

APOLLO CLINIC

CONSENT FORM

PATIENT NAME MRS. shivani AGE: 30 / f

UHID NUMBER 1137/59 COMPANY NAME

I MR/MRS/MS MRS. shivani EMPLOYEE OF AR cochin

COMPANY WANT TO INFORM YOU THAT I AM NOT INTERESTED IN
GETTING paper for

TEST DONE WHICH IS A PART OF MY ROUTINE HEALTH CHECK PACKAGE.
AND I CLAIM THE ABOVE STATEMENT IN MY FULL CONSCIOUSNESS.

PATIENT SIGNATURE: shivani DATE: 13/01/24

Patient Name	: Mrs. SHIVANI CHOUDHARY	Age	: 30 Y/F
UHID	: CNIZ.0000113789	OP Visit No	: CKONOPV630490
Conducted By:	: Dr. RAMU ANKAM	Conducted Date	: 13-01-2024 11:20
Referred By	: SELF		

2D-ECHO WITH COLOUR DOPPLER

Dimensions:	
Ao (ed)	3.1 CM
LA (es)	3.3 CM
LVID (ed)	4.3 CM
LVID (es)	2.7 CM
IVS (Ed)	1.1 CM
LVPW (Ed)	1.1 CM
EF	65.00%
%FD	35.00%
MITRAL VALVE :	NORMAL
AML	NORMAL
PML	NORMAL
AORTIC VALVE	NORMAL
TRICUSPID VALVE	NORMAL
RIGHT VENTRICLE	NORMAL
INTER ATRIAL SEPTUM	INTACT
INTER VENTRICULAR SEPTUM	INTACT
AORTA	NORMAL
RIGHT ATRIUM	NORMAL
LEFT ATRIUM	NORMAL
Pulmonary Valve	NORMAL
PERICARDIUM	NORMAL
LEFT VENTRICLE:	

NO REGIONAL WALL MOTION ABNORMALITY

COLOUR AND DOPPLER STUDIES:-

DIV: 0.8

Apollo Health and Lifestyle Limited

(CIN - U85110TG2000PLC046089) Regd. Office: 7-1-617/A, 7th Floor, Imperial Towers, Ameerpet, Hyderabad-500016, Telangana. | Email ID: enquiry@apollohi.com

APOLLO CLINICS NETWORK TELANGANA & AP

Hyderabad (AS Rao Nagar | Chanda Nagar | Jubilee Hills | Kondapur | Manikonda | Nallakunta | Nizampet | Uppal)

Vizag (Seethamma Peta)

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

1860 500 7788

E: 0.8 m/s
A: 0.6 m/s

IMPRESSION :-
NORMAL CHAMBERS
NO RWMA
GOOD LV/ RV FUNCTION
NO MR/ TR/ AR/ PAH
NO CLOT/ PE.



Cardiology

ARCOFEMI

Apollo Clinic
Expertise. Closer to you.

Name Mrs. Shivani Choudhary

Date 13/01/2024

Age 30y

UHID No. 113789

Male Female

Ref. Physician Dr. Ramu

Ref. Diagnosis

Echocardiogram Report

Echogenicity Poor Adequate Good Ht. Wt. BSA

DIMENSIONS		NORMAL	DIMENSIONS		NORMAL
Ao (ed)	3.1	cm (1.5cm / m2)	IVS (Ed)	1.1	cm (0.6 - 1.2 cm)
LA (es)	3.3	cm (1.5cm / m2)	LVPW (Ed)	1.1	cm (0.6 - 1.1 cm)
RVID (ed)	3.2	cm (0.9 cm / m2)	EF	65	(0.62 - 0.85)
LVID (ed)	4.3	cm (2.6 - 3.4 cm / m2)	% FD	35	(2.8% - 42%)
LVID (es)	2.7				

MORPHOLOGICAL DATA

Mitral Valve	AML	Interatrial septum	Normal
	PML	Interventricular septum	Normal
Aortic Valve		Pulmonary artery	2222
Tricuspid valve		Aorta	
Pulmonary valve		Right atrium	
Right ventricle		Left atrium	

Patient Name : Mrs. SHIVANI CHOUDHARY Age : 30 Y/F
UHID : CNIZ.0000113789 OP Visit No : CKONOPV630490
Reported By : Dr. VENKATA RAYUDU NEKKANTI Conducted Date : 13-01-2024 12:37
Referred By : SELF

ECG REPORT

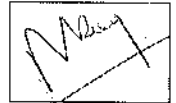
Observation :-

1. Normal Sinus Rhythm.
2. Heart rate is 74beats per minutes.
3. No pathological Q wave or S-T,T changes seen.
4. Normal P,Q,R,S,T waves and axis.
5. No evidence of chamber, hypertrophy or enlargement seen.

