

Patient Name : Mrs.DEVISREE V S	Collected : 27/Sep/2024 09:10AM
Age/Gender : 39 Y 7 M 26 D/F	Received : 27/Sep/2024 12:16PM
UHID/MR No : CBAS.0000094355	Reported : 27/Sep/2024 02:14PM
Visit ID : CBASOPV106595	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 35E7630	

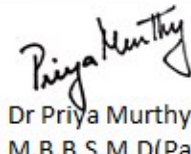
DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>HEMOGRAM , WHOLE BLOOD EDTA</b>				
HAEMOGLOBIN	14.5	g/dL	12-15	Spectrophotometer
PCV	42.60	%	36-46	Electronic pulse & Calculation
RBC COUNT	<b>4.82</b>	Million/cu.mm	3.8-4.8	Electrical Impedence
MCV	88.4	fL	83-101	Calculated
MCH	30	pg	27-32	Calculated
MCHC	33.9	g/dL	31.5-34.5	Calculated
R.D.W	12.7	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	6,270	cells/cu.mm	4000-10000	Electrical Impedence
<b>DIFFERENTIAL LEUCOCYTIC COUNT (DLC)</b>				
NEUTROPHILS	57.1	%	40-80	Electrical Impedence
LYMPHOCYTES	34.5	%	20-40	Electrical Impedence
EOSINOPHILS	1.4	%	1-6	Electrical Impedence
MONOCYTES	6.6	%	2-10	Electrical Impedence
BASOPHILS	0.4	%	<1-2	Electrical Impedence
<b>ABSOLUTE LEUCOCYTE COUNT</b>				
NEUTROPHILS	3580.17	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2163.15	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	87.78	Cells/cu.mm	20-500	Calculated
MONOCYTES	413.82	Cells/cu.mm	200-1000	Calculated
BASOPHILS	25.08	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	1.66		0.78- 3.53	Calculated
PLATELET COUNT	306000	cells/cu.mm	150000-410000	Electrical impedence
ERYTHROCYTE SEDIMENTATION RATE (ESR)	10	mm at the end of 1 hour	0-20	Modified Westegren method
<b>PERIPHERAL SMEAR</b>				



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DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA</b>				
BLOOD GROUP TYPE	O			Microplate Hemagglutination
Rh TYPE	Positive			Microplate Hemagglutination



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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, FASTING , NAF PLASMA	87	mg/dL	70-100	HEXOKINASE


Comment:

As per American Diabetes Guidelines, 2023

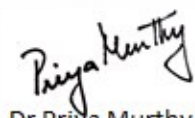
Fasting Glucose Values in mg/dL	Interpretation
70-100 mg/dL	Normal
100-125 mg/dL	Prediabetes
≥126 mg/dL	Diabetes
<70 mg/dL	Hypoglycemia

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.



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THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFESTYLE LIMITED- RRL BANGALORE  
SIN No: BAS240901844

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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA</b>				
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 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

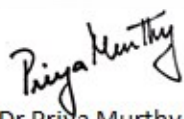
A: HbF >25%

B: Homozygous Hemoglobinopathy.

(Hb Electrophoresis is recommended method for detection of Hemoglobinopathy)



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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>LIPID PROFILE , SERUM</b>				
TOTAL CHOLESTEROL	224	mg/dL	<200	CHO-POD
TRIGLYCERIDES	59	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	61	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	163	mg/dL	<130	Calculated
LDL CHOLESTEROL	151.5	mg/dL	<100	Calculated
VLDL CHOLESTEROL	11.8	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.68		0-4.97	Calculated
ATHEROGENIC INDEX (AIP)	< 0.01		<0.11	Calculated


**Comment:**

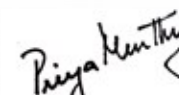
Reference Interval as per National Cholesterol Education Program (NCEP) Adult Treatment Panel III Report.

	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.

