

| | |
|--------------------------------|--|
| Patient Name : Mrs.PURANI DASS | Collected : 28/Sep/2024 10:39AM |
| Age/Gender : 33 Y 11 M 4 D/F | Received : 28/Sep/2024 02:08PM |
| UHID/MR No : CVEL.0000136848 | Reported : 28/Sep/2024 05:59PM |
| Visit ID : CVELOPV214006 | Status : Final Report |
| Ref Doctor : Self | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 112335 | |

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. |



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



This test has been performed at Apollo Health and Lifestyle Ltd - RRL ASHOK NAGAR

SIN No: CVL240904249
Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)
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APOLLO CLINICS NETWORK

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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. Interval | Method |
|--|--------|---------------|--------------------|--------------------------------|
| HEMOGRAM , WHOLE BLOOD EDTA | | | | |
| HAEMOGLOBIN | 12.9 | g/dL | 12-15 | Spectrophotometer |
| PCV | 37.10 | % | 36-46 | Electronic pulse & Calculation |
| RBC COUNT | 4.62 | Million/cu.mm | 3.8-4.8 | Electrical Impedance |
| MCV | 80.4 | fL | 83-101 | Calculated |
| MCH | 28 | pg | 27-32 | Calculated |
| MCHC | 34.9 | g/dL | 31.5-34.5 | Calculated |
| R.D.W | 14.3 | % | 11.6-14 | Calculated |
| TOTAL LEUCOCYTE COUNT (TLC) | 7,100 | cells/cu.mm | 4000-10000 | Electrical Impedance |
| DIFFERENTIAL LEUCOCYTIC COUNT (DLC) | | | | |
| NEUTROPHILS | 63.1 | % | 40-80 | Electrical Impedance |
| LYMPHOCYTES | 28.6 | % | 20-40 | Electrical Impedance |
| EOSINOPHILS | 1.5 | % | 1-6 | Electrical Impedance |
| MONOCYTES | 6.3 | % | 2-10 | Electrical Impedance |
| BASOPHILS | 0.5 | % | <1-2 | Electrical Impedance |
| ABSOLUTE LEUCOCYTE COUNT | | | | |
| NEUTROPHILS | 4480.1 | Cells/cu.mm | 2000-7000 | Calculated |
| LYMPHOCYTES | 2030.6 | Cells/cu.mm | 1000-3000 | Calculated |
| EOSINOPHILS | 106.5 | Cells/cu.mm | 20-500 | Calculated |
| MONOCYTES | 447.3 | Cells/cu.mm | 200-1000 | Calculated |
| BASOPHILS | 35.5 | Cells/cu.mm | 0-100 | Calculated |
| Neutrophil lymphocyte ratio (NLR) | 2.21 | | 0.78- 3.53 | Calculated |
| PLATELET COUNT | 218000 | cells/cu.mm | 150000-410000 | Electrical impedance |
| ERYTHROCYTE SEDIMENTATION RATE (ESR) | 4 | mm/hour | 0-20 | Capillary photometry |
| PERIPHERAL SMEAR | | | | |

METHODOLOGY : Microscopic.

RBC MORPHOLOGY : Predominantly normocytic normochromic RBC's noted.



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DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - 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.



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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. Interval | Method |
|---|----------|------|--------------------|-----------------------------|
| BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA | | | | |
| BLOOD GROUP TYPE | AB | | | Microplate Hemagglutination |
| Rh TYPE | Positive | | | Microplate Hemagglutination |
| PLEASE NOTE THIS SAMPLE HAS BEEN TESTED ONLY FOR ABO MAJOR GROUPING AND ANTI D ONLY | | | | |



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| Patient Name : Mrs.PURANI DASS | Collected : 28/Sep/2024 10:39AM |
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| UHID/MR No : CVEL.0000136848 | Reported : 28/Sep/2024 06:13PM |
| Visit ID : CVELOPV214006 | 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. Interval | 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. Interval | Method |
|--|--------|-------|--------------------|------------|
| GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR) | 78 | 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.