Impression:

AXIS + 90 DEGREE
NO ST CHANGES.

----- END OF THE REPORT -----



Dr. VENKATA RAYUDU NEKKANTI

APOLLO MEDICAL CENTER

PHYSICAL EXAMINATION FORM

DATE: 13/01/24.

NAME: Mrs. Shivani-Chaudhary

HEIGHT

161

WEIGHT

63

UHID: 113789

AGE: 30/f

BMI

24.3

CHEST MEASUREMENT

96

ABDOMEN

84

PULSE

74

BP

100/70

OUT

92

WAIST

95

HIP

111

THE APOLLO MEDICAL CENTER # 2-20/6/A, KOTHAGUDA X ROADS, NEAR HARSHA TO: OTA SHOWROOM, KONDAPUR,HITECH CITY, HYDERABAD-500032, P.H.NO-040-30166600/77, EMAIL : hitechcity@apollohcs.com

Mrs shivani choudhary, 30
ID: 113789

13.01.2024 10:18:56

Room:

Location:
Order Number:
Visit:

74 bpm
--/-- mmHg

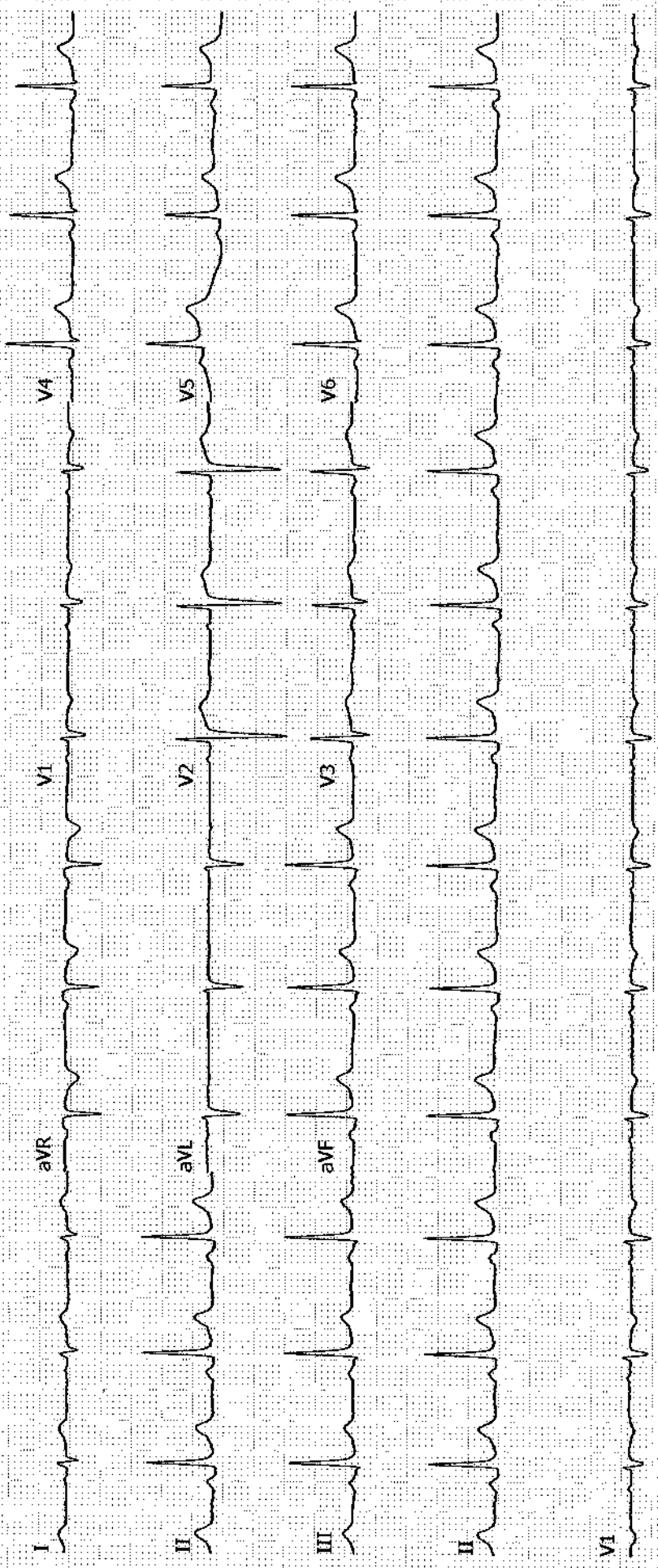
Female

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:

QRS: 82 ms
QT / QTcBaz: 352 / 390 ms
PR: 140 ms
P: 98 ms
RR / PP: 812 / 810 ms
P / QRS / T: 72 / 91 / 72 degrees

Normal sinus rhythm
Rightward axis
Borderline ECG

Handwritten notes:
ADMIT 90
COST J...





Bill Of Supply

Name : Mrs. SHIVANI CHOUDHARY
 Age/Gender : 30 Y F
 Contact No : +918077926604
 Address : HYD
 UHID : CNIZ.0000113789
 Corporate Name : ARCOFEMI HEALTHCARE LIMITED
 Plan : ARCOFEMI MEDIWHEEL FEMALE AHC CREDIT PAN INDIA OP AGREEMENT

Bill No : CKON-OCR-120414
 Bill/Reg Date : 13.01.2024 07:49
 Referred by : SELF
 Center : Kondapur
 Emp No/Auth Code : 00110695.

#	Department	Description Of Service	SAC/HSN Code	Qty	Rate	Gross Value	Discount	CGST Rate	CGST Amt	SGST/UTGST Rate	SGST/UTGST Amt	Net Value
1	Package Charges	ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324	999312	1	2,400.00	2,400.00	0.00	0.00	0.00	0.00	0.00	2,400.00