  
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THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFESTYLE LIMITED- RRL BANGALORE  
SIN No: BAS240901841

**Apollo Health and Lifestyle Limited**

(CIN - U061107C2000PH6115839)  
This test has been performed at Apollo Health & Lifestyle Ltd, RRL BANGALORE Laboratory,  
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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>LIVER FUNCTION TEST (LFT) , SERUM</b>				
BILIRUBIN, TOTAL	0.56	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.11	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.45	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	14	U/L	<35	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	18.0	U/L	<35	IFCC
AST (SGOT) / ALT (SGPT) RATIO (DE RITIS)	1.3		<1.15	Calculated
ALKALINE PHOSPHATASE	65.00	U/L	30-120	IFCC
PROTEIN, TOTAL	6.91	g/dL	6.6-8.3	Biuret
ALBUMIN	4.20	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.71	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. 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:

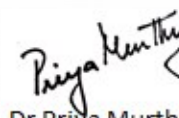
\*ALP – Disproportionate increase in ALP compared with AST, ALT. ALP elevation also seen in pregnancy, impacted by age and sex. \*Bilirubin elevated- predominantly direct , To establish the hepatic origin correlation with elevated GGT helps.

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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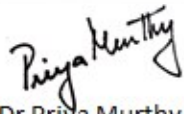
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**DEPARTMENT OF BIOCHEMISTRY**

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



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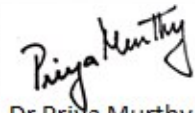
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DEPARTMENT OF BIOCHEMISTRY

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Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM</b>				
CREATININE	0.64	mg/dL	0.66 - 1.09	Modified Jaffe, Kinetic
UREA	20.50	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	9.6	mg/dL	8.0 - 23.0	Calculated
URIC ACID	4.75	mg/dL	2.6-6.0	Uricase PAP
CALCIUM	9.10	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	3.34	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	138	mmol/L	136-146	ISE (Indirect)
POTASSIUM	4.4	mmol/L	3.5-5.1	ISE (Indirect)
CHLORIDE	105	mmol/L	101-109	ISE (Indirect)
PROTEIN, TOTAL	6.91	g/dL	6.6-8.3	Biuret
ALBUMIN	4.20	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.71	g/dL	2.0-3.5	Calculated
A/G RATIO	1.55		0.9-2.0	Calculated

  
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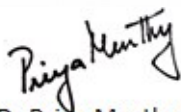
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**DEPARTMENT OF BIOCHEMISTRY**

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM</b>	15.00	U/L	<38	IFCC



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DEPARTMENT OF IMMUNOLOGY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM</b>				
TRI-iodothyronine (T3, TOTAL)	0.75	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	9.28	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	3.030	µIU/mL	0.34-5.60	CLIA

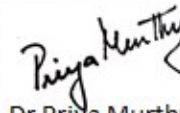
Comment:

<b>For pregnant females</b>	<b>Bio Ref Range for TSH in uIU/ml (As per American Thyroid Association)</b>
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. Govinda Raju N L**  
 MSc, PhD (Biochemistry)  
 Consultant Biochemistry

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



THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFESTYLE LIMITED- RRL BANGALORE  
 SIN No: BAS240901843

**Apollo Health and Lifestyle Limited** (CIN: U081107C2800PH6115849)  
 This test has been performed at Apollo Health & Lifestyle Ltd, RRL BANGALORE 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:  
 Apollo Health and Lifestyle Limited, Apollo Health and Lifestyle Ltd, RRL BANGALORE Laboratory, Neeladri Main Road,  
 Neeladri Nagar, Electronic city, Bengaluru,  
 Karnataka - 560034

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

**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.DEVISREE V S	Collected : 27/Sep/2024 09:10AM
Age/Gender : 39 Y 7 M 26 D/F	Received : 27/Sep/2024 12:39PM
UHID/MR No : CBAS.0000094355	Reported : 27/Sep/2024 01:42PM
Visit ID : CBASOPV106595	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 35E7630	

**DEPARTMENT OF IMMUNOLOGY**

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

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

*Govinda Raju*  
**Dr.Govinda Raju N L**  
 MSc,PhD(Biochemistry)  
 Consultant Biochemistry

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



THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFESTYLE LIMITED- RRL BANGALORE  
 SIN No: BAS240901843

