department: GENERAL

Rate Plan: VELACHERY_03122022

Sponsor: ARCOFEMI HEALTHCARE LIMITED Consulting Doctor: Dr. V J NIRANJANA BHARATHI

Doctor's Signature

MR No: CVEL.0000141964
Visit ID: CVELOPV199630
Visit Date: 22-02-2024 10:02

Discharge Date:

Referred By: SELF

Name: Mrs. SRILAKSHMI N
Age/Gender: 37 Y/F
Address: chennai
Location: CHENNAI, TAMIL NADU

Doctor:

Department: GENERAL
Rate Plan: VELACHERY_03122022
Sponsor: ARCOFEMI HEALTHCARE LIMITED Consulting Doctor: Dr. PAVITHRA RAMAKRISHNAN

HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

SYSTEMIC REVIEW

HT-HISTORY

PHYSICAL EXAMINATION

SYSTEMIC EXAMINATION

IMPRESSION

RECOMMENDATION

Doctor's Signature

MR No: CVEL.0000141964 CVELOPV199630 Visit ID: Visit Date: 22-02-2024 10:02

Discharge Date:

Referred By: SELF

Name: Mrs. SRILAKSHMI N Age/Gender: 37 Y/F Address: chennai Location:

CHENNAI, TAMIL NADU

Doctor:

Department: GENERAL
Rate Plan: VELACHERY_03122022
Sponsor: ARCOFEMI HEALTHCARE LIMITED Consulting Doctor: Dr. YASODHA KUMARA REDDY MOKKALA

HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

SYSTEMIC REVIEW

HT-HISTORY

PHYSICAL EXAMINATION

SYSTEMIC EXAMINATION

IMPRESSION

RECOMMENDATION

Doctor's Signature

MR No: CVEL.0000141964 CVELOPV199630 Visit ID: Visit Date: 22-02-2024 10:02

Discharge Date:

Referred By: SELF Established Patient: No

Vitals

II)afe	Pulse (Beats/min)	_	Resp (Rate/min)	Temp (F)	Height (cms)	Weight	Percentage	Fat Level	Body Age (Years)	BMI	Circum	Hip (cms)	(cms)	Waist & Hip Ratio	User
22-02-2024 17:23	-		18 Rate/min	98 F	157 cms	58 Kgs	%	%	Years	23.53	76 cms	96 cms	cms		AHLL02475

Mrs. SRILAKSHMI N

37 Y/F Age/Gender: Address: chennai

CHENNAI, TAMIL NADU Location:

Doctor:

Department: GENERAL

Rate Plan:

VELACHERY_03122022 ARCOFEMI HEALTHCARE LIMITED Sponsor:

Consulting Doctor: Dr. BENITA JAYACHANDRAN

Doctor's Signature

MR No: CVEL.0000141964 Visit ID: CVELOPV199630 Visit Date: 22-02-2024 10:02

Discharge Date:

Referred By: SELF Established Patient: No

Vitals

II)afe	Pulse (Beats/min)	_	Resp (Rate/min)	Temp (F)	Height (cms)	Weight	Percentage	Fat Level	Body Age (Years)	BMI	Circum	Hip (cms)	(cms)	Waist & Hip Ratio	User
22-02-2024 17:23	-		18 Rate/min	98 F	157 cms	58 Kgs	%	%	Years	23.53	76 cms	96 cms	cms		AHLL02475

Established Patient: No

Vitals

II)afe	Pulse (Beats/min)	_	Resp (Rate/min)	Temp (F)	Height (cms)	Weight	Percentage	Fat Level	Body Age (Years)	BMI	Circum	Hip (cms)	(cms)	Waist & Hip Ratio	User
22-02-2024 17:23	-		18 Rate/min	98 F	157 cms	58 Kgs	%	%	Years	23.53	76 cms	96 cms	cms		AHLL02475



Patient Name : Mrs. SRILAKSHMI N Age/Gender : 37 Y/F

UHID/MR No. : CVEL.0000141964

Sample Collected on :

LRN#

: RAD2244287

Ref Doctor : SELF **Emp/Auth/TPA ID** : 364030

OP Visit No Reported on : CVELOPV199630 : 22-02-2024 12:20

Specimen :

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

Liver appears normal in size (14.6 cms) with increased echogenecity. No focal lesion is seen.