Bill Amount:											2,400.00	

You can download your report from "www.apolloclinic.com" Enter user name as CKONOPV630490 and password as 323680

Please log on to AskApollo.com for booking appointments

Apollo Health and Lifestyle Limited

(CIN - U85110TG2000PLC115819)
 Regd. Office: 47-1-617/A, 615 & 616, Imperial Towers, 7th Floor, Ameerpet, Hyderabad 500038, Telangana.
 www.apollohl.com | Email ID: enquiry@apollohl.com | Ph No: 040-4904 7777, Fax No: 4904 7744

APOLLO CLINICS NETWORK

Telangana: Hyderabad (AS Rao Nagar | Chanda Nagar | Kondapur | Nallakunta | Nizampet | Monikonda | Uppal) | Andhra Pradesh: Vizag (Sudhanigala | Peta) | Karnataka: Bangalore (Basavanagudi) | Kerala: Kochi (Kalamangala) | Tamil Nadu: Chennai (Anna Nagar | Kotturpuram) | T.Nagar | Valasaravakkam | Velachery | Maharashtra: Pune (Aundh | Nigdi | Badlikarim) | Vijay Nagar | West Bengal: Kolkata (Ballygunge) | Uttar Pradesh: Ghaziabad (Indrapuram)

GSTIN: 365AADCA0733E1Z8

Address:
 47-1-617/A, 615 & 616, Imperial Towers,
 7th Floor, Ameerpet, Hyderabad, Telangana.

1860 500 7788

Health Check up Booking Confirmed Request(bobS4049),Package Code-PKG10000377, Beneficiary Code-297797

Mediwheel <wellness@mediwheel.in>

Sat 06-01-2024 12:26

To:Rahul Kumar <RAHUL.KUMAR3@bankofbaroda.com>

C:customercare@mediwheel.in <customercare@mediwheel.in>

You don't often get email from wellness@mediwheel.in. [Learn why this is important](#)

ध्यान: यह मेल बैंक डोमेन के बाहर से आया है. अगर आप प्रेषक को नहीं जानते तो मेल में दी गयी लिंक पर क्लिक न करें.
CAUTION: THIS MAIL IS ORIGINATED FROM OUTSIDE OF THE BANK'S DOMAIN. DO NOT CLICK ON THE LINKS.