**Apollo Health and Lifestyle Limited**

(CIN - U061107C2800PHG115819)  
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 32/100/125, Doddabangla Village, Neeladri Main Road,  
 Neeladri Nagar, Electronic city, Bengaluru,  
 Karnataka - 560034

 **1860 500 7788**  
[www.apolloclinic.com](http://www.apolloclinic.com)

Patient Name : Mrs.DEVISREE V S	Collected : 27/Sep/2024 09:10AM
Age/Gender : 39 Y 7 M 26 D/F	Received : 27/Sep/2024 01:07PM
UHID/MR No : CBAS.0000094355	Reported : 27/Sep/2024 02:12PM
Visit ID : CBASOPV106595	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 35E7630	

DEPARTMENT OF CLINICAL PATHOLOGY


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

Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>COMPLETE URINE EXAMINATION (CUE) , URINE</b>				
<b>PHYSICAL EXAMINATION</b>				
COLOUR	PALE YELLOW		PALE YELLOW	Scattering of light
TRANSPARENCY	Clear		CLEAR	Scattering of light
pH	5.0		5-7.5	Bromothymol Blue
SP. GRAVITY	1.010		1.002-1.030	Bromothymol Blue
<b>BIOCHEMICAL EXAMINATION</b>				
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
<b>CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY</b>				
PUS CELLS	0	/hpf	0-5	Automated Image based microscopy
EPITHELIAL CELLS	0	/hpf	< 10	Microscopy
RBC	0	/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. Harshitha Y  
M.B.B.S, M.D (Pathology)  
Consultant Pathologist



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



Patient Name : Mrs.DEVISREE V S	Collected : 27/Sep/2024 01:17PM
Age/Gender : 39 Y 7 M 26 D/F	Received : 28/Sep/2024 11:11AM
UHID/MR No : CBAS.0000094355	Reported : 28/Sep/2024 04:36PM
Visit ID : CBASOPV106595	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 35E7630	

**DEPARTMENT OF CYTOLOGY**

**LBC PAP SMEAR , CERVICAL BRUSH SAMPLE**

	<b>CYTOLOGY NO.</b>	21388/24
<b>I</b>	<b>SPECIMEN</b>	
<b>a</b>	SPECIMEN ADEQUACY	ADEQUATE
<b>b</b>	<b>SPECIMEN TYPE</b>	LIQUID-BASED PREPARATION (LBC)
	SPECIMEN NATURE/SOURCE	CERVICAL SMEAR
<b>c</b>	ENDOCERVICAL-TRANSFORMATION ZONE	ABSENT
<b>d</b>	COMMENTS	SATISFACTORY FOR EVALUATION
<b>II</b>	<b>MICROSCOPY</b>	Superficial and intermediate squamous epithelial cells with benign morphology.  Inflammatory cells, predominantly neutrophils.  Negative for intraepithelial lesion/malignancy.
<b>III</b>	<b>RESULT</b>	
<b>a</b>	<b>EPITHELIAL CELL</b>	
	SQUAMOUS CELL ABNORMALITIES	NOT SEEN
	GLANDULAR CELL ABNORMALITIES	NOT SEEN
<b>b</b>	<b>ORGANISM</b>	FUNGAL ORGANISMS MORPHOLOGICALLY CONSISTENT WITH CANDIDA SPP
<b>IV</b>	<b>INTERPRETATION</b>	NEGATIVE FOR INTRAEPITHELIAL LESION OR MALIGNANCY WITH CANDIDIASIS

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 N: BAS249001878  
THIS TEST WAS PERFORMED AT APOLLO HEALTH AND LIFESTYLE LIMITED- RRL BANGALORE

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

Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)

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323/100/123, Doddathangur Village, Neeladri Main Road,  
Neeladri Nagar, Electronic city, Bengaluru,  
Karnataka - 560034

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



Patient Name : Mrs.DEVISREE V S  
Age/Gender : 39 Y 7 M 26 D/F  
UHID/MR No : CBAS.0000094355  
Visit ID : CBASOPV106595  
Ref Doctor : Self  
Emp/Auth/TPA ID : 35E7630