No dilatation of the intrahepatic biliary radicals.

Gall bladder: Not visualized (h/o surgery).

Spleen appears normal (7.2 cm). No focal lesion seen. Splenic vein appears normal.

Pancreas appears normal in echopattern. No focal/mass lesion/calcification.

No evidence of peripancreatic free fluid or collection. Pancreatic duct appears normal.

Both the kidneys appear normal in size, shape and echopattern. Cortical thickness and CM differentiation are maintained. No calculus / hydronephrosis seen on either side.

Right kidney - 9.6 x 3.3 cms. Left kidney - 9.9 x 4.6 cms.

<u>Urinary Bladder</u> is well distended and appears normal. No evidence of any wall thickening or abnormality. No evidence of any intrinsic or extrinsic bladder abnormality detected.

Uterus: Bulky uterus and measuring 9.8 x 4.8 x 5.0 cms.

Endometrium appears thickened and measuring 13 mm.

Both ovaries are polycystic.

Right ovary - 3.5 x 1.8 x 3.5 cms (Vol 12.4 ml).

Left ovary - 3.3 x 2.1 x 3.1 cms (Vol 12.0 ml).

No evidence of any adnexal pathology noted.

IMPRESSION:-

- * GRADE I FATTY LIVER.
- * POST CHOLECYSTECTOMY STATUS.
- * BULKY UTERUS WITH THICKENED ENDOMETRIUM.
- * BILATERAL POLYCYSTIC OVARIES.

(The sonography findings should always be considered in correlation with the clinical and other investigation finding where applicable.) It is only a professional opinion, Not valid for medico legal purpose.



Patient Name : Mrs. SRILAKSHMI N Age/Gender : 37 Y/F

hone

Dr. PASUPULETI SANTOSH KUMAR M.B.B.S., DNB (RADIODIAGNOSIS)

Radiology







: Mrs.SRILAKSHMI N

Age/Gender

: 37 Y 11 M 10 D/F

UHID/MR No

: CVEL.0000141964

Visit ID Ref Doctor : CVELOPV199630

Emp/Auth/TPA ID

: Dr.SELF : 364030

Collected

: 22/Feb/2024 10:57AM

Received

: 22/Feb/2024 01:35PM

Reported Status

: 22/Feb/2024 03:01PM

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

PERIPHERAL SMEAR, WHOLE BLOOD EDTA

METHODOLOGY

: Microscopic.

RBC MORPHOLOGY

: Predominantly normocytic normochromic RBC's noted.

WBC MORPHOLOGY

: Normal in number, morphology and distribution. No abnormal cells seen.

PLATELETS

: Adequate in number.

PARASITES

: No haemoparasites seen.

IMPRESSION

: Normocytic normochromic blood picture.

NOTE/ COMMENT

: Please correlate clinically.