011-41195959

Dear **Rahul kumar,**

We are pleased to confirm your health checkup booking request with the following details.

Booking Date : 02-01-2024

Hospital Package Name : Mediwheel Full Body Health Annual Plus Check

Patient Package Name : Mediwheel Full Body Health Checkup Female Below 40

Name of Diagnostic/Hospital : Apollo Medical Centre - Kondapur

Address of Diagnostic/Hospital : Apollo Medical centre, Kothaguda X Roads, Beside Swagth De-Royal Restaurants , Kondapur - 500084

City : Hyderabad

State :

Pincode : 500084

Appointment Date : 13-01-2024

Confirmation Status : Booking Confirmed

Preferred Time : 8:00am-9:00am

Booking Status : Booking Confirmed

Member Information		
Booked Member Name	Age	Gender
Shivani Choudhary	30 year	Female

Note - Please note to not pay any amount .

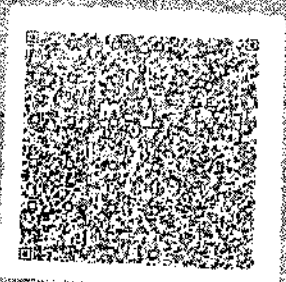
Instructions to undergo Health Check:

आयकर विभाग
INCOME TAX DEPARTMENT

भारत सरकार
GOVT. OF INDIA

स्थायी लेखा संख्या कार्ड
Permanent Account Number Card

CKOPC6587Q



नाम / Name
SHIVANI CHOUDHARY

पिता का नाम / Father's Name
ANIL KUMAR

जन्म की तिथि / Date of Birth
01/06/1993

Shivani
हस्ताक्षर / Signature

0665B

Customer Pending Tests
PATIENT YET TO VISIT THE CENTER FOR FITNESS EVALUATION.
pap smear and ophthal test pending

Patient Name : Mrs. SHIVANI CHOUDHARY

Age/Gender : 30 Y/F

UHID/MR No. : CNIZ.0000113789

OP Visit No : CKONOPV630490

Sample Collected on :

Reported on : 13-01-2024 14:40

LRN# : RAD2206956

Specimen :

Ref Doctor : SELF

Emp/Auth/TPA ID : 00110695.

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Both lung fields and hila are normal .

No obvious active pleuro-parenchymal lesion seen .

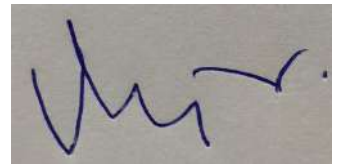
Both costophrenic and cardiophrenic angles are clear .

Both diaphragms are normal in position and contour .

Thoracic wall and soft tissues appear normal.

CONCLUSION :

No obvious abnormality seen.



Dr. VIJAYA KUMAR M
MBBS, DMRD
Consultant Radiologist

Patient Name	: Mrs. SHIVANI CHOUDHARY	Age/Gender	: 30 Y/F
UHID/MR No.	: CNIZ.0000113789	OP Visit No	: CKONOPV630490
Sample Collected on	:	Reported on	: 13-01-2024 11:45
LRN#	: RAD2206956	Specimen	:
Ref Doctor	: SELF		
Emp/Auth/TPA ID	: 00110695.		

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

Liver appears normal in size and mild increased in echotexture. No focal lesion is seen. PV and CBD normal. No dilatation of the intrahepatic biliary radicals.

Gall bladder is distended normal. 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 echopattern. No focal/mass lesion/calcification. No evidence of peripancreatic free fluid or collection. Pancreatic duct appears normal.

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

Right kidney measures 99 x 41 mm. Left kidney measures 101 x 39 mm.

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 measures 71 x 52 x 32mm, It shows normal shape & echo pattern. Endometrial echo-complex appears normal and measures 7 mm. No intra/extra uterine gestational sac seen.