Collected : 27/Sep/2024 01:17PM  
Received : 28/Sep/2024 11:11AM  
Reported : 28/Sep/2024 04:36PM  
Status : Final Report  
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

### 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.



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



SIN No: BAS24001878 AT APOLLO HEALTH AND LIFESTYLE LIMITED- RRL BANGALORE

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

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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

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Patient Name	: Mrs. DEVISREE V S	Age	: 39Yrs 7Mths 27Days
UHID	: CBAS.0000094355	OP Visit No.	: CBASOPVI06595
Printed On	: 27-09-2024 07:30 AM	Advised/Pres Doctor	: --
Department	: Cardiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employer Id	: 35E7630		

## DEPARTMENT OF CARDIOLOGY

### ECG

#### Observation :-

1. Normal Sinus Rhythm.
2. Heart rate is Normal
3. No pathological Q wave or ST-T changes seen.
4. Normal P,QRS,T waves and axis.
5. No evidence of chamber, hypertrophy or enlargement seen.

#### Impression:-

NORMAL RESTING ECG.

**NOTE:-KINDLY TAKE A PHOTOCOPY OF THE GRAPH FOR FUTURE REFERENCE IF NEEDED**

---End Of The Report---



Dr. Vishal Kumar H  
MBBS, DIP. Cardiology  
KMC 121069  
Cardiology

---

Patient Name	: Mrs. DEVISREE V S	Age	: 39Yrs 7Mths 27Days
UHID	: CBAS.0000094355	OP Visit No.	: CBASOPVI06595
Printed On	: 27-09-2024 06:41 AM	Advised/Pres Doctor	: --
Department	: Radiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employee Id	: 35E7630		

---

## DEPARTMENT OF RADIOLOGY

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### ULTRASOUND-WHOLE ABDOMEN

**Liver:** appears normal in size (13.0 cm) and increased in echotexture. No focal lesion is seen. Portal vein and Common Bile Duct appear normal. No dilatation of the intrahepatic biliary radicals.

**Gall bladder** is well distended. No evidence of calculus. Wall thickness appears normal. No evidence of periGB collection. No evidence of focal lesion is seen.

**Spleen** appears normal. No focal lesion seen. Splenic vein appears normal.

**Pancreas** appears normal in echo-pattern. No focal/mass lesion/calcification. No evidence of peripancreatic free fluid or collection. Pancreatic duct appears normal.

**Right kidney** appear normal in size 8.5x1.4 cm, shape and echopattern. Cortical thickness and Cortico-medullary differentiation are maintained.

**Left kidney** appear normal in size 8.7x1.3 cm, shape and echopattern. Cortical thickness and Cortico-medullary differentiation are maintained.

**Urinary Bladder** 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** appears normal in size with anteverted position and measuring 4.9x3.6x3.9 cm. It shows normal shape & echopattern. Endometrial echo-complex appears normal and measures 0.7 cm.

**Both ovaries** appear normal in size, shape and echotexture.

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Right ovary measuring 3.0x1.8 cm and left ovary measuring 2.9x2.5 cm.  
No evidence of any adnexal pathology noted.

- No thickened or tender bowel loops. No mass lesion. No ascites / pleural effusion.


**IMPRESSION:-**

**GRADE I FATTY LIVER.**

**Suggested clinical correlation.**

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. V K PRANAV VENKATESH  
MBBS,MD  
103609  
Radiology

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Patient	Mrs. DEVISREE V S	Appt ID	CBASAPT719
Age/Gender	39Y   Female	Consult Date	27 Sep 2024
UHID	CBAS.0000094355	Order Bill ID	CBAS-OCR-64396
		Visit Display ID	CBASOPV106595

---

## VITALS

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Weight : 59Kgs	Height : 147Cms
Pulse : 81 BPM	Spo2 : 99%
BP : 100 / 61 MmHg	Respiratory Rate : 19 BPM
Temperature : 96 °F	