Page 1 of 13



Dr.MARQUESS RAJ M.D,DipRCPath,D.N.B(PATH) Consultant Pathologist

SIN No:BED240045863

This This the sheet performed at Handlan Health and Liferty and Li









: Mrs.SRILAKSHMI N

Age/Gender

: 37 Y 11 M 10 D/F

UHID/MR No

: CVEL.0000141964

Visit ID Ref Doctor : CVELOPV199630

Emp/Auth/TPA ID

: Dr.SELF : 364030 Collected

: 22/Feb/2024 10:57AM

Received

: 22/Feb/2024 01:35PM

Reported

: 22/Feb/2024 03:01PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	12.1	g/dL	12-15	Spectrophotometer
PCV	35.90	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.02	Million/cu.mm	3.8-4.8	Electrical Impedence
MCV	89.3	fL	83-101	Calculated
MCH	30	pg	27-32	Calculated
MCHC	33.6	g/dL	31.5-34.5	Calculated
R.D.W	13.2	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	4,200	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (I	DLC)			
NEUTROPHILS	45.7	%	40-80	Electrical Impedance
LYMPHOCYTES	43.9	%	20-40	Electrical Impedance
EOSINOPHILS	1.9	%	1-6	Electrical Impedance
MONOCYTES	7.8	%	2-10	Electrical Impedance
BASOPHILS	0.7	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	1919.4	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	1843.8	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	79.8	Cells/cu.mm	20-500	Calculated
MONOCYTES	327.6	Cells/cu.mm	200-1000	Calculated
BASOPHILS	29.4	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	1.04		0.78- 3.53	Calculated
PLATELET COUNT	212000	cells/cu.mm	150000-410000	Electrical impedence
ERYTHROCYTE SEDIMENTATION RATE (ESR)	23	mm at the end of 1 hour	0-20	Modified Westergren
PERIPHERAL SMEAR				

METHODOLOGY

: Microscopic.

RBC MORPHOLOGY

: Predominantly normocytic normochromic RBC's noted.

Page 2 of 13

Dr.MARQUESS RAJ
M.D,DipRCPath,D.N.B(PATH)
Consultant Pathologist

SIN No:BED240045863

This This Has been performed at Apollo Health, and Linestyled Adamennai, Diagnostics Laboratory.



Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016 | www.apollohl.com | Email ID: enquiry@apollohl.com, Ph No: 040-4904 7777, Fax No: 4904 7744

Address:
D No.30, F – Block 2nd Avenue, Anna Nagar East, Chennai.600 102,









: Mrs.SRILAKSHMI N

Age/Gender

: 37 Y 11 M 10 D/F

UHID/MR No

: CVEL.0000141964

Visit ID Ref Doctor : CVELOPV199630

Emp/Auth/TPA ID

: 364030

: Dr.SELF

Collected

: 22/Feb/2024 10:57AM

Received

: 22/Feb/2024 01:35PM

Reported

: 22/Feb/2024 03:01PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324

WBC MORPHOLOGY

: Normal in number, morphology and distribution. No abnormal cells seen.

PLATELETS

: Adequate in number.

PARASITES

: No haemoparasites seen.

IMPRESSION

: Normocytic normochromic blood picture.

NOTE/ COMMENT

: Please correlate clinically.

Page 3 of 13

Dr.MARQUESS RAJ M.D,DipRCPath,D.N.B(PATH) Consultant Pathologist

SIN No:BED240045863

This This Hest bas been performed at Appella Health and Lifestyla deta Achennai, Diagnostics Laboratory.









Patient Name Age/Gender : Mrs.SRILAKSHMI N

LILID/MD NI-

: 37 Y 11 M 10 D/F

UHID/MR No

: CVEL.0000141964

Visit ID Ref Doctor : CVELOPV199630 : Dr.SELF

Emp/Auth/TPA ID : 364030

Collected

: 22/Feb/2024 10:57AM

Received

: 22/Feb/2024 01:35PM

Reported

: 22/Feb/2024 07:24PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
BLOOD GROUP ABO AND RH FAC	TOR , WHOLE BLOOD EDTA	4		
BLOOD GROUP TYPE	A			Microplate Hemagglutination
Rh TYPE	Positive			Microplate Hemagglutination

PLEASE NOTE THIS SAMPLE HAS BEEN TESTED ONLY FOR ABO MAJOR GROUPING AND ANTI D ONLY

Page 4 of 13

SCSTMONCE

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

SIN No:BED240045863

This test has been performed at Apollo Health and Lifestyle Ltd - Chennai, Diagnostics Laboratory. This test has been performed at Apollo Health and Lifestyle Ltd - RRL ASHOK NAGAR

Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)

Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016 | www.apollohl.com | Email ID: enquiry@apollohl.com, Ph No: 040-4904 7777, Fax No: 4904 7744