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



This test has been performed at Apollo Health and Lifestyle Ltd - RRL ASHOK NAGAR

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| Patient Name : Mrs.PURANI DASS | Collected : 28/Sep/2024 10:39AM |
| Age/Gender : 33 Y 11 M 4 D/F | Received : 28/Sep/2024 02:09PM |
| UHID/MR No : CVEL.0000136848 | Reported : 28/Sep/2024 03:43PM |
| Visit ID : CVELOPV214006 | 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. Interval | Method |
|---|--------|-------|--------------------|------------|
| HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA | | | | |
| HBA1C, GLYCATED HEMOGLOBIN | 5.3 | % | | HPLC |
| ESTIMATED AVERAGE GLUCOSE (eAG) | 105 | 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 glycaemic 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)



Dr. MARQUESS RAJ
M.D, DipRCPATH, D.N.B (PATH)

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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. Interval | Method |
|------------------------------|--------|-------|--------------------|----------------------------|
| LIPID PROFILE , SERUM | | | | |
| TOTAL CHOLESTEROL | 125 | mg/dL | <200 | CHO-POD |
| TRIGLYCERIDES | 60 | mg/dL | <150 | GPO-POD |
| HDL CHOLESTEROL | 43 | mg/dL | 40-60 | Enzymatic Immunoinhibition |
| NON-HDL CHOLESTEROL | 82 | mg/dL | <130 | Calculated |
| LDL CHOLESTEROL | 70 | mg/dL | <100 | Calculated |
| VLDL CHOLESTEROL | 12 | mg/dL | <30 | Calculated |
| CHOL / HDL RATIO | 2.91 | | 0-4.97 | Calculated |
| ATHEROGENIC INDEX (AIP) | < 0.01 | | <0.11 | 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 can show physiological and analytical variations.

NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.



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



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SIN No: CVL240904246

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DEPARTMENT OF BIOCHEMISTRY

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| Test Name | Result | Unit | Bio. Ref. Interval | Method |
|--|------------|-------|--------------------|---|
| LIVER FUNCTION TEST (LFT) , SERUM | | | | |
| BILIRUBIN, TOTAL | 0.61 | mg/dL | 0.3-1.2 | DPD |
| BILIRUBIN CONJUGATED (DIRECT) | 0.14 | mg/dL | <0.2 | DPD |
| BILIRUBIN (INDIRECT) | 0.47 | mg/dL | 0.0-1.1 | Dual Wavelength |
| ALANINE AMINOTRANSFERASE (ALT/SGPT) | 8 | U/L | <50 | UV with P5P |
| ASPARTATE AMINOTRANSFERASE (AST/SGOT) | 13.0 | U/L | <50 | IFCC Without Pyridoxal phosphate Activation |
| AST (SGOT) / ALT (SGPT) RATIO (DE RITIS) | 1.6 | | <1.15 | Calculated |
| ALKALINE PHOSPHATASE | 76.00 | U/L | 30-120 | IFCC AMP Buffer |
| PROTEIN, TOTAL | 7.00 | g/dL | 6.6-8.3 | Biuret |
| ALBUMIN | 4.00 | g/dL | 3.5-5.2 | BROMO CRESOL GREEN |
| GLOBULIN | 3.00 | g/dL | 2.0-3.5 | Calculated |
| A/G RATIO | 1.33 | | 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. 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's diseases, Cirrhosis, but the increase is usually not >2.

2. Cholestatic Pattern:

*ALP – Disproportionate increase in ALP compared with AST, ALT. ALP elevation also seen in pregnancy, impacted by age and sex. *Bilirubin elevated- predominantly direct , To establish the hepatic origin correlation with elevated GGT helps.

3. Synthetic function impairment:

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

4. Associated tests for assessment of liver fibrosis - Fibrosis-4 and APRI Index.



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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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APOLLO CLINICS NETWORK

Telangana: Hyderabad (AS Rao Nagar | Chanda Nagar | Kondapur | Nallakunta | Nizampet | Manikonda | Uppal) | **Andhra Pradesh:** Vizag (Seethamma Peta) | **Karnataka:** Bangalore (Basavanagudi | Bellandur | Electronics City | Fraser Town | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli | Koramangala | Sarjapur Road) | **Mysore** (VV Mohalla) | **Tamilnadu:** Chennai (Annanagar | Kotturpuram | Mogappair | T Nagar | Valasaravakkam | 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)

| | |
|--------------------------------|--|
| Patient Name : Mrs.PURANI DASS | Collected : 28/Sep/2024 10:39AM |
| Age/Gender : 33 Y 11 M 4 D/F | Received : 28/Sep/2024 01:56PM |
| UHID/MR No : CVEL.0000136848 | Reported : 28/Sep/2024 04:48PM |
| Visit ID : CVELOPV214006 | Status : Final Report |
| Ref Doctor : Self | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 112335 | |

DEPARTMENT OF BIOCHEMISTRY

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



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



This test has been performed at Apollo Health and Lifestyle Ltd - RRL ASHOK NAGAR