<b>Name</b> : Mrs. DEVISREE V S <b>Address</b> : Chikkalasandra Bangalore Karnataka INDIA 560061 <b>Plan</b> : ARCOFEMI MEDIWHEEL FEMALE AHC CREDIT PAN INDIA OP AGREEMENT	<b>Age</b> : 39Y 7M 26D <b>sex</b> : Female	<b>UHID</b> : CBAS.0000094355  CBAS.0000094355 <b>OP No</b> : CBASOPV106595 <b>Bill No</b> : CBAS-OCR-64396 <b>Date</b> : Sep 27th, 2024, 9:00 AM
---	--	---

Sno.	Service Type/Service Name	Department	
1	ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324		
1	GYNACOLOGY CONSULTATION → 8 ✓	Consultation	<input type="checkbox"/>
2	GAMMA GLUTAMYL TRANSFERASE (GGT)	Biochemistry	<input type="checkbox"/>
3	LBC PAP TEST- PAPSURE → 8 ✓	Histopathology	<input type="checkbox"/>
4	COMPLETE URINE EXAMINATION	Clinical Pathology	<input type="checkbox"/>
5	HEMOGRAM + PERIPHERAL SMEAR	Haematology	<input type="checkbox"/>
6	PERIPHERAL SMEAR	Haematology	<input type="checkbox"/>
7	DIET CONSULTATION	General	<input type="checkbox"/>
8	BODY MASS INDEX (BMI)	General	<input type="checkbox"/>
9	ECG	Cardiology	<input type="checkbox"/>
10	HbA1c, GLYCATED HEMOGLOBIN	Biochemistry	<input type="checkbox"/>
11	LIPID PROFILE	Biochemistry	<input type="checkbox"/>
12	ULTRASOUND - WHOLE ABDOMEN → 5	Ultrasound Radiology	<input type="checkbox"/>
13	ENT CONSULTATION	Consultation	<input type="checkbox"/>
14	BLOOD GROUP ABO AND RH FACTOR	Blood Bank	<input type="checkbox"/>
15	DENTAL CONSULTATION → 10	Consultation	<input type="checkbox"/>
16	GLUCOSE, FASTING	Biochemistry	<input type="checkbox"/>
17	RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)	Biochemistry	<input type="checkbox"/>
18	FITNESS BY GENERAL PHYSICIAN	Consultation	<input type="checkbox"/>
19	LIVER FUNCTION TEST (LFT)	Biochemistry	<input type="checkbox"/>
20	OPHTHAL BY GENERAL PHYSICIAN → 3	Consultation	<input type="checkbox"/>
21	THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)	Biochemistry	<input type="checkbox"/>

→ Physio (6)  
 → Dental (10)

Ht- 147  
 Wt- 59.4  
 BP- 100/61  
 PR- 81

यूनियन बैंक  
of India



Union Bank  
of India



नाम : देविश्री .वि.एस

Name : DEVISREE V.S

कर्मचारी क्र / Employee No. : 653697

जन्मतिथि / Date of Birth : 18-05-1985


रक्त गुण / Blood Group: O+ve

  
हस्ताक्षर / Signature

जारी करने का स्थान : क्षेत्रीय कार्यालय, बंगलुरु दक्षिण  
Place of Issue : RO Bengaluru

जारी करने की तारीख

Date of Issue : 20-09-2021

  
अधिकारी / Issuing Authority



Report ID: AHLLP\_01P3FGAT6Z10S6A\_V6Z10S6U

Authorized by  
*Yogesh*

Dr. Yogesh Kothari  
MD, DNB, FESC, FEP  
Reg No- KMC 44065

**Interpretation**

Normal sinus rhythm  
Normal axis  
Nonspecific T wave changes noted

**Measurements**

HR: 83 BPM  
PR: 142 ms  
PD: 110 ms  
QRSD: 80 ms  
QRS Axis: 53 deg  
QT/QTc: 350/412 ms