Address: D No.30, F – Block 2nd Avenue, Anna Nagar East, Chennai.600 102, Phone - 044-26224504 / 05







Patient Name : Mrs.SRILAKSHMI N Age/Gender : 37 Y 11 M 10 D/F

UHID/MR No : CVEL.0000141964 Visit ID : CVELOPV199630

Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 364030 Collected : 22/Feb/2024 10:57AM

Received : 22/Feb/2024 03:25PM Reported : 22/Feb/2024 04:01PM

Status : Final Report

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, FASTING, NAF PLASMA	105	mg/dL	70-100	HEXOKINASE

Comment:

As per American Diabetes Guidelines, 2023

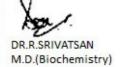
Fasting Glucose Values in mg/dL	Interpretation	
70-100 mg/dL	Normal	
100-125 mg/dL	Prediabetes	
≥126 mg/dL	Diabetes	
<70 mg/dL	Hypoglycemia	

Note:

- 1. 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.
- 2. Very high glucose levels (>450 mg/dL in adults) may result in Diabetic Ketoacidosis & is considered critical.

Page 5 of 13





SIN No:PLF02110615

This test has been performed at Apollo Health and Lifestyle Ltd - Chennai, Diagnostics Laboratory. This test has been performed at Apollo Health and Lifestyle Ltd - RRL ASHOK NAGAR

Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)

Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016 | www.apollohl.com | Email ID: enquiry@apollohl.com, Ph No: 040-4904 7777, Fax No: 4904 7744

Address:
D No.30, F – Block 2nd Avenue, Anna Nagar East, Chennai.600 102,
Phone - 044-26224504 (05









: Mrs.SRILAKSHMI N

Age/Gender

: 37 Y 11 M 10 D/F

UHID/MR No Visit ID

: CVEL.0000141964 : CVELOPV199630

Ref Doctor

Emp/Auth/TPA ID

: Dr.SELF : 364030

Collected

: 22/Feb/2024 10:57AM

Received

: 22/Feb/2024 01:32PM

Reported

: 22/Feb/2024 03:02PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
HBA1C (GLYCATED HEMOGLOBIN), W	HOLE BLOOD EDTA			
HBA1C, GLYCATED HEMOGLOBIN	5.2	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	103	mg/dL		Calculated

Comment:

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

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

Note: Dietary preparation or fasting is not required.

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

A: HbF >25%

- B: Homozygous Hemoglobinopathy.
- (Hb Electrophoresis is recommended method for detection of Hemoglobinopathy)

Page 6 of 13



Dr.MARQUESS RAJ M.D,DipRCPath,D.N.B(PATH) Consultant Pathologist

SIN No:EDT240020347

This This the sheet performed at Handlan Health and Liferty and Li

Apollo Health and Lifestyle Limited (CIN-U85110TG2000PLC115819)

Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016 | www.apollohl.com | Email ID: enquiry@apollohl.com, Ph No: 040-4904 7777, Fax No: 4904 7744







Patient Name : Mrs.SRILAKSHMI N Age/Gender : 37 Y 11 M 10 D/F

UHID/MR No : CVEL.0000141964 Visit ID : CVELOPV199630

Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 364030

Collected : 22/Feb/2024 10:57AM Received : 22/Feb/2024 03:35PM

Reported : 22/Feb/2024 05:31PM

: Final Report Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

Status

ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method			
LIPID PROFILE , SERUM							
TOTAL CHOLESTEROL	168	mg/dL	<200	CHO-POD			
TRIGLYCERIDES	67	mg/dL	<150	GPO-POD			
HDL CHOLESTEROL	54	mg/dL	40-60	Enzymatic Immunoinhibition			
NON-HDL CHOLESTEROL	114	mg/dL	<130	Calculated			
LDL CHOLESTEROL	100.6	mg/dL	<100	Calculated			
VLDL CHOLESTEROL	13.4	mg/dL	<30	Calculated			
CHOL / HDL RATIO	3.11		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 400 mg/dL. When Triglycerides are more than 400 mg/dL LDL cholesterol is a direct measurement.