SIN No: CVL240904246

Apollo Health and Lifestyle Limited

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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. Interval | Method |
|---|--------|--------|--------------------|--------------------------|
| RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM | | | | |
| CREATININE | 0.51 | mg/dL | 0.72 – 1.18 | JAFFE METHOD |
| UREA | 17.00 | mg/dL | 17-43 | GLDH, Kinetic Assay |
| BLOOD UREA NITROGEN | 7.9 | mg/dL | 8.0 - 23.0 | Calculated |
| URIC ACID | 4.40 | mg/dL | 2.6-6.0 | Uricase PAP |
| CALCIUM | 9.00 | mg/dL | 8.8-10.6 | Arsenazo III |
| PHOSPHORUS, INORGANIC | 3.30 | mg/dL | 2.5-4.5 | Phosphomolybdate Complex |
| SODIUM | 139 | mmol/L | 136–146 | ISE (Indirect) |
| POTASSIUM | 4.3 | mmol/L | 3.5–5.1 | ISE (Indirect) |
| CHLORIDE | 106 | mmol/L | 101–109 | ISE (Indirect) |
| PROTEIN, TOTAL | 7.00 | g/dL | 6.6-8.3 | Biuret |
| ALBUMIN | 4.00 | g/dL | 3.5-5.2 | BROMO CRESOL GREEN |
| GLOBULIN | 3.00 | g/dL | 2.0-3.5 | Calculated |
| A/G RATIO | 1.33 | | 0.9-2.0 | Calculated |



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| Age/Gender : 33 Y 11 M 4 D/F | Received : 28/Sep/2024 01:56PM |
| UHID/MR No : CVEL.0000136848 | Reported : 28/Sep/2024 04:44PM |
| Visit ID : CVELOPV214006 | Status : Final Report |
| Ref Doctor : Self | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 112335 | |

DEPARTMENT OF BIOCHEMISTRY

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

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



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| | |
|--------------------------------|--|
| Patient Name : Mrs.PURANI DASS | Collected : 28/Sep/2024 10:39AM |
| Age/Gender : 33 Y 11 M 4 D/F | Received : 28/Sep/2024 01:53PM |
| UHID/MR No : CVEL.0000136848 | Reported : 28/Sep/2024 03:35PM |
| Visit ID : CVELOPV214006 | Status : Final Report |
| Ref Doctor : Self | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 112335 | |

DEPARTMENT OF IMMUNOLOGY

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

| Test Name | Result | Unit | Bio. Ref. Interval | Method |
|--|--------|--------|--------------------|--------|
| THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM | | | | |
| TRI-iodothyronine (T3, TOTAL) | 1.03 | ng/mL | 0.7-2.04 | CLIA |
| THYROXINE (T4, TOTAL) | 10.43 | µg/dL | 5.48-14.28 | CLIA |
| THYROID STIMULATING HORMONE (TSH) | 1.710 | 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 |



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



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APOLLO CLINICS NETWORK

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| | |
|--------------------------------|--|
| Patient Name : Mrs.PURANI DASS | Collected : 28/Sep/2024 10:39AM |
| Age/Gender : 33 Y 11 M 4 D/F | Received : 28/Sep/2024 01:53PM |
| UHID/MR No : CVEL.0000136848 | Reported : 28/Sep/2024 03:35PM |
| Visit ID : CVELOPV214006 | Status : Final Report |
| Ref Doctor : Self | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 112335 | |

DEPARTMENT OF IMMUNOLOGY

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

| | | | | |
|------|------|------|------|--|
| High | High | High | High | Pituitary Adenoma; TSHoma/Thyrotropinoma |
|------|------|------|------|--|



DR. R. SRIVATSAN
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| | |
|--------------------------------|--|
| Patient Name : Mrs.PURANI DASS | Collected : 28/Sep/2024 10:39AM |
| Age/Gender : 33 Y 11 M 4 D/F | Received : 28/Sep/2024 02:36PM |
| UHID/MR No : CVEL.0000136848 | Reported : 28/Sep/2024 04:27PM |
| Visit ID : CVELOPV214006 | Status : Final Report |
| Ref Doctor : Self | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 112335 | |

