


ಯುನಿಯನ್ ಬ್ಯಾಂಕ್
The Bank
Union Bank
of India



ನಾಮ : ಅನಿತಾ. ಡಿ. ಪಿ
Name : ANITHA D P
ಕಾರ್ಯವಾರಿ ಕೆ / Employee No : 6301772
ಜನ್ಮದ ತಾರೀಖು / Date of Birth : 01-07-1975
ರಕ್ತದ ಗುಂಪು / Blood Group : O+ve

ಅನಿತಾ ಡಿ ಪಿ
ಅನಿತಾ ಡಿ ಪಿ

ಅಧಿಕಾರವಹಾರಿ, ಬೆಂಗಳೂರು
ಇದನ್ನು ಹೊರತು ಪಡಿಸಲು / Place of Issue: HO Mysuru
ಇದನ್ನು ಹೊರತು ಪಡಿಸಲು
Date of Issue: 09/06/2020

ಅಧಿಕಾರವಹಾರಿ / Issuing Authority

Health checkup at tie-up Ctr

HealthChkup Authorisatn letter



Union Bank of India
RO - MYSORE
NO.2254, KAUSALYA, THIRD FLOOR,
SOUTH WING, VINOBA ROAD, , - 0

To,
The Chief Medical Officer

M/S Mediwheel
<https://mediwheel.in/signup011-41195959>(A brand name of
Arcofemi Healthcare Ltd),
Mumbai400021

Dear Sir,

Tie-up arrangement for Health Checkup under Health Checkup 40-50 Female

Shri/Smt./Kum. ANITHA D P.,

P.F. No. 630172 Designation : Asst Manager

Checkup for Financial Year 2023-2024 Approved Charges Rs. 4500.00

The above mentioned staff member of our Branch/Office desires to undergo Health Checkup at your Hospital/Centre/Clinic, under the tie-up arrangement entered into with you, by our bank.

Please send the receipt of the above payment and the relevant reports to our above address.

Thanking you,

Yours Faithfully,

(Signature of the Employee)

BRANCH MANAGER/SENIOR MANAGER



PS. : Status of the application- Sanctioned

View Worklist

Date : 24-02-2024
 MR NO : CMYS.0000059738
 Name : Mrs. ANITHA D P
 Age/ Gender : 48 Y / Female

Department : GENERAL
 Doctor :
 Registration No :
 Qualification :



Dr. GURU PRASAD B. V.
 MBBS, PGDCC (CARDIO)
 CCMH, CRIC (CCPR), PGCC, CCIBDM
 Consultant: Non Invasive Cardiology
 RMC No 60949

Consultation Timing: 07:36

Height : 160	Weight : 67	BMI :	Waist Circum :
Temp :	Pulse :	Resp :	B.P : 120/80

General Examination /
 Allergies History

Clinical Diagnosis & Management Plan

Coronary OPD
 HYPERTENSION
 DM2
 Angiogrammatic
 ST2 ⊕
 SURGE ⊕
 ECG: MIN
 DIRECTO ⊕ Studies
 Labs: Noted.
 Adv: low fat diet.

Follow up date :

Doctor Signature



Dr. GURU PRASAD B. V.
 MBBS, PGDCC (CARDIO)
 CCMH, CRIC (CCPR), PGCC, CCIBDM
 Consultant: Non Invasive Cardiology
 RMC No 60949

Apollo Clinic
 # 23, 1st Floor,
 Kalidasa Road, Mysore - 02
 Ph : 0821-4006040/41

Date : 24-02-2024
 MR NO : CMYS.0000059738
 Name : Mrs. ANITHA D P
 Age/ Gender : 48 Y / Female

Department : GENERAL
 Doctor :
 Registration No :
 Qualification :

Consultation Timing: 07:36

Height: 160	Weight: 67	BMI:	Waist Circum: 120/80
Temp:	Pulse:	Resp:	B.P:

General Examination /
 Allergies History

PH - NS.
 FH - hypertension.

Clinical Diagnosis & Management Plan

OH - 3 to 4 days / 25 days
 Imp → 10/2/24.

ML, 16 hrs. 12/2.
 Both US
 Tubed mixed

Adv: regular walk / yoga.
 - avoid junk foods.

- TAB. SHELUAL ISO 0-0-1.

✓ - TAB. FLORITA LL 0-1-0

(30)

(30) -
 x 6M.

Follow up date :

[Signature]
 Doctor Signature

Apollo Clinic
 # 23, 1st Floor,
 Kalidasa Road, Mysore - 02
 Ph : 0821-4006040/41

Date : 24-02-2024
 MR NO : CMYS.0000059738
 Name : Mrs. ANITHA D P
 Age/ Gender : 48 Y / Female

Department : GENERAL
 Doctor :
 Registration No :
 Qualification :

Consultation Timing: 07:36

Height: 160	Weight: 67	BMI:	Waist Circum:
Temp:	Pulse:	Resp:	B.P: 120/80

General Examination /
Allergies History

Clinical Diagnosis & Management Plan

Rt eye

Lf eye

Near
 vision
 corrected with glasses

Ng.