**Vitals**

**Pre-Existing Medical- Conditions**

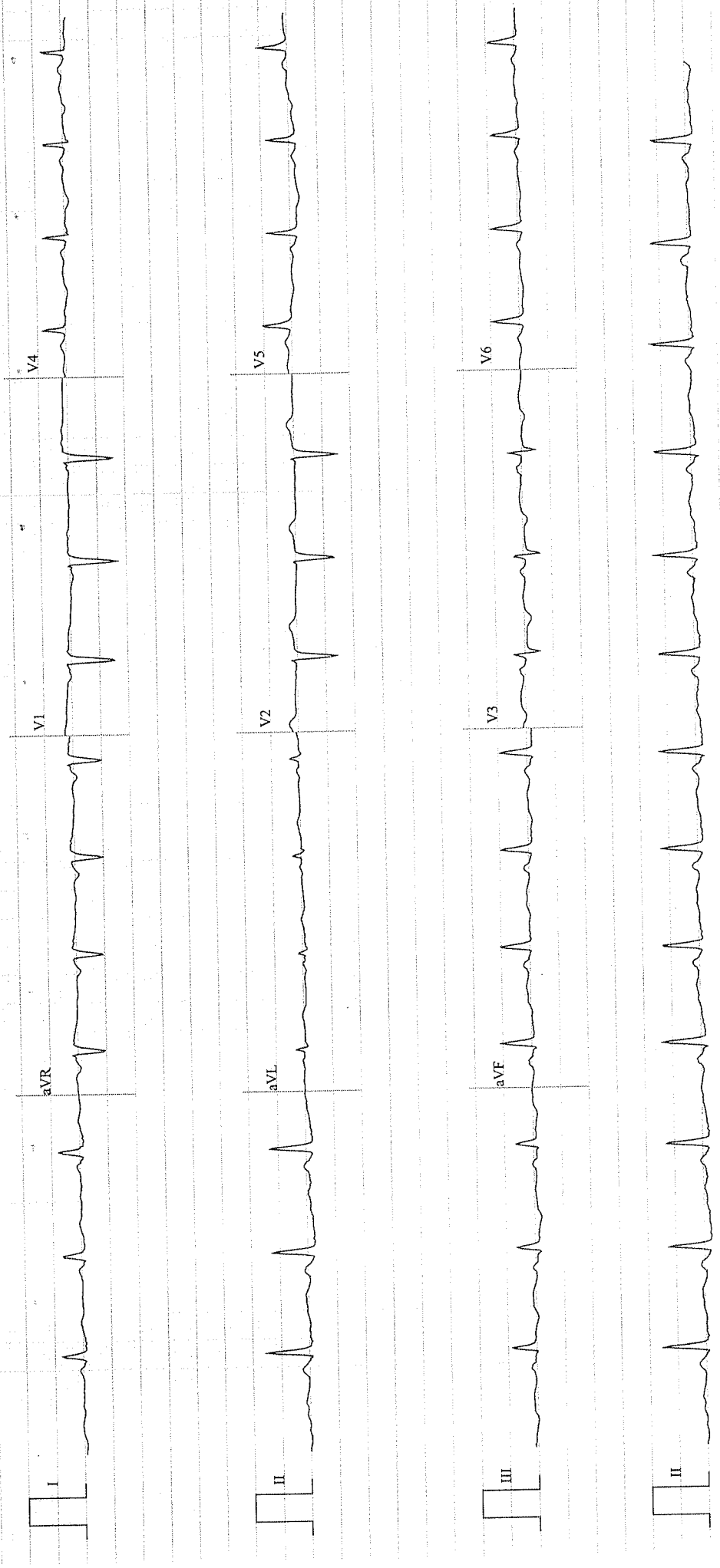
**Symptoms**

Date: IST: 2024-09-27 10:08:55

**Personal Details**

UHID: 01P3FGAT6Z10S6A  
PatientID: 94355  
Name: DEVISREE  
Age: 39  
Gender: Female  
Mobile: 79979794494

This trace is generated by **KardiaScreen: Cloud-Connected, Portable, Digital, 6-12 Lead Scalable ECG Platform from IMEDRIX**