DEPARTMENT OF CLINICAL PATHOLOGY

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

| Test Name | Result | Unit | Bio. Ref. Interval | Method |
|--|----------|------|-----------------------|----------------------------|
| COMPLETE URINE EXAMINATION (CUE) , URINE | | | | |
| PHYSICAL EXAMINATION | | | | |
| COLOUR | YELLOW | | PALE YELLOW | Scattering of light |
| TRANSPARENCY | CLEAR | | CLEAR | Scattering of light |
| pH | 5.5 | | 5-7.5 | Bromothymol Blue |
| SP. GRAVITY | 1.022 | | 1.002-1.030 | Bromothymol Blue |
| BIOCHEMICAL EXAMINATION | | | | |
| URINE PROTEIN | NEGATIVE | | NEGATIVE | PROTEIN ERROR OF INDICATOR |
| GLUCOSE | NORMAL | | NEGATIVE | GOD-POD |
| URINE BILIRUBIN | NEGATIVE | | NEGATIVE | Diazonium Salt |
| URINE KETONES (RANDOM) | NEGATIVE | | NEGATIVE | Sodium nitro prusside |
| UROBILINOGEN | NORMAL | | NORMAL (0.1-1.8mg/dl) | Diazonium salt |
| NITRITE | NEGATIVE | | NEGATIVE | Sulfanilic acid |
| LEUCOCYTE ESTERASE | NEGATIVE | | NEGATIVE | Diazonium salt |
| CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY | | | | |
| PUS CELLS | 2 | /hpf | 0-5 | Microscopy |
| EPITHELIAL CELLS | 3 | /hpf | < 10 | Microscopy |
| RBC | 2 | /hpf | 0-2 | Microscopy |
| CASTS | NEGATIVE | /lpf | 0-2 Hyaline Cast | Microscopy |
| CRYSTALS | NEGATIVE | /hpf | Occasional-Few | Microscopy |

Comment:

All urine samples are checked for adequacy and suitability before examination. All abnormal chemical examination are rechecked and verified by manual methods.

Microscopy findings are reported as an average of 10 high power fields.



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



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| Patient Name : Mrs.PURANI DASS | Collected : 28/Sep/2024 10:39AM |
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| UHID/MR No : CVEL.0000136848 | Reported : 28/Sep/2024 07:16PM |
| Visit ID : CVELOPV214006 | Status : Final Report |
| Ref Doctor : Self | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
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DEPARTMENT OF CLINICAL PATHOLOGY

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

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



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



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DEPARTMENT OF CLINICAL PATHOLOGY

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

| Test Name | Result | Unit | Bio. Ref. Interval | Method |
|------------------------|----------|------|--------------------|----------|
| URINE GLUCOSE(FASTING) | NEGATIVE | | NEGATIVE | Dipstick |

*** End Of Report ***



Dr THILAGA
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Consultant Pathologist



This test has been performed at Apollo Health and Lifestyle Ltd - RRL ASHOK NAGAR

SIN No: CVL240904250
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APOLLO CLINICS NETWORK

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| Patient Name | : Mrs.PURANI DASS | Collected | : 28/Sep/2024 10:39AM |
| Age/Gender | : 33 Y 11 M 4 D/F | Received | : 28/Sep/2024 01:52PM |
| UHID/MR No | : CVEL.0000136848 | Reported | : 28/Sep/2024 05:37PM |
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TERMS AND CONDITIONS GOVERNING THIS REPORT

The reported results are for information and interpretation of the referring doctor or such other medical professionals, who understand reporting units, reference ranges and limitations of technologies. Laboratories not be responsible for any interpretation whatsoever. It is presumed that the tests performed are, on the specimen / sample being to the patient named or identified and the verifications of the particulars have been cleared out by the patient or his / her representative at the point of generation of said specimen. The reported results are restricted to the given specimen only. Results may vary from lab to lab and from time to time for the same parameter for the same patient. Assays are performed in accordance with standard procedures, The reported results are dependent on individual assay methods / equipment used and quality of specimen received. This report is not valid for medico legal purposes.



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(CIN - U85110TG2000PLC115819)

Regd. Office: T-10-60/82, Ashoka Raghunath Chambers, 8th Floor, Begumpet, Hyderabad, Telangana - 500 010

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

Address:

Diagnostics Laboratory, Ashok Nagar East, Chennai.600 102.

Phone - 044-26224504 / 05

APOLLO CLINICS NETWORK

Telangana: Hyderabad (AS Rao Nagar | Chanda Nagar | Kondapur | Nallakunta | Nizampet | Manikonda | Uppal) | Andhra Pradesh: Vizag (Seethamma Peta) | Karnataka: Bangalore (Basavanagudi | Bellandur | Electronics City | Fraser Town | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli | Koramangala | Sarjapur Road) | Mysore (VV Mohalla) | Tamilnadu: Chennai (Annanagar | Kotturpuram | Mogappair | T Nagar | Valasaravakkam | 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)



www.apolloclinic.com

| | | | |
|--------------|-----------------------|---------------------|----------------------|
| Patient Name | : Mrs. PURANI DASS | Age | : 33Yrs 11Mths 7Days |
| UHID | : CVEL0000136848 | OP Visit No. | : CVELOPV214006 |
| Printed On | : 30-09-2024 07:17 AM | Advised/Pres Doctor | : -- |
| Department | : Radiology | Qualification | : -- |
| Referred By | : Self | Registration No. | : -- |
| Employee Id | : 112335 | | |

DEPARTMENT OF RADIOLOGY

ULTRASOUND WHOLE ABDOMEN

Liver appears enlarged in size (16.2 cms) with increased echogenicity. No focal lesion is seen.