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M.D.(Biochemistry)

SIN No:SE04637585

This test has been performed at Apollo Health and Lifestyle Ltd - Chennai, Diagnostics Laboratory. This test has been performed at Apollo Health and Lifestyle Ltd - RRL ASHOK NAGAR

Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)

Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016 | www.apollohl.com | Email ID: enquiry@apollohl.com, Ph No: 040-4904 7777, Fax No: 4904 7744







Patient Name : Mrs.SRILAKSHMI N

Age/Gender : 37 Y 11 M 10 D/F

UHID/MR No : CVEL.0000141964

Visit ID : CVELOPV199630

Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 364030 Collected : 22/Feb/2024 10:57AM

Received : 22/Feb/2024 03:35PM Reported : 22/Feb/2024 05:31PM

Status : Final Report

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method			
LIVER FUNCTION TEST (LFT) , SERUM							
BILIRUBIN, TOTAL	0.79	mg/dL	0.3–1.2	DPD			
BILIRUBIN CONJUGATED (DIRECT)	0.16	mg/dL	<0.2	DPD			
BILIRUBIN (INDIRECT)	0.63	mg/dL	0.0-1.1	CALCULATED			
ALANINE AMINOTRANSFERASE (ALT/SGPT)	9	U/L	<35	IFCC			
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	17.0	U/L	<35	IFCC			
ALKALINE PHOSPHATASE	63.00	U/L	30-120	IFCC			
PROTEIN, TOTAL	6.90	g/dL	6.6-8.3	Biuret			
ALBUMIN	4.30	g/dL	3.5-5.2	BROMO CRESOL GREEN			
GLOBULIN	2.60	g/dL	2.0-3.5	Calculated			
A/G RATIO	1.65		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, Wilsons'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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DR.R.SRIVATSAN M.D.(Biochemistry)

SIN No:SE04637585

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Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)

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Address: D No.30, F – Block 2nd Avenue, Anna Nagar East, Chennai.600 102, Phone - 044-26224504 / 05







Patient Name : Mrs.SRILAKSHMI N Age/Gender : 37 Y 11 M 10 D/F

UHID/MR No : CVEL.0000141964 Visit ID : CVELOPV199630

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: Final Report Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

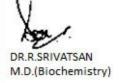
ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324

Status

Test Name	Result	Unit	Bio. Ref. Range	Method				
RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT), SERUM								
CREATININE	0.60	mg/dL	0.72 – 1.18	JAFFE METHOD				
UREA	18.00	mg/dL	17-43	GLDH, Kinetic Assay				
BLOOD UREA NITROGEN	8.4	mg/dL	8.0 - 23.0	Calculated				
URIC ACID	4.00	mg/dL	2.6-6.0	Uricase PAP				
CALCIUM	8.80	mg/dL	8.8-10.6	Arsenazo III				
PHOSPHORUS, INORGANIC	4.50	mg/dL	2.5-4.5	Phosphomolybdate Complex				
SODIUM	138	mmol/L	136–146	ISE (Indirect)				
POTASSIUM	3.9	mmol/L	3.5–5.1	ISE (Indirect)				
CHLORIDE	106	mmol/L	101–109	ISE (Indirect)				

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Patient Name : Mrs.SRILAKSHMI N Age/Gender : 37 Y 11 M 10 D/F

UHID/MR No : CVEL.0000141964 Visit ID : CVELOPV199630

Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 364030

Collected : 22/Feb/2024 10:57AM Received : 22/Feb/2024 03:35PM

Reported : 22/Feb/2024 05:28PM

: Final Report Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

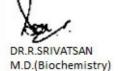
Status

ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL	9.00	U/L	<38	IFCC
TRANSPEPTIDASE (GGT), SERUM				

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SIN No:SE04637585

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Patient Name : Mrs.SRILAKSHMI N