N₁₀

Distant
 vision
 corrected with glasses.

N₆

N₆

6/9

6/6.

6/6

6/6

Colour
 vision

(N)

(N)

Follow up date :

Doctor Signature
Apollo Clinic
 # 23, 1st Floor,
 Kalidasa Road, Mysore - 02
 Ph : 0821-4006040/41

Date : 24-02-2024
 MR NO : CMYS.0000059738
 Name : Mrs. ANITHA D P
 Age/ Gender : 48 Y / Female

Department : GENERAL
 Doctor :
 Registration No : M Praveen Kumar - R
 Qualification : M.D. (Genl)

Consultation Timing: 07:36

Height : 160	Weight : 67	BMI :	Waist Circum :
Temp :	Pulse :	Resp :	B.P : 120/80

General Examination /
 Allergies History

Clinical Diagnosis & Management Plan

Case for new onset
migraine

OLC Ear bilateral TM @

Nose - nasal mucosa @

oral cavity & oropharynx @

neck @

As TIAS

Follow up date :

PLH
 Doctor Signature
Apollo Clinic
 # 23, 1st Floor,
 Kalidasa Road, Mysore - 02
 Ph : 0821-4006040/41

Date : 24-02-2024
MR NO : CMYS.0000059738

Department : GENERAL Dietetics
Doctor : K. Radhika. B.P

Name : Mrs. ANITHA D P
Age/ Gender : 48 Y / Female

Registration No :
Qualification : M.Sc Nutrition & Dietetics
PhD

Consultation Timing: 07:36

IBW - 56 kg

Height : 160	Weight : 67	BMI : 26 kg/m ²	Waist Circum :
Temp :	Pulse :	Resp :	B.P : 120/80

General Examination /
Allergies History

ESR - 46
Triglycerides - 204
HDL - 35
NON HDL - 161
LDL - 119.78
VLDL - 40.86
chol/HDL - 0.54

Clinical Diagnosis & Management Plan

→ Advised low fat diet with fiber rich foods.
→ Dietitian's guidelines chart is given.

Follow up date :

Doctor Signature
K. Radhika. B.P
24/2/2024
Ph 0821-4006040/41
Kallidasa Road, Mysore - 02
23, 1st Floor,
Apollo Clinic