No dilatation of the intrahepatic biliary radicals.

Gall bladder is partially distended. **Multiple calculi are seen, largest measuring 9 mm.**

PV and CBD - 3 mm normal.

Spleen appears normal (10.0 cm). No focal lesion seen. Splenic vein appears normal.

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

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 -9.4 x 4.2 cms. **Left kidney** - 10.7 x 4.3 cms.

Urinary Bladder is well distended and appears normal. No evidence of any wall thickening or abnormality.

Uterus measures 8.8 x 5.2 x 5.4 cms. **Post LSCS elongated uterus with anterior end pulled up and abutting anterior abdominal wall -likely pelvic adhesion.**

Endometrium appears thickened and measures 15 mm.

Both ovaries are polycystic.

Right ovary -4.0 x 2.1 x 2.6 cms (16.7 cc). **Left ovary** -4.5 x 1.8 x 4.3 cms. (vol 19.0 cc)

No evidence of any adnexal pathology noted.

Minimal free fluid in POD ? PID.

IMPRESSION:

- *HEPATOMEGALY WITH GRADE I FATTY CHANGES.
- *CHOLELITHIASIS.
- *POST LSCS ELONGATED UTERUS WITH PELVIC ADHESION.
- *THICKENED ENDOMETRIUM.
- *BILATERAL POLYCYSTIC OVARIES.
- *MINIMAL FREE FLUID IN POD ? PID.

(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.

---End Of The Report---



Dr. PASUPULETI SANTOSH KUMAR
M.B.B.S., DNB (RADIODIAGNOSIS)
126310
Radiology

| | | | |
|--------------|-----------------------|---------------------|----------------------|
| Patient Name | : Mrs. PURANI DASS | Age | : 33Yrs 11Mths 5Days |
| UHID | : CVEL.0000136848 | OP Visit No. | : CVELOPV214006 |
| Printed On | : 28-09-2024 08:00 AM | Advised/Pres Doctor | : -- |
| Department | : Cardiology | Qualification | : -- |
| Referred By | : Self | Registration No. | : -- |
| Employeer Id | : 112335 | | |

DEPARTMENT OF CARDIOLOGY

DIMENSIONS:

| | |
|-----------|--------|
| Ao (ed) | 3.0 CM |
| LA (es) | 3.2 CM |
| LVID (ed) | 4.3 CM |
| LVID (es) | 2.6 CM |
| IVS (Ed) | 1.0 CM |
| LVPW (Ed) | 1.0 CM |
| EF | 68.00% |
| % FD | 38.00% |

MORPHOLOGICAL DATA :

| | |
|--------------------------|--------|
| MITRAL VALVE | NORMAL |
| AML | NORMAL |
| PML | NORMAL |
| AORTIC VALVE | NORMAL |
| TRICUSPID VALVE | NORMAL |
| PULMONARY VALVE | NORMAL |
| RIGHT VENTRICLE | NORMAL |
| INTER ATRIAL SEPTUM | INTACT |
| INTER VENTRICULAR SEPTUM | INTACT |
| PULMONARY ARTERY | NORMAL |
| AORTA | NORMAL |
| RIGHT ATRIUM | NORMAL |
| LEFT ATRIUM | NORMAL |
| LEFT VENTRICLE | NORMAL |
| PERICARDIUM | NORMAL |

DOPPLER STUDIES MITRAL INFLOW :

MV E 0.9 m/s; MV A 0.7 m/s;

PV max 0.8 m/s; PG 3.1 mmHg;

AV max 1.2 m/s; PG 5.8 mmHg;

TV max 1.4 m/s; PG 8.6 mmHg;

TV E 0.5 m/s; TV A 1.0 m/s.

IMPRESSION:

*NO REGIONAL WALL MOTION ABNORMALITY;

*NORMAL LEFT VENTRICULAR IN SIZE ;

*NORMAL LEFT VENTRICULAR SYSTOLIC & DIASTOLIC FUNCTION ;

*NO PERICARDIAL EFFUSION / PULMONARY ARTERY HYPERTENSION.