Age/Gender : 37 Y 11 M 10 D/F

UHID/MR No : CVEL.0000141964

Visit ID : CVELOPV199630 Ref Doctor : Dr.SELF

Emp/Auth/TPA ID : 364030

Collected : 22/Feb/2024 10:57AM

Received : 22/Feb/2024 03:28PM Reported : 22/Feb/2024 06:15PM

Status : Final Report

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324

Test Name	Result	Unit Bio. Ref. Rar		ange Method	
THYROID PROFILE TOTAL (T3, T4, TSH)	, SERUM				
TRI-IODOTHYRONINE (T3, TOTAL)	0.649	ng/mL	0.7-2.04	CLIA	
THYROXINE (T4, TOTAL)	9.95	μg/dL	5.48-14.28	CLIA	
THYROID STIMULATING HORMONE (TSH)	1.803	μIU/mL	0.34-5.60	CLIA	

Comment:

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

- 1. TSH is a glycoprotein hormone secreted by the anterior pituitary. TSH activates production of T3 (Triiodothyronine) and its prohormone T4 (Thyroxine). Increased blood level of T3 and T4 inhibit production of TSH.
- 2. TSH is elevated in primary hypothyroidism and will be low in primary hyperthyroidism. Elevated or low TSH in the context of normal free thyroxine is often referred to as sub-clinical hypo- or hyperthyroidism respectively.
- 3. Both T4 & T3 provides limited clinical information as both are highly bound to proteins in circulation and reflects mostly inactive hormone. Only a very small fraction of circulating hormone is free and biologically active.

4. Significant variations in TSH can occur with circadian rhythm, hormonal status, stress, sleep deprivation, medication & circulating antibodies.

TSH	Т3	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

Page 11 of 13



DR.R.SRIVATSAN M.D.(Biochemistry)

SIN No:SPL24030095

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Patient Name Age/Gender

: Mrs.SRILAKSHMI N

UHID/MR No

: 37 Y 11 M 10 D/F

Visit ID

: CVEL.0000141964 : CVELOPV199630

Ref Doctor

Emp/Auth/TPA ID

: Dr.SELF : 364030

Collected Received

: 22/Feb/2024 10:57AM

: 22/Feb/2024 01:26PM

Reported

: 22/Feb/2024 02:31PM

Status Sponsor Name : Final Report

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
COMPLETE URINE EXAMINATION (CUE) , URINE			
PHYSICAL EXAMINATION				
COLOUR	PALE STRAW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
рН	5.5		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	1.020		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	MODIFED EHRLICH REACTION
BLOOD	NEGATIVE		NEGATIVE	Peroxidase
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	LEUCOCYTE ESTERASE
CENTRIFUGED SEDIMENT WET M	OUNT AND MICROSCOP	Y		
PUS CELLS	1-2	/hpf	0-5	Microscopy
EPITHELIAL CELLS	2-4	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	ABSENT		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY

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M.B.B.S, M.D(Pathology) Consultant Pathologist

SIN No:UR2288504

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: Mrs.SRILAKSHMI N

Age/Gender

: 37 Y 11 M 10 D/F

UHID/MR No

: CVEL.0000141964

Visit ID Ref Doctor : CVELOPV199630

: Dr.SELF

Emp/Auth/TPA ID : 364030

Collected Received : 22/Feb/2024 10:57AM : 23/Feb/2024 11:21AM

Reported

: 24/Feb/2024 09:46AM

Status

: Final Report

Sponsor Name

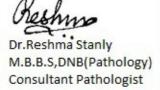
: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF CYTOLOGY

	CYTOLOGY NO.	3748/24
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
П	MICROSCOPY	Superficial and intermediate squamous epithelial cells with benign morphology. Inflammatory cells, predominantly neutrophils. Negative for intraepithelial lesion/ malignancy.
Ш	RESULT	
a	EPITHEIAL CELL	
	SQUAMOUS CELL ABNORMALITIES	NOT SEEN
	GLANDULAR CELL ABNORMALITIES	NOT SEEN
b	ORGANISM	NIL
с	NON NEOPLASTIC FINDINGS	INFLAMMATORY SMEAR
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 ***







SIN No:CS074881

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

Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)

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