ID: 59738

24-02-2024 10:25:50 AM

MRS ANITHA D P

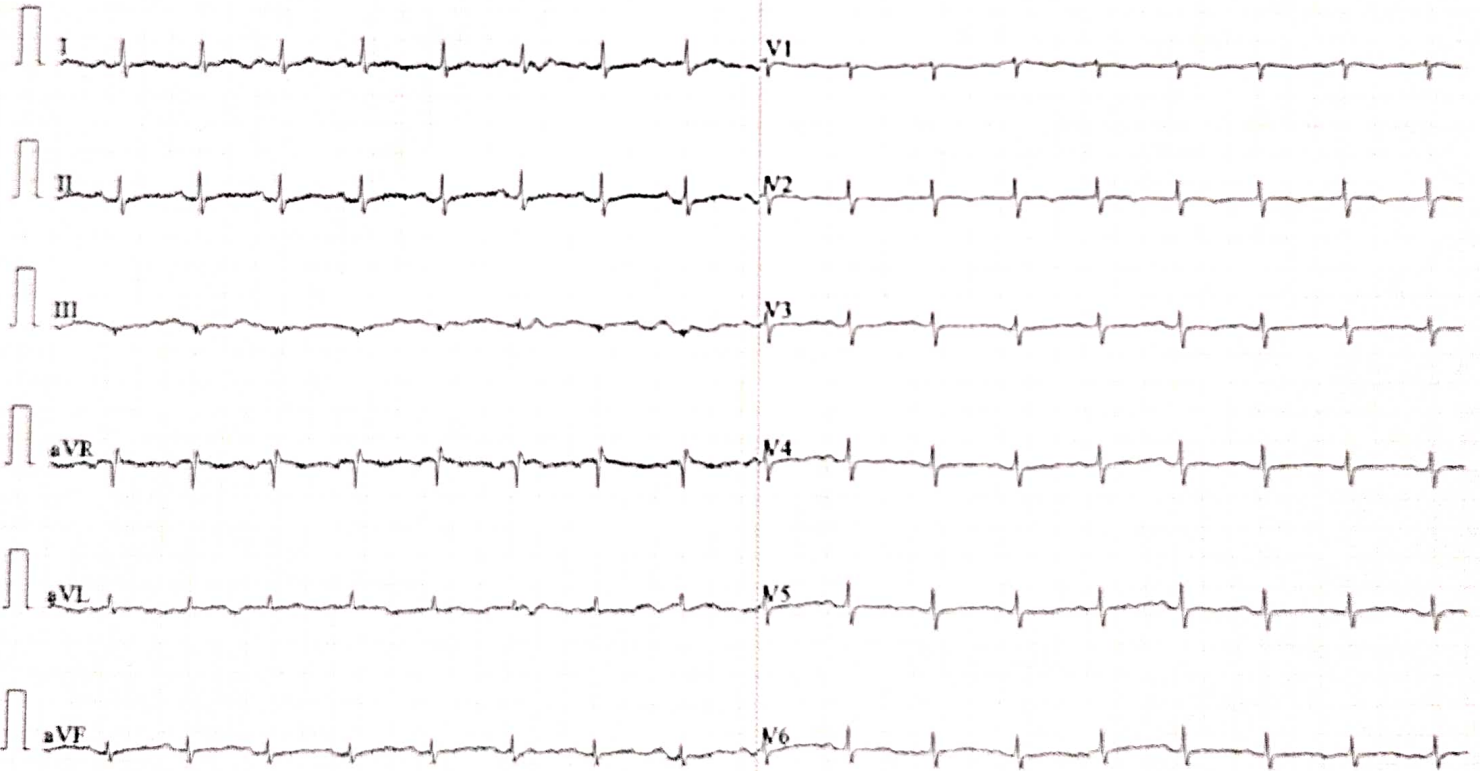
Female 48Years

160cm 67kg 120/80 mmHg

Diagnosis Information:

Apollo Clinic
23, 1st Floor,
Kalidasa Road, Mysore - 02
Ph : 0821-4006040/41

Unconfirmed Report.



Patient Name	: Mrs. ANITHA D P	Age	: 48 Y F
UHID	: CMYS.0000059738	OP Visit No	: CMYSOPV122666
Reported on	: 24-02-2024 14:51	Printed on	: 24-02-2024 14:51
Adm/Consult Doctor	:	Ref Doctor	: SELF

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Both lung fields and hila are normal .

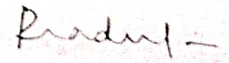
No obvious active pleuro-parenchymal lesion seen .

Both costophrenic and cardiophrenic angles are clear .

Both diaphragms are normal in position and contour .

Thoracic wall and soft tissues appear normal.

IMPRESSION :NORMAL STUDY .



Printed on:24-02-2024 14:51

---End of the Report---

Dr. PRADEEP KUMAR C N
MBBS DNB(RADIOLOGY)
Radiology

Apollo Health and Lifestyle Limited

ICD# : DES110102700P10115819

Regd Office : 110/10/2 Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016

Ph: No. 044-4944 7777 Fax No. 4944 7744 | Email ID: enquiry@apolloh.com | www.apolloh.com

APOLLO CLINICS NETWORK KARNATAKA

Bangalore : Basavanagudi | Bellandur | Electronic City | Fraser Town | HSR Layout | Indra Nagar | JP Nagar | Kundalahalli | Koramangala | Marajpur Road | **Mysore** : VV Mohalla

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

 **1860 500 7788**

Page 1 of 1

Patient Name: Mrs.Anitha D P	Date : 24.02.2024	Referring Doctor: Dr .Self
Age / Sex: 48 Yrs/Female	UHID NO: 59738	Location : OP
ULTRASONOGRAPHY- BREAST		

RIGHT BREAST: It is normal in echopattern. No e/o focal nodular or mass lesions seen. No e/o calcifications. The skin over the breast is normal. Nipple and areola are normal. The subcutaneous, mammary and retro mammary zones are normal.

LEFT BREAST: It is normal in echopattern. No e/o focal nodular or mass lesions seen. No e/o calcifications. The skin over the breast is normal. Nipple and areola are normal. The subcutaneous, mammary and retro mammary zones are normal.

No e/o axillary lymphadenopathy.

IMPRESSION: NORMAL STUDY.

Dr. Pradeep Kumar C N, DNB.
Consultant Radiologist.

Apollo Health and Lifestyle Limited

Regd. Office: 1-10-00-02, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016

Ph: No: 044-4904 7777 | Fax: No: 4904 7744 | Email ID: enquiry@apollohi.com | www.apollohi.com

APOLLO CLINICS NETWORK KARNATAKA

Bangalore: Saravananagar | Bellandur | Electronic City | Fraser Town | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli |
Kolar: Kolar (Main Road) | **Mysore:** (VV Mohalla)

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

1860 500 7788

Patient Name: Mrs.Anitha D P	Date : 24.02.2024	Referring Doctor: Dr .Self
Age / Sex: 48 Yrs/Female	UHID NO: 59738	Location : OP
ULTRASONOGRAPHY- ABDOMEN & PELVIS		

LIVER: It is normal in size and echotexture. No focal lesions seen. IHBR are not dilated. CBD and Portal vein are normal.

GALL BLADDER: It is well distended and normal. No calculi seen.

SPLEEN: It is normal in size, outline and echopattern. No e/o focal lesions.

PANCREAS: It is normal.

RIGHT KIDNEY: It measures 98x40 mm with parenchymal thickness of 14 mm. It is normal in size, outline and echotexture. No e/o calculus or hydronephrosis seen.

LEFT KIDNEY: It measures 95x47 mm with parenchymal thickness of 13 mm. It is normal in size, outline and echotexture. No e/o calculus or hydronephrosis seen.

URINARY BLADDER: It is well distended. The UB wall is normal. No calculi seen.

UTERUS: It is anteverted and measures 66x48x62 mm with ET=10 mm. It is normal in size, outline and echotexture. No mass lesion.