Both ovaries appear normal in size, shape and echotexture.

Right ovary measures 27 x 14 mm. Left ovary measures 26 x 12 mm.

IMPRESSION:-

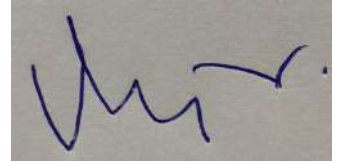
****MILD FATTY CHANGES IN LIVER.**

Suggest – clinical correlation.

Patient Name : Mrs. SHIVANI CHOUDHARY

Age/Gender : 30 Y/F

(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.



Dr. VIJAYA KUMAR M
MBBS, DMRD
Consultant Radiologist

Patient Name : Mrs.SHIVANI CHOUDHARY	Collected : 13/Jan/2024 07:54AM
Age/Gender : 30 Y 7 M 12 D/F	Received : 13/Jan/2024 09:09AM
UHID/MR No : CNIZ.0000113789	Reported : 13/Jan/2024 10:19AM
Visit ID : CKONOPV630490	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 00110695.	

DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	11.9	g/dL	12-15	Spectrophotometer
PCV	37.30	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.34	Million/cu.mm	3.8-4.8	Electrical Impedance
MCV	86	fL	83-101	Calculated
MCH	27.5	pg	27-32	Calculated
MCHC	32	g/dL	31.5-34.5	Calculated
R.D.W	15.5	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	5,000	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYtic COUNT (DLC)				
NEUTROPHILS	57	%	40-80	Electrical Impedance
LYMPHOCYTES	35	%	20-40	Electrical Impedance
EOSINOPHILS	02	%	1-6	Electrical Impedance
MONOCYTES	06	%	2-10	Electrical Impedance
BASOPHILS	00	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	2850	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	1750	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	100	Cells/cu.mm	20-500	Calculated
MONOCYTES	300	Cells/cu.mm	200-1000	Calculated
PLATELET COUNT	216000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	05	mm at the end of 1 hour	0-20	Modified Westergren
PERIPHERAL SMEAR				
RBC NORMOCYTIC NORMOCHROMIC				
WBC WITHIN NORMAL LIMITS				
PLATELETS ARE ADEQUATE ON SMEAR				
NO HEMOPARASITES SEEN				

Page 1 of 13





Dr.Sukumar Sannidhi
MD(Path)
Consultant Pathologist

Patient Name : Mrs.SHIVANI CHOUDHARY	Collected : 13/Jan/2024 07:54AM
Age/Gender : 30 Y 7 M 12 D/F	Received : 13/Jan/2024 02:41PM
UHID/MR No : CNIZ.0000113789	Reported : 13/Jan/2024 08:13PM
Visit ID : CKONOPV630490	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 00110695.	

DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA				
BLOOD GROUP TYPE	B			Microplate technology
Rh TYPE	Negative			Microplate technology



Dr.SRINIVAS N.S.NORI
M.B.B.S,M.D(Pathology)
CONSULTANT PATHOLOGY



SIN No:HA06335257

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

Patient Name : Mrs.SHIVANI CHOUDHARY	Collected : 13/Jan/2024 10:23AM
Age/Gender : 30 Y 7 M 12 D/F	Received : 13/Jan/2024 12:08PM
UHID/MR No : CNIZ.0000113789	Reported : 13/Jan/2024 04:05PM
Visit ID : CKONOPV630490	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 00110695.	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, FASTING , NAF PLASMA	94	mg/dL	70-100	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)	70	mg/dL	70-140	GOD - POD

Post Prandial blood sugar is less than Fasting level due to the following causes. Inappropriate Insulin release. Post absorptive hypoglycemia Please ensure that you had taken adequate meal after giving fasting sample. Please provide clinical details.