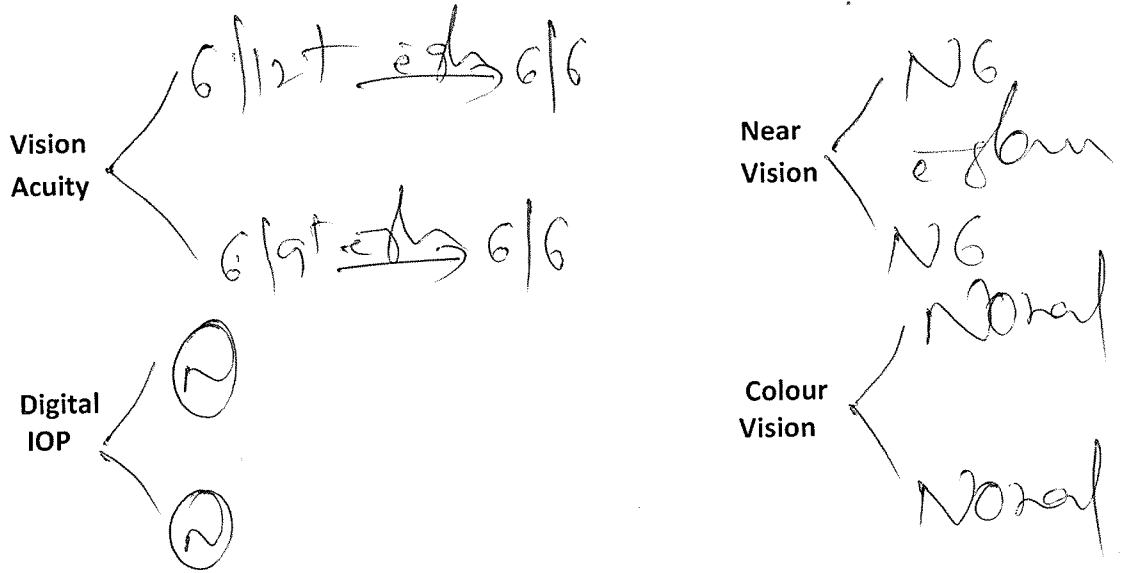


Speed: 25 mm/sec F: 0.05 - 40 Hz Limb: 10 mm/mV Chest: 10 mm/mV

1. Analysis in this report is based on ECG alone and should be used as an adjunct to clinical history. Symptoms and lists of other non-invasive tests and must be interpreted by a qualified physician.  
2. Normal ECG does not rule out heart disease Abnormal ECG does not always mean severe heart disease. Comments & report is based on available data, clinical correlation is important.

Mrs. Dewi Free vs. 39/R 94355 27/9/24

EYE CHECK UP REPORT



• Fundus: Normal @ study

• Ant. Segment :- WNL

• Media: Normal

• Pupil: Normal

BU Myopic Astigmatism, fully corrected by glass.

CLS

27/09/24



Deviseee. V.S

39yrs / F

c/c: Regular visit

O/E cat+ stains<sup>+</sup>

Rx plan: Oral Prophylaxis

Rx done: Oral Prophylaxis

Advised to get prophylaxis once in a year

Dr. M. S. R.

## Your appointment is confirmed

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

Date Tue 9/24/2024 3:58 PM

To devisree.vs@unionbankofindia.bank <devisree.vs@unionbankofindia.bank>

Cc Basavanagudi Apolloclinic <basavanagudi@apolloclinic.com>; Irfan Ali S <Irfanali.s@apolloclinic.com>; Syamsunder M <syamsunder.m@apollohl.com>



Dear DEVISREE V S,

Greetings from Apollo Clinics,

Your corporate health check appointment is confirmed at **BASAVANAGUDI clinic** on **2024-09-28 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:



# Apollo Clinic

## CONSENT FORM

Patient Name: Denisee V.S. Age: 39 Y/F

UHID Number: \_\_\_\_\_ Company Name: \_\_\_\_\_

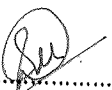
I Mr/Mrs/Ms \_\_\_\_\_ Employee of \_\_\_\_\_

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

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

And I claim the above statement in my full consciousness.

fitness by GP,  
ENT, Diet  
consultation pending

Patient Signature:  Date: 27/9/2024