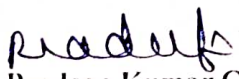
Rt. OVARY: It measures 20x22 mm. It is normal. No mass lesion seen.

Lt. OVARY: It measures 26x28 mm. It is normal. No mass lesion seen.

RIF: No evidence of focal collection or mass lesion seen. Appendix is not visualized.

OTHERS: No e/o free fluid in the abdomen. No e/o lymphadenopathy. No e/o gut wall thickening. No mass lesion seen in the abdomen.

IMPRESSION: NORMAL STUDY.


Dr. Pradeep Kumar C N, DNB
Consultant Radiologist.

Apollo Health and Lifestyle Limited

ICIN: U65110TG2000PLC115819

Regd. Office: 110-6D-02, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016
Ph: No. (04) 4304 7777 | Fax No. 4304 7744 | Email ID: enquiry@apollohi.com | www.apollohi.com

APOLLO CLINICS NETWORK KARNATAKA

Bangalore: Saravanagudi | Bellandur | Electronic City | Fraser Town | HSR Layout | Indra Nagar | JP Nagar | Kundalahalli | Koramangala | Marjapur Road | Mysore: (VV Mohalli)

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

 **1860 500 7788**

Patient's Name : Mrs ANITHA D P	Age & Sex:48 Yrs /Female
Date :24/02/2024	UHID No:59738

2D ECHOCARDIOGRAPHY STUDY

Impression:

- Normal chamber volumes
- No regional wall motion abnormality
- Normal left ventricular systolic function. EF 68 %
- No clots. No pericardial effusion

Findings

Left Ventricle:	No RWMA
Right Ventricle	Normal
Left Atrium	Normal
Right Atrium	Normal
Aorta	Normal
Pulmonary Artery	Normal
IAS	Intact
IVS	Intact
Valves	Normal
Pericardium	Normal
Doppler	Normal.

Apollo Health and Lifestyle Limited

(CIN: URS1107G2000PLC115819)

Regd Office: 110-110-62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016

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Koramangala | Sarjapur Road | Mysore: (VV Mohalla)

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

 **1860 500 7788**

Patient's Name : Mrs ANITHA D P	Age & Sex: 48 Yrs /Female
Date :24/02/2024	UHID No:59738

Measurements

AO : 2.0 cm

LA : 2.8 cm

RV : 2.0 cm

LVIDd : 3.82 cm

LVIDs : 2.38 cm

IVSd : 0.76 cm

IVSs : 1.36 cm

PWd : 0.85 cm

PWs : 1.19 cm

EF : 68.0 %

FS : 38.0 %

Doppler

MV TV AV PV
E: 0.74 m/s E -- m/s V max 0.92 m/s V max 0.61 m/s

A: 0.60 m/s A -- m/s

MR Nil

TR Nil

AR Nil

PR Nil

Dr. GURU PRASAD. B. V, MBBS, PGDCC
CONSULTANT – NON-INVASIVE CARDIOLOGY



Dr. GURU PRASAD. B. V
MBBS, PGDCC (CARDIO)
CC (NIM), CMB (CCCP), PGCC, CC (BDM)
Consultant - Non Invasive Cardiology

Apollo Health and Lifestyle Limited

ICPN - UMS11DTG200XPL1158191
Kings Office 1-10-60 E2, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016
Ph: No: (040) 4504 7777 Fax No: 4504 7744 | Email ID: enquiries@apolloh.com | www.apolloh.com

APOLLO CLINICS NETWORK KARNATAKA

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

Online appointments: www.apolloh.com

TO BOOK AN APPOINTMENT

1860/500 7788

Informed Consent/Declaration For Test Exclusion

Patient Name: Nous Anitha D.P Age: 48y / F

UHID Number: 59738

Please tick and sign the relevant part

I certify that I will skip LBC pap smear Test from my own.

No refund is provided for the above excluded test and i have been informed about the same.

Patient signature Anitha D.P Date 24/2/2024

Witness signature: A Date: 24/2/2024

Name: Mrs. ANITHA D P
Age/Gender: 48 Y/F
Address: MYSORE
Location: MYSORE, KARNATAKA
Doctor:
Department: GENERAL
Rate Plan: MYSORE_06042023
Sponsor: ARCOFEMI HEALTHCARE LIMITED
Consulting Doctor: Dr. SABAH JAVED

MR No: CMYS.0000059738
Visit ID: CMYSOPV122666
Visit Date: 24-02-2024 07:36
Discharge Date:
Referred By: SELF

HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

Chief Complaints

COMPLAINTS:::: For Annual Health Checkup,

SYSTEMIC REVIEW

**Weight

--->: Stable,

Number of kgs: 67,

-=: 160,

HT-HISTORY

Past Medical History

PAST MEDICAL HISTORY: Nil Significant,

**Cancer: nill,

PHYSICAL EXAMINATION

SYSTEMIC EXAMINATION

IMPRESSION

IMPRESSION

Finding Category : within normal limits,

ECG

: NORMAL,

RECOMMENDATION

DISCLAIMER

Disclaimer: The health checkup examinations and routine investigations have certain limitations and may not be able to detect all the diseases. Any new or persisting symptoms should be brought to the attention of the consulting physician. Additional tests, consultations and follow up may be required in some cases.,

Doctor's Signature

Patient Name : Mrs. ANITHA D P

Age/Gender : 48 Y/F

UHID/MR No. : CMYS.0000059738

OP Visit No : CMYSOPV122666

Sample Collected on :

Reported on : 24-02-2024 12:44

LRN# : RAD2246047

Specimen :

Ref Doctor : SELF

Emp/Auth/TPA ID : 630172

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

LIVER: It is normal in size and echotexture. No focal lesions seen. IHBR are not dilated. CBD and Portal vein are normal.

GALL BLADDER: It is well distended and normal. No calculi seen.

SPLEEN: It is normal in size, outline and echopattern. No e/o focal lesions.

PANCREAS: It is normal.

RIGHT KIDNEY: It measures 98x40 mm with parenchymal thickness of 14 mm. It is normal in size, outline and echotexture. No e/o calculus or hydronephrosis seen.

LEFT KIDNEY: It measures 95x47 mm with parenchymal thickness of 13 mm. It is normal in size, outline and echotexture. No e/o calculus or hydronephrosis seen.

URINARY BLADDER: It is well distended. The UB wall is normal. No calculi seen.

UTERUS: It is anteverted and measures 66x48x62 mm with ET=10 mm. It is normal in size, outline and echotexture. No mass lesion.

Rt. OVARY: It measures 20x22 mm. It is normal. No mass lesion seen.

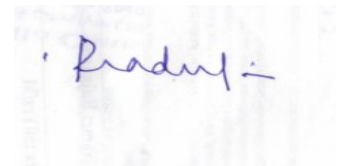
Lt. OVARY: It measures 26x28 mm. It is normal. No mass lesion seen.

RIF: No evidence of focal collection or mass lesion seen. Appendix is not visualized.

OTHERS: No e/o free fluid in the abdomen. No e/o lymphadenopathy. No e/o gut wall thickening. No mass lesion seen in the abdomen.

IMPRESSION: NORMAL STUDY.

Pradeep Kumar C N, DNB
Consultant Radiologist.



Dr. PRADEEP KUMAR C N
MBBS DNB(RADIOLOGY)
Radiology

Patient Name : Mrs. ANITHA D P

Age/Gender : 48 Y/F

UHID/MR No. : CMYS.0000059738

OP Visit No : CMYSOPV122666

Sample Collected on :

Reported on : 24-02-2024 14:51

LRN# : RAD2246047

Specimen :

Ref Doctor : SELF

Emp/Auth/TPA ID : 630172

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Both lung fields and hila are normal .

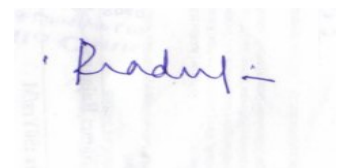
No obvious active pleuro-parenchymal lesion seen .

Both costophrenic and cardiophrenic angles are clear .

Both diaphragms are normal in position and contour .

Thoracic wall and soft tissues appear normal.

IMPRESSION :NORMAL STUDY .



Dr. PRADEEP KUMAR C N
MBBS DNB(RADIOLOGY)

Radiology

Patient Name : Mrs. ANITHA D P

Age/Gender : 48 Y/F

UHID/MR No. : CMYS.0000059738

OP Visit No : CMYSOPV122666

Sample Collected on :

Reported on : 24-02-2024 12:45

LRN# : RAD2246047

Specimen :

Ref Doctor : SELF

Emp/Auth/TPA ID : 630172

DEPARTMENT OF RADIOLOGY

SONO MAMMOGRAPHY - SCREENING

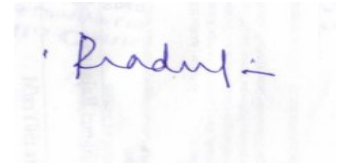
RIGHT BREAST: It is normal in echopattern. No e/o focal nodular or mass lesions seen. No e/o calcifications. The skin over the breast is normal. Nipple and areola are normal. The subcutaneous, mammary and retro mammary zones are normal.

LEFT BREAST: It is normal in echopattern. No e/o focal nodular or mass lesions seen. No e/o calcifications. The skin over the breast is normal. Nipple and areola are normal. The subcutaneous, mammary and retro mammary zones are normal.

No e/o axillary lymphadenopathy.

IMPRESSION: NORMAL STUDY.

Dr. Pradeep Kumar C N, DNB.
Consultant Radiologist.

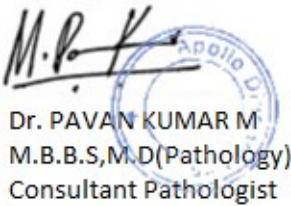


Dr. PRADEEP KUMAR C N
MBBS DNB(RADIOLOGY)
Radiology

Patient Name	: Mrs.ANITHA D P	Collected	: 24/Feb/2024 07:42AM
Age/Gender	: 48 Y 7 M 23 D/F	Received	: 24/Feb/2024 10:53AM
UHID/MR No	: CMYS.0000059738	Reported	: 24/Feb/2024 12:16PM
Visit ID	: CMYSOPV122666	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 630172		

DEPARTMENT OF HAEMATOLOGY

PERIPHERAL SMEAR , WHOLE BLOOD EDTA



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

SIN No:BED240047443



Patient Name : Mrs.ANITHA D P	Collected : 24/Feb/2024 07:42AM
Age/Gender : 48 Y 7 M 23 D/F	Received : 24/Feb/2024 10:53AM
UHID/MR No : CMYS.0000059738	Reported : 24/Feb/2024 02:12PM
Visit ID : CMYSOPV122666	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 630172	

DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	12.4	g/dL	12-15	Spectrophotometer
PCV	37.60	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.11	Million/cu.mm	3.8-4.8	Electrical Impedance
MCV	92	fL	83-101	Calculated
MCH	30.3	pg	27-32	Calculated
MCHC	33.1	g/dL	31.5-34.5	Calculated
R.D.W	11.9	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	8,300	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	55	%	40-80	Electrical Impedance
LYMPHOCYTES	37	%	20-40	Electrical Impedance
EOSINOPHILS	3.5	%	1-6	Electrical Impedance
MONOCYTES	4.1	%	2-10	Electrical Impedance
BASOPHILS	0.4	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	4565	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	3071	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	290.5	Cells/cu.mm	20-500	Calculated
MONOCYTES	340.3	Cells/cu.mm	200-1000	Calculated
BASOPHILS	33.2	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	1.49		0.78- 3.53	Calculated
PLATELET COUNT	337000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	46	mm at the end of 1 hour	0-20	Modified Westergren
PERIPHERAL SMEAR				

R.B.C: Majority are normocytic normochromic.



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

SIN No:BED240047443



Patient Name	: Mrs.ANITHA D P	Collected	: 24/Feb/2024 07:42AM
Age/Gender	: 48 Y 7 M 23 D/F	Received	: 24/Feb/2024 10:53AM
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Visit ID	: CMYSOPV122666	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 630172		

DEPARTMENT OF HAEMATOLOGY

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

W.B.C: normal in number with normal morphology and distribution.

Platelets: normal in number and are seen in singles and clumps.

Hemoparasites: Not seen.

IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE.



Dr. PAVAN KUMAR M
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Consultant Pathologist

SIN No:BED240047443



Patient Name : Mrs.ANITHA D P	Collected : 24/Feb/2024 07:42AM
Age/Gender : 48 Y 7 M 23 D/F	Received : 24/Feb/2024 10:53AM
UHID/MR No : CMYS.0000059738	Reported : 24/Feb/2024 02:12PM
Visit ID : CMYSOPV122666	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 630172	

DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA				
BLOOD GROUP TYPE	O			Forward & Reverse Grouping with Slide/Tube Aggluti
Rh TYPE	POSITIVE			Forward & Reverse Grouping with Slide/Tube Agglutination



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

SIN No:BED240047443



Patient Name : Mrs.ANITHA D P	Collected : 24/Feb/2024 07:42AM
Age/Gender : 48 Y 7 M 23 D/F	Received : 24/Feb/2024 02:28PM
UHID/MR No : CMYS.0000059738	Reported : 24/Feb/2024 03:22PM
Visit ID : CMYSOPV122666	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 630172	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, FASTING , NAF PLASMA	107	mg/dl	74-106	GOD, POD

Comment:

As per American Diabetes Guidelines, 2023

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

Note:

- The diagnosis of Diabetes requires a fasting plasma glucose of > or = 126 mg/dL and/or a random / 2 hr post glucose value of > or = 200 mg/dL on at least 2 occasions.
- Very high glucose levels (>450 mg/dL in adults) may result in Diabetic Ketoacidosis & is considered critical.


Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	125	mg/dl	70-140	GOD, POD

Comment:

It is recommended that FBS and PPBS should be interpreted with respect to their Biological reference ranges and not with each other.

Conditions which may lead to lower postprandial glucose levels as compared to fasting glucose levels may be due to reactive hypoglycemia, dietary meal content, duration or timing of sampling after food digestion and absorption, medications such as insulin preparations, sulfonylureas, amylin analogues, or conditions such as overproduction of insulin.

Test Name	Result	Unit	Bio. Ref. Range	Method
HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA				
HBA1C, GLYCATED HEMOGLOBIN	5.1	%		HPLC



Dr. PAVAN KUMAR M
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SIN No:EDT240021106



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UHID/MR No : CMYS.0000059738	Reported : 24/Feb/2024 03:22PM
Visit ID : CMYSOPV122666	Status : Final Report
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DEPARTMENT OF BIOCHEMISTRY

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ESTIMATED AVERAGE GLUCOSE (eAG)	100	mg/dL	Calculated
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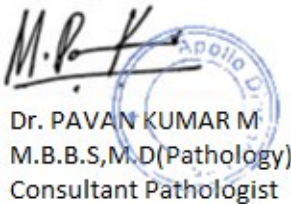
Comment:

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

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

Note: Dietary preparation or fasting is not required.

- HbA1C is recommended by American Diabetes Association for Diagnosing Diabetes and monitoring Glycemic Control by American Diabetes Association guidelines 2023.
- Trends in HbA1C values is a better indicator of Glycemic control than a single test.
- Low HbA1C in Non-Diabetic patients are associated with Anemia (Iron Deficiency/Hemolytic), Liver Disorders, Chronic Kidney Disease. Clinical Correlation is advised in interpretation of low Values.
- Falsely low HbA1c (below 4%) may be observed in patients with clinical conditions that shorten erythrocyte life span or decrease mean erythrocyte age. HbA1c may not accurately reflect glycemic control when clinical conditions that affect erythrocyte survival are present.
- In cases of Interference of Hemoglobin variants in HbA1C, alternative methods (Fructosamine) estimation is recommended for Glycemic Control
 - A: HbF >25%
 - B: Homozygous Hemoglobinopathy.
 (Hb Electrophoresis is recommended method for detection of Hemoglobinopathy)



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Consultant Pathologist

SIN No:EDT240021106



Patient Name : Mrs.ANITHA D P	Collected : 24/Feb/2024 07:42AM
Age/Gender : 48 Y 7 M 23 D/F	Received : 24/Feb/2024 11:13AM
UHID/MR No : CMYS.0000059738	Reported : 24/Feb/2024 12:18PM
Visit ID : CMYSOPV122666	Status : Final Report
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DEPARTMENT OF BIOCHEMISTRY

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

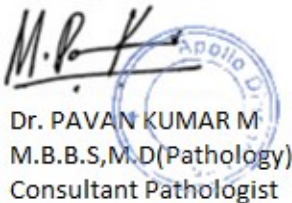
Test Name	Result	Unit	Bio. Ref. Range	Method
LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	196	mg/dl	0-200	CHOD
TRIGLYCERIDES	204	mg/dl	0-150	GPO, Trinder
HDL CHOLESTEROL	35	mg/dL	40-60	CHOD
NON-HDL CHOLESTEROL	161	mg/dL	<130	Calculated
LDL CHOLESTEROL	119.78	mg/dL	<100	Calculated
VLDL CHOLESTEROL	40.86	mg/dL	<30	Calculated
CHOL / HDL RATIO	5.54		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

- Measurements in the same patient on different days can show physiological and analytical variations.
- NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.
- Primary prevention algorithm now includes absolute risk estimation and lower LDL Cholesterol target levels to determine eligibility of drug therapy.
- 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.
- 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.
- 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.



Dr. PAVAN KUMAR M
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SIN No:SE04639262



Patient Name : Mrs.ANITHA D P	Collected : 24/Feb/2024 07:42AM
Age/Gender : 48 Y 7 M 23 D/F	Received : 24/Feb/2024 11:13AM
UHID/MR No : CMYS.0000059738	Reported : 24/Feb/2024 12:04PM
Visit ID : CMYSOPV122666	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 630172	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.50	mg/dl	0-1.2	NBD
BILIRUBIN CONJUGATED (DIRECT)	0.20	mg/dl	0-0.2	Diazotized sulfanilic acid
BILIRUBIN (INDIRECT)	0.30	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	12	U/l	0-45	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	16.0	U/l	0-31	IFCC
ALKALINE PHOSPHATASE	77.00	U/l	42-98	IFCC (AMP buffer)
PROTEIN, TOTAL	7.60	g/dl	6.4-8.3	Biuret
ALBUMIN	4.23	g/dl	3.5-5.2	Bromcresol Green
GLOBULIN	3.37	g/dL	2.0-3.5	Calculated
A/G RATIO	1.26		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:

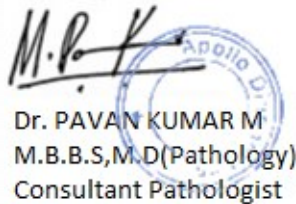
1. Hepatocellular Injury:

- 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 > 1 In Alcoholic Liver Disease AST: ALT usually >2. This ratio is also seen to be increased in NAFLD, Wilson's diseases, Cirrhosis, but the increase is usually not >2.

2. Cholestatic Pattern:

- ALP – Disproportionate increase in ALP compared with AST, ALT.
- Bilirubin may be elevated.
- ALP elevation also seen in pregnancy, impacted by age and sex.
- To establish the hepatic origin correlation with GGT helps. If GGT elevated indicates hepatic cause of increased ALP.

3. Synthetic function impairment: • Albumin- Liver disease reduces albumin levels. • Correlation with PT (Prothrombin Time) helps.



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Consultant Pathologist

SIN No:SE04639262



Patient Name : Mrs.ANITHA D P	Collected : 24/Feb/2024 07:42AM
Age/Gender : 48 Y 7 M 23 D/F	Received : 24/Feb/2024 11:13AM
UHID/MR No : CMYS.0000059738	Reported : 24/Feb/2024 01:09PM
Visit ID : CMYSOPV122666	Status : Final Report
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Emp/Auth/TPA ID : 630172	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	0.71	mg/dL	0.51-1.04	Enzymatic colorimetric
UREA	20.44	mg/dl	13-43	Urease, UV
BLOOD UREA NITROGEN	9.6	mg/dl	6-20	Urease, UV
URIC ACID	5.60	mg/dL	2.6-6	Uricase
CALCIUM	10.28	mg/dl	8.6-10.3	Arsenazo III
PHOSPHORUS, INORGANIC	3.36	mg/dl	2.7-4.5	Molybdate
SODIUM	143	mmol/L	135-145	Direct ISE
POTASSIUM	4.4	mmol/L	3.5-5.1	Direct ISE
CHLORIDE	103	mmol/L	98 - 107	Direct ISE



Dr. PAVAN KUMAR M
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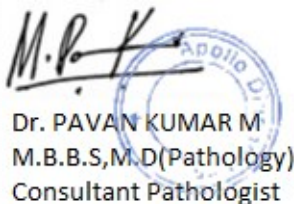


Patient Name : Mrs.ANITHA D P	Collected : 24/Feb/2024 07:42AM
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UHID/MR No : CMYS.0000059738	Reported : 24/Feb/2024 12:04PM
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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	18.00	U/l	0-38	IFCC



Dr. PAVAN KUMAR M
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Consultant Pathologist

SIN No:SE04639262



Patient Name : Mrs.ANITHA D P	Collected : 24/Feb/2024 07:42AM
Age/Gender : 48 Y 7 M 23 D/F	Received : 24/Feb/2024 10:46AM
UHID/MR No : CMYS.0000059738	Reported : 24/Feb/2024 12:15PM
Visit ID : CMYSOPV122666	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 630172	

DEPARTMENT OF IMMUNOLOGY

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

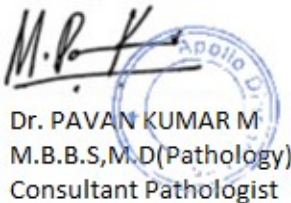
Test Name	Result	Unit	Bio. Ref. Range	Method
THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM				
TRI-iodothyronine (T3, TOTAL)	1.07	ng/mL	0.64-1.52	CMIA
THYROXINE (T4, TOTAL)	7.29	µg/dL	4.87-11.72	CMIA
THYROID STIMULATING HORMONE (TSH)	2.160	µIU/mL	0.35-4.94	CMIA

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	T3	T4	FT4	Conditions
High	Low	Low	Low	Primary Hypothyroidism, Post Thyroidectomy, Chronic Autoimmune Thyroiditis
High	N	N	N	Subclinical Hypothyroidism, Autoimmune Thyroiditis, Insufficient Hormone Replacement Therapy.
N/Low	Low	Low	Low	Secondary and Tertiary Hypothyroidism
Low	High	High	High	Primary Hyperthyroidism, Goitre, Thyroiditis, Drug effects, Early Pregnancy
Low	N	N	N	Subclinical Hyperthyroidism
Low	Low	Low	Low	Central Hypothyroidism, Treatment with Hyperthyroidism
Low	N	High	High	Thyroiditis, Interfering Antibodies
N/Low	High	N	N	T3 Thyrotoxicosis, Non thyroidal causes
High	High	High	High	Pituitary Adenoma; TSHoma/Thyrotropinoma



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

SIN No:SPL24031136



Patient Name	: Mrs.ANITHA D P	Collected	: 24/Feb/2024 07:42AM
Age/Gender	: 48 Y 7 M 23 D/F	Received	: 24/Feb/2024 10:46AM
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DEPARTMENT OF IMMUNOLOGY

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



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

SIN No:SPL24031136



Patient Name : Mrs.ANITHA D P	Collected : 24/Feb/2024 07:42AM
Age/Gender : 48 Y 7 M 23 D/F	Received : 24/Feb/2024 12:06PM
UHID/MR No : CMYS.0000059738	Reported : 24/Feb/2024 12:57PM
Visit ID : CMYSOPV122666	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 630172	

DEPARTMENT OF CLINICAL PATHOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
COMPLETE URINE EXAMINATION (CUE) , URINE				
PHYSICAL EXAMINATION				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pH	6.0		5-7.5	Bromothymol Blue
SP. GRAVITY	1.025		1.002-1.030	Dipstick
BIOCHEMICAL EXAMINATION				
URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE		NEGATIVE	GOD-POD
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING
URINE KETONES (RANDOM)	POSITIVE (TRACE)		NEGATIVE	NITROPRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	EHRlich
BLOOD	NEGATIVE		NEGATIVE	Dipstick
NITRITE	NEGATIVE		NEGATIVE	Dipstick
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	PYRROLE HYDROLYSIS
CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY				
PUS CELLS	1 - 2	/hpf	0-5	Microscopy
EPITHELIAL CELLS	3 - 4	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY



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SIN No:UR2289613



Patient Name : Mrs.ANITHA D P	Collected : 24/Feb/2024 07:42AM
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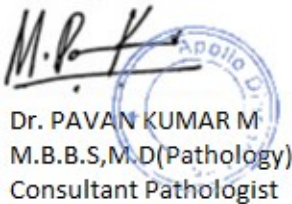
DEPARTMENT OF CLINICAL PATHOLOGY

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

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

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

*** End Of Report ***



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SIN No:UF010677