---End Of The Report---



Dr. SHANMUGA SUNDARAM D
MB, BS, MD (GM) , DNB (CARDIOLOGY)
57682
Cardiology

| | | | |
|--------------|-----------------------|---------------------|----------------------|
| Patient Name | : Mrs. PURANI DASS | Age | : 33Yrs 11Mths 5Days |
| UHID | : CVEL.0000136848 | OP Visit No. | : CVELOPV214006 |
| Printed On | : 28-09-2024 12:32 PM | Advised/Pres Doctor | : -- |
| Department | : Radiology | Qualification | : -- |
| Referred By | : Self | Registration No. | : -- |
| Employeer Id | : 112335 | | |

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA VIEW

Lung fields are clear.

Cardio thoracic ratio is normal.

Apices, costo and cardio phrenic angles are free.

Cardio vascular shadow and hila show no abnormal feature.

Bony thorax shows no significant abnormality.

Domes of diaphragm are well delineated.

IMPRESSION:

***NO SIGNIFICANT ABNORMALITY DETECTED.**

---End Of The Report---



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

126310

Radiology

LETTER OF APPROVAL / RECOMMENDATION

To,

The Coordinator,
Mediwheel (Arcofemi Healthcare Limited)

Dear Sir / Madam,

Sub: Annual Health Checkup for the employees of Bank of Baroda

This is to inform you that the following employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

| PARTICULARS | EMPLOYEE DETAILS |
|---------------------------------|---------------------|
| NAME | MRS. DASS PURANI |
| EC NO. | 112335 |
| DESIGNATION | CREDIT |
| PLACE OF WORK | CHENNAI, ADAMBAKKAM |
| BIRTHDATE | 24-10-1990 |
| PROPOSED DATE OF HEALTH CHECKUP | 08-07-2023 |
| BOOKING REFERENCE NO. | 23S112335100062752E |

This letter of approval / recommendation is valid if submitted along with copy of the Bank of Baroda employee id card. This approval is valid from **26-06-2023** till **31-03-2024**. The list of medical tests to be conducted is provided in the annexure to this letter. Please note that the said health checkup is a **cashless facility** as per our tie up arrangement. We request you to attend to the health checkup requirement of our employee and accord your top priority and best resources in this regard. The EC Number and the booking reference number as given in the above table shall be mentioned in the invoice, invariably.

We solicit your co-operation in this regard.

Yours faithfully,

Sd/-

Chief General Manager
HRM & Marketing Department
Bank of Baroda

(Note: This is a computer generated letter. No Signature required. For any clarification, please contact Mediwheel (Arcofemi Healthcare Limited))



List of tests & consultations to be covered as part of Annual Health Check-up

| S.No. | For Male | For Female |
|-------|-------------------------------------|---|
| 1 | CBC | CBC |
| 2 | ESR | ESR |
| 3 | Blood Group & RH Factor | Blood Group & RH Factor |
| 4 | Blood and Urine Sugar Fasting | Blood and Urine Sugar Fasting |
| 5 | Blood and Urine Sugar PP | Blood and Urine Sugar PP |
| 6 | Stool Routine | Stool Routine |
| | Lipid Profile | Lipid Profile |
| 7 | Total Cholesterol | Total Cholesterol |
| 8 | HDL | HDL |
| 9 | LDL | LDL |
| 10 | VLDL | VLDL |
| 11 | Triglycerides | Triglycerides |
| 12 | HDL/ LDL ratio | HDL/ LDL ratio |
| | Liver Profile | Liver Profile |
| 13 | AST | AST |
| 14 | ALT | ALT |
| 15 | GGT | GGT |
| 16 | Bilirubin (total, direct, indirect) | Bilirubin (total, direct, indirect) |
| 17 | ALP | ALP |
| 18 | Proteins (T, Albumin, Globulin) | Proteins (T, Albumin, Globulin) |
| | Kidney Profile | Kidney Profile |
| 19 | Serum Creatinine | Serum Creatinine |
| 20 | Blood Urea Nitrogen | Blood Urea Nitrogen |
| 21 | Uric Acid | Uric Acid |
| 22 | HBA1C | HBA1C |
| 23 | Routine Urine Analysis | Routine Urine Analysis |
| 24 | USG Whole Abdomen | USG Whole Abdomen |
| | General Tests | General Tests |
| 25 | X Ray Chest | X Ray Chest |
| 26 | ECG | ECG |
| 27 | 2D/3D ECHO / TMT | 2D/3D ECHO / TMT |
| 28 | Stress Test | Gynaec Consultation |
| 29 | PSA Male (above 40 years) | Pap Smear (above 30 years) & Mammography (above 40 years) |
| 30 | Thyroid Profile (T3, T4, TSH) | Thyroid Profile (T3, T4, TSH) |
| 31 | Dental Check-up Consultation | Dental Check-up Consultation |
| 32 | Physician Consultation | Physician Consultation |
| 33 | Eye Check-up Consultation | Eye Check-up Consultation |
| 34 | Skin/ENT Consultation | Skin/ENT Consultation |