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.Sukumar Sannidhi
MD(Path)
Consultant Pathologist



Patient Name : Mrs.SHIVANI CHOUDHARY	Collected : 13/Jan/2024 07:54AM
Age/Gender : 30 Y 7 M 12 D/F	Received : 13/Jan/2024 11:56AM
UHID/MR No : CNIZ.0000113789	Reported : 13/Jan/2024 01:00PM
Visit ID : CKONOPV630490	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 00110695.	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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:

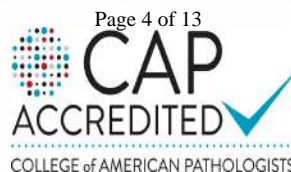
REFERENCE GROUP	HBA1C %
NON DIABETIC	<5.7
PREDIABETES	5.7 – 6.4
DIABETES	≥ 6.5
DIABETICS	
EXCELLENT CONTROL	6 – 7
FAIR TO GOOD CONTROL	7 – 8
UNSATISFACTORY CONTROL	8 – 10
POOR CONTROL	>10

Note: Dietary preparation or fasting is not required.

- 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)

Maruthi

Dr.E.Maruthi Prasad
PhD (Biochemistry)
Consultant biochemist



Patient Name : Mrs.SHIVANI CHOUDHARY	Collected : 13/Jan/2024 07:54AM
Age/Gender : 30 Y 7 M 12 D/F	Received : 13/Jan/2024 11:56AM
UHID/MR No : CNIZ.0000113789	Reported : 13/Jan/2024 01:00PM
Visit ID : CKONOPV630490	Status : Final Report
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DEPARTMENT OF BIOCHEMISTRY

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

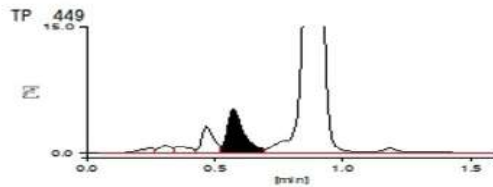
Chromatogram Report

V5.28 1 2024-01-13 12:30:36
 ID EDT240003684
 Sample No. 01130062 SL 0002 - 07
 Patient ID
 Name
 Comment

GALIB Y = 1.1565X + 0.5594			
Name	%	Time	Area
A1A	0.5	0.24	6.93
A1B	0.6	0.30	8.61
F	0.6	0.36	8.75
LA1C+	1.8	0.47	27.39
SA1C	5.3	0.57	62.96
A0	92.9	0.88	1388.49
H-V0			
H-V1			
H-V2			

Total Area 1503.13

HbA1c 5.3 % **IFCC 35 mmol/mol**
HbA1 6.4 % **HbF 0.6 %**



13-01-2024 12:30:37 APOLLO

APOLLO DIAGNOSTICS GLOBAL
BALNAGAR

1 / 1

Maruthi

Dr.E.Maruthi Prasad
 PhD (Biochemistry)
 Consultant biochemist



Patient Name : Mrs.SHIVANI CHOUDHARY	Collected : 13/Jan/2024 07:54AM
Age/Gender : 30 Y 7 M 12 D/F	Received : 13/Jan/2024 09:09AM
UHID/MR No : CNIZ.0000113789	Reported : 13/Jan/2024 10:19AM
Visit ID : CKONOPV630490	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 00110695.	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	168	mg/dL	<200	CHE/CHO/POD
TRIGLYCERIDES	74	mg/dL	<150	Enzymatic
HDL CHOLESTEROL	59	mg/dL	>40	CHE/CHO/POD
NON-HDL CHOLESTEROL	109	mg/dL	<130	Calculated
LDL CHOLESTEROL	94.2	mg/dL	<100	Calculated
VLDL CHOLESTEROL	14.8	mg/dL	<30	Calculated
CHOL / HDL RATIO	2.85		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 350mg/dl. When Triglycerides are more than 350 mg/dl LDL cholesterol is a direct measurement.



