


Name : Mrs. Divyashree D S Address : bangalore Plan : ARCOFEMI MEDIWHEEL FEMALE AHC CREDIT PAN INDIA OP AGREEMENT	Age : 36 Y Sex : F	UHID :CINR.0000161909  <small>* CINR . 0000161909 *</small> OP Number :CINROPV217181 Bill No :CINR-OCR-93242 Date : 27.01.2024 08:32
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Sno	Service Type/ServiceName	Department
1	ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324	
1	URINE GLUCOSE(FASTING)	
2	GAMMA GLUTAMYL TRANSFERASE (GGT)	
3	HbA1c, GLYCATED HEMOGLOBIN	
4	2D ECHO - (V) 9'45 AM	
5	LIVER FUNCTION TEST (LFT)	
6	X-RAY CHEST PA - 10	
7	GLUCOSE, FASTING	
8	HEMOGRAM + PERIPHERAL SMEAR	
9	ENT CONSULTATION	
10	FITNESS BY GENERAL PHYSICIAN	
11	GYNAECOLOGY CONSULTATION ✓	
12	DIET CONSULTATION	
13	COMPLETE URINE EXAMINATION	
14	URINE GLUCOSE(POST PRANDIAL)	
15	PERIPHERAL SMEAR	
16	ECG	
17	BLOOD GROUP ABO AND RH FACTOR	
18	LIPID PROFILE	
19	BODY MASS INDEX (BMI)	
20	LBC PAP TEST- PAPSURE ✓	
21	OPHTHAL BY GENERAL PHYSICIAN	
22	RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)	
23	ULTRASOUND - WHOLE ABDOMEN	
24	THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)	
25	DENTAL CONSULTATION	
26	GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL)	

Def. Niramai Breast Screening

Date : 27-01-2024

Department : GENERAL

MR NO : CINR.0000161909

Doctor :

Name : Mrs. Divyashree D S

Registration No :

Age/ Gender : 36 Y / Female

Qualification :

Consultation Timing: 08:31

Height : 149 cm	Weight : 64.2 kg	BMI : 28.91 kg/m ²	Waist Circum : 94 cm
Temp : 98.6 °F	Pulse : 74 bpm	Resp : 18 bpm	B.P : 120 / 72 mmHg

General Examination / Allergies
History

Clinical Diagnosis & Management Plan

Jan 27/2024

36yrs, Pil, (MVD) R/cycles/ Lmp - Jan 15th
P/E

Adv

PA. Soft mtd

nivaman

Ps - Ca healthy

vit D3

LBC done

vit B12 . LBC

lap done

Tab

Acueal

x food intake

Follow up date:

Doctor Signature

72 bpm
--/-- mmHg

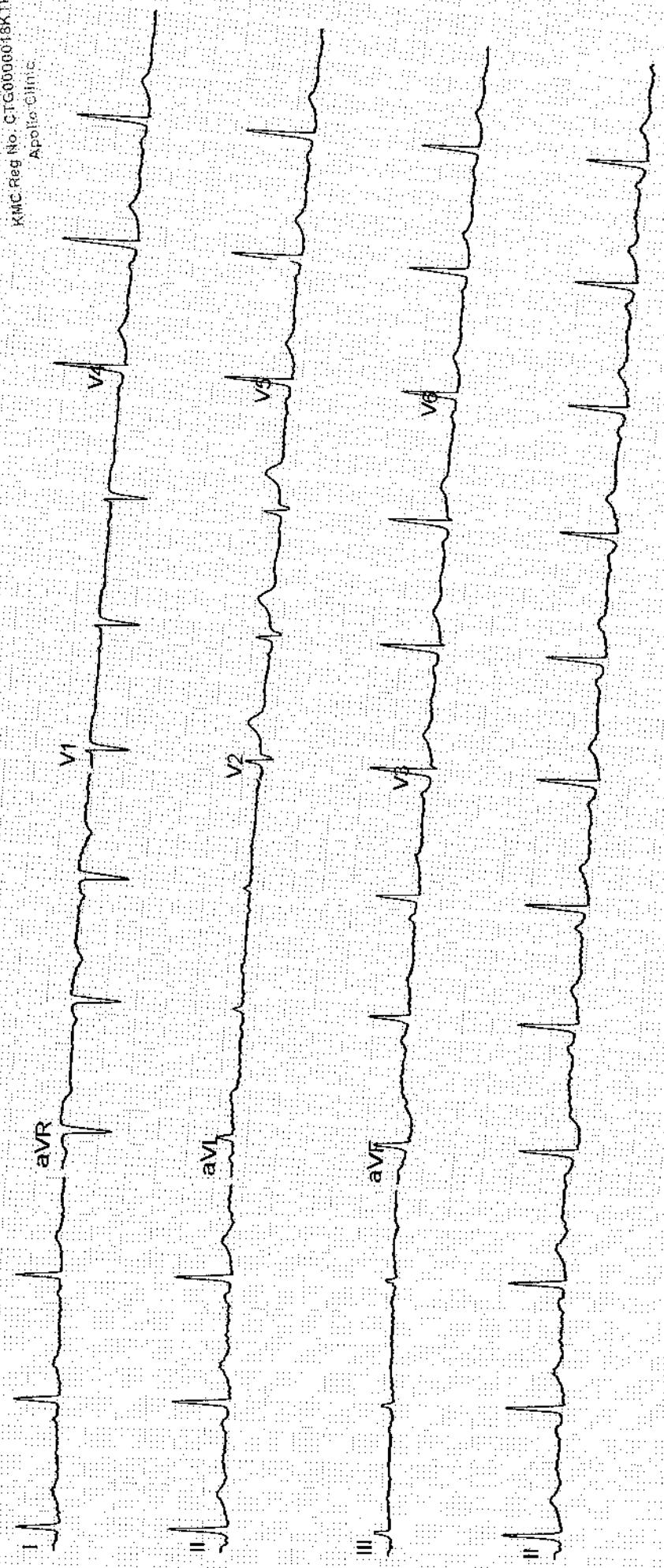
Technician:
Ordering Ph:
Referring Ph:
Attending Ph:

Normal



QRS 66 ms
QT/QTcBaz 388 / 424 ms
PR 148 ms
P 88 ms
RR/PP 830 / 833 ms
P/ORS/T 53 / 53 / 41 degrees

Dr. M. SUDHAKAR RAO
MBBS, MC, DM (Cardio), FACC, FESC, FSCAI
Consultant Cardiologist
KMC Reg No. CTG00000018KTK
Apollo Clinic




Apollo Clinic

CONSENT FORM

Patient Name: Mr. Arunachari D S Age: 36y
UHID Number: 161909 Company Name: Araafemi

I Mr/Mrs/Ms Arunachari D S Employee of Araafemi
(Company) Want to inform you that I am not interested in getting Skull X-Ray
Tests done which is a part of my routine health check package.

And I claim the above statement in my full consciousness.

Patient Signature:  Date: 27/1/23

OPHTHAL PRESCRIPTION

PATIENT NAME: *miss Divyashree DS.* DATE: *27/1/24*
UHID NO: *161909* AGE: *36*
OPTOMETRIST NAME: Ms.Swathi GENDER: *F*

This is to certify that I have examined
years and findings of his/her eye examination are as follows,

	RIGHT EYE				LEFT EYE			
	SPH	CYL	AXIS	BCVA	SPH	CYL	AXIS	BCVA
Distance	<i>-</i>	<i>pluo</i>				<i>pluo</i>		
Add								

PD - RE: *37* - LE: *37* -

Colour Vision: *normal (136)*

Remarks:

NAME: MRS DIVYA SHREE	AGE/SEX: 36Y/F	OP NUMBER: 161909
Ref By : SLEF	DATE: 27-01-2024	

M mode and doppler measurements:

CM	CM	M/sec	
AO: 2.1	IVS(D): 1.1	MV: E Vel: 0.9	A Vel : 0.5
LA: 2.6	LVIDD(D): 3.4	AV Peak: 0.8	
	LVPW(D):1.0	PV peak:0.6	
	IVS(S): 1.3		
	LVID(S):2.4		
	LVPW(S):1.4		
	LVEF: 60%		
	TAPSE:1.8		

Descriptive findings:

Left Ventricle	Normal
Right Ventricle:	Normal
Left Atrium:	Normal
Right Atrium:	Normal
Mitral Valve:	Normal
Aortic Valve:	Normal
Tricuspid Valve:	Normal
IAS:	Normal
IVS:	Normal

Pericardium:	Normal
IVC:	Normal
Others	---

IMPRESSION :

Normal cardiac chamber and valves

No Regional wall motion abnormality

No MR/AR/TR

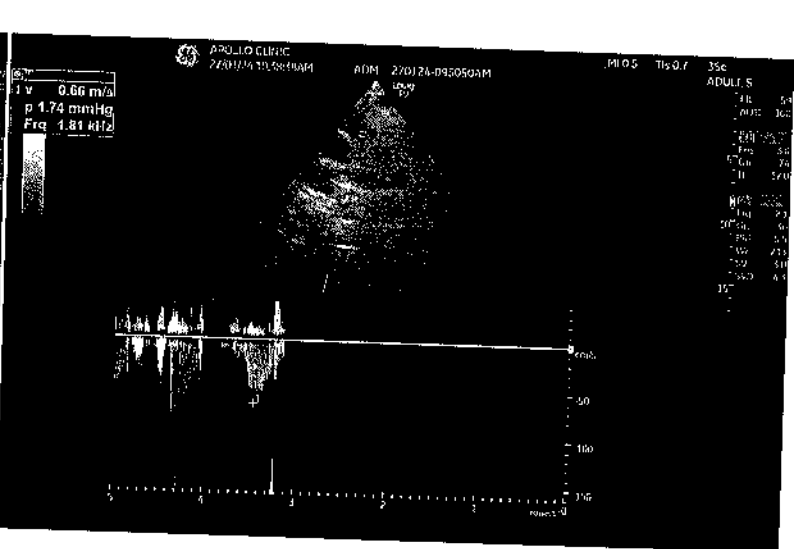