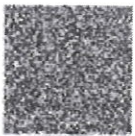
भारत सरकार
Government of India

भारत सरकार, आंध्र प्रदेश शासन
Unique Identification Authority of India

సంఖ్య: 0629/43711/17171

To
Puzari Das
C/O: Das
no 13/14
branahiyar street
gokulapuram chengalpet
Chengalpet
Chengalpet, Tamil Nadu - 603001
994026272

సంఖ్య: 0629/43711/17171



உங்கள் ஆதார் எண் / Your Aadhaar No. :

6658 4125 8566
VID : 9113 5324 8669 8160



भारत सरकार
Government of India



సంఖ్య: 0629/43711/17171
Puzari Das
C/O: Das, DOB: 24/10/1990
Gujari FDMLE

6658 4125 8566
VID : 9113 5324 8669 8160

సంఖ్య: 0629/43711/17171



భారత

- ఇది ఆధార్‌ను నిరూపించే ప్రమాణపత్రం మాత్రమే.
- ఆధార్‌ను నిరూపించే ప్రమాణపత్రం మాత్రమే ఆధార్‌ను నిరూపించే ప్రమాణపత్రం మాత్రమే.
- ఇది ఆధార్‌ను నిరూపించే ప్రమాణపత్రం మాత్రమే.

INFORMATION

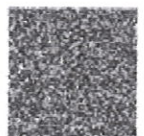
- Aadhaar is a proof of identity, not of citizenship.
- Verify identity using Secure QR Code/ Offline XML/ Online Authentication.
- This is electronically generated letter.

- ఇది ఆధార్‌ను నిరూపించే ప్రమాణపత్రం మాత్రమే.
- ఆధార్‌ను నిరూపించే ప్రమాణపత్రం మాత్రమే ఆధార్‌ను నిరూపించే ప్రమాణపత్రం మాత్రమే.
- ఇది ఆధార్‌ను నిరూపించే ప్రమాణపత్రం మాత్రమే.
- ఆధార్‌ను నిరూపించే ప్రమాణపత్రం మాత్రమే ఆధార్‌ను నిరూపించే ప్రమాణపత్రం మాత్రమే.
- Aadhaar is valid throughout the country.
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Unique Identification Authority of India

సంఖ్య: 0629/43711/17171
Puzari Das, no 13/14, branahiyar street,
gokulapuram chengalpet, Chengalpet,
Tamil Nadu - 603001