Dr.Sukumar Sannidhi
MD(Path)
Consultant Pathologist



Patient Name : Mrs.SHIVANI CHOUDHARY	Collected : 13/Jan/2024 07:54AM
Age/Gender : 30 Y 7 M 12 D/F	Received : 13/Jan/2024 09:09AM
UHID/MR No : CNIZ.0000113789	Reported : 13/Jan/2024 10:19AM
Visit ID : CKONOPV630490	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 00110695.	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.50	mg/dL	0.20-1.20	DIAZO METHOD
BILIRUBIN CONJUGATED (DIRECT)	0.30	mg/dL	0.0-0.3	Calculated
BILIRUBIN (INDIRECT)	0.20	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	17	U/L	<35	Visible with P-5-P
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	28.0	U/L	14-36	UV with P-5-P
ALKALINE PHOSPHATASE	86.00	U/L	38-126	p-nitrophenyl phosphate
PROTEIN, TOTAL	7.20	g/dL	6.3-8.2	Biuret
ALBUMIN	4.00	g/dL	3.5 - 5	Bromocresol Green
GLOBULIN	3.20	g/dL	2.0-3.5	Calculated
A/G RATIO	1.25		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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DEPARTMENT OF BIOCHEMISTRY

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



Dr.Sukumar Sannidhi
MD(Path)
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Patient Name : Mrs.SHIVANI CHOUDHARY	Collected : 13/Jan/2024 07:54AM
Age/Gender : 30 Y 7 M 12 D/F	Received : 13/Jan/2024 12:40PM
UHID/MR No : CNIZ.0000113789	Reported : 13/Jan/2024 01:30PM
Visit ID : CKONOPV630490	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 00110695.	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	0.66	mg/dL	0.66 - 1.09	Modified Jaffe, Kinetic
UREA	20.70	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	9.7	mg/dL	8.0 - 23.0	Calculated
URIC ACID	3.59	mg/dL	2.6-6.0	Uricase PAP
CALCIUM	9.20	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	3.62	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	136	mmol/L	136-146	ISE (Indirect)
POTASSIUM	4.4	mmol/L	3.5-5.1	ISE (Indirect)
CHLORIDE	107	mmol/L	101-109	ISE (Indirect)

Maruthi

Dr.E.Maruthi Prasad
PhD (Biochemistry)
Consultant biochemist



Patient Name : Mrs.SHIVANI CHOUDHARY	Collected : 13/Jan/2024 07:54AM
Age/Gender : 30 Y 7 M 12 D/F	Received : 13/Jan/2024 09:09AM
UHID/MR No : CNIZ.0000113789	Reported : 13/Jan/2024 09:27AM
Visit ID : CKONOPV630490	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE 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. Range	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	17.00	U/L	12-43	Glycylglycine Nitoranalide




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MD(Path)
Consultant Pathologist

Patient Name : Mrs.SHIVANI CHOUDHARY	Collected : 13/Jan/2024 07:54AM
Age/Gender : 30 Y 7 M 12 D/F	Received : 13/Jan/2024 09:09AM
UHID/MR No : CNIZ.0000113789	Reported : 13/Jan/2024 09:47AM
Visit ID : CKONOPV630490	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
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DEPARTMENT OF IMMUNOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM				
TRI-IODOTHYRONINE (T3, TOTAL)	0.77	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	7.54	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	2.590	µIU/mL	0.34-5.60	CLIA

Comment:

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

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

TSH	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



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Patient Name : Mrs.SHIVANI CHOUDHARY	Collected : 13/Jan/2024 07:54AM
Age/Gender : 30 Y 7 M 12 D/F	Received : 13/Jan/2024 09:31AM
UHID/MR No : CNIZ.0000113789	Reported : 13/Jan/2024 10:03AM
Visit ID : CKONOPV630490	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 00110695.	

DEPARTMENT OF CLINICAL PATHOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
COMPLETE URINE EXAMINATION (CUE) , URINE				
PHYSICAL EXAMINATION				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pH	7.5		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	1.005		1.002-1.030	Bromothymol Blue
BIOCHEMICAL EXAMINATION				
URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE		NEGATIVE	GLUCOSE OXIDASE
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING REACTION
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	SODIUM NITRO PRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	MODIFIED EHRlich REACTION
BLOOD	NEGATIVE		NEGATIVE	Peroxidase
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	POSITIVE +		NEGATIVE	LEUCOCYTE ESTERASE
CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY				
PUS CELLS	5-6	/hpf	0-5	Microscopy
EPITHELIAL CELLS	2-4	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY

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UHID/MR No : CNIZ.0000113789	Reported : 13/Jan/2024 10:16AM
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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. 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 *****

Result/s to Follow:
PERIPHERAL SMEAR




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