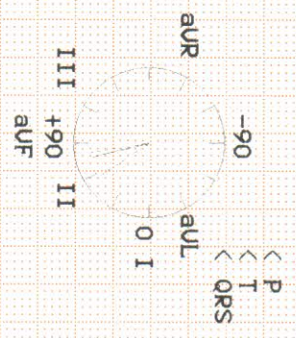


6658 4125 8566
VID : 9113 5324 8669 8160

సంఖ్య: 0629/43711/17171

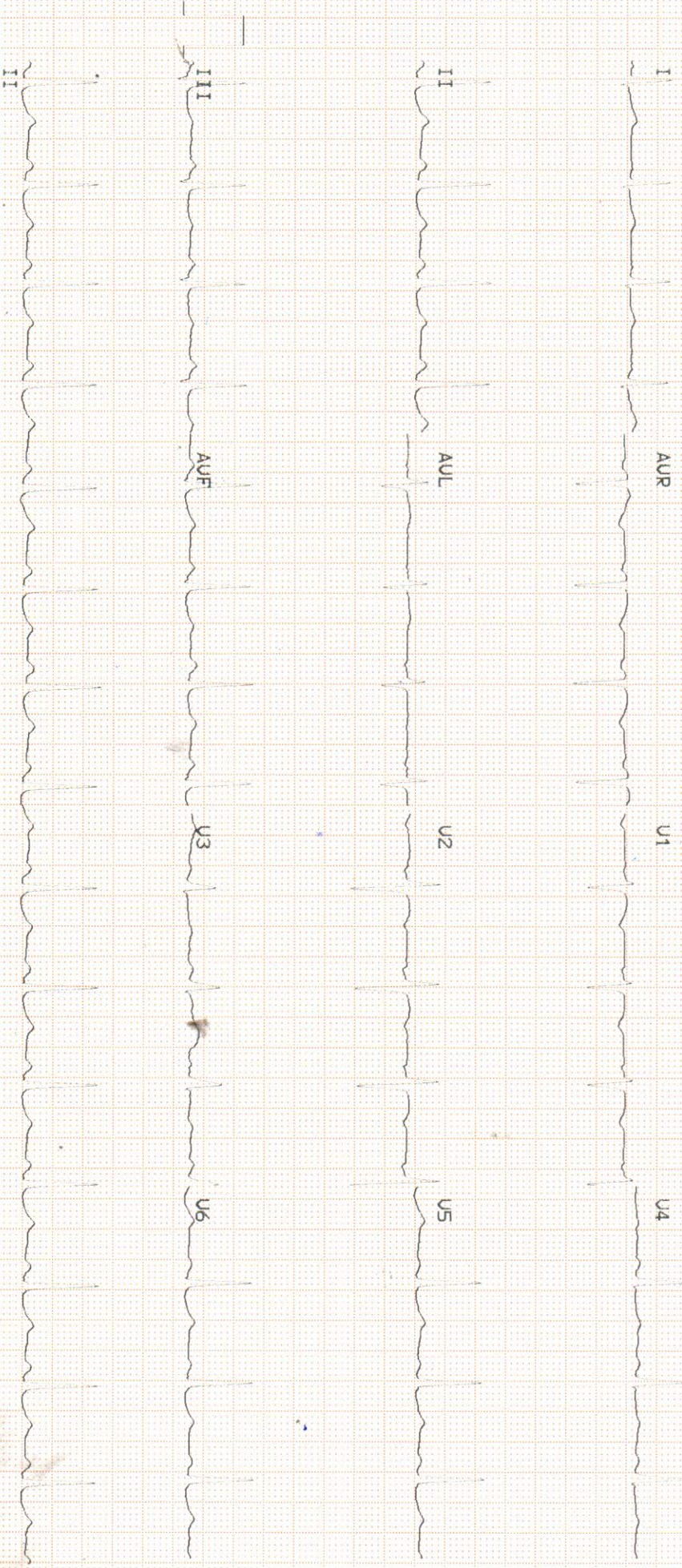
Measurement Results:

QRS : 92 ms
 QT/QTcB : 382 / 469 ms
 PR : 122 ms
 p : 96 ms
 RR/PP : 664 / 660 ms
 P/ORS/T : 80 / 75 / 55 degrees
 QTd/QTcBD : 46 / 56 ms
 Sokolow : 1.7 mV
 NK : 12



Interpretation:

Unconfirmed report.



Apollo Clinic

CONSENT FORM

Patient Name: Ms. Purani Das. Age: 33.

UHID Number: 136848. Company Name: Arcofermi

I Mr/Mrs/Ms Purani Das. Employee of Arcofermi

(Company) Want to inform you that I am not interested in getting PAP SMEAR

Tests done which is a part of my routine health check package.

And I claim the above statement in my full consciousness.

Patient Signature: _____

Date: 28/9/2024



| | |
|---|---------------------------|
| Name <i>Mrs. Purani Dass.</i> | Date <i>28 - 09 - 24.</i> |
| Age <i>33.</i> | UHID No. <i>136848.</i> |
| Sex: <input type="checkbox"/> Male <input checked="" type="checkbox"/> Female | |

OPHTHAL FITNESS CERTIFICATE

| | RE | LE |
|--------------------|---------------|---------------|
| DV-UCVA : | <i>6/6</i> | <i>6/6</i> |
| DV-BCVA : | | |
| NEAR VISION : | <i>N6</i> | <i>N6</i> |
| ANTERIOR SEGMENT : | <i>Normal</i> | <i>Normal</i> |
| IOP : | | |
| FIELDS OF VISION : | | |
| E O M : | <i>Full</i> | <i>Full</i> |
| COLOUR VISION : | <i>Normal</i> | <i>Normal</i> |
| FUNDUS : | | |
| IMPRESSION : | | |
| ADVICE : | | |

CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

of Mrs. Purani Dass. on 28/9/2024.

After reviewing the medical history and on clinical examination it has been found that he/she is

| | Tick |
|--|------|
| <ul style="list-style-type: none"> • <u>Medically Fit</u> <u>FIT FOR WORK</u> | ✓ |
| <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 <u>NIL</u> recommended • Unfit <u>NIL.</u> | |

Dr. M. S. K.
Medical Officer



This certificate is not meant for medico-legal purposes

DR. M S KOUTILYA CHOUDARY
MBBS., MD.,
Sqn Ldr (Retd),
Reg. No. TNMC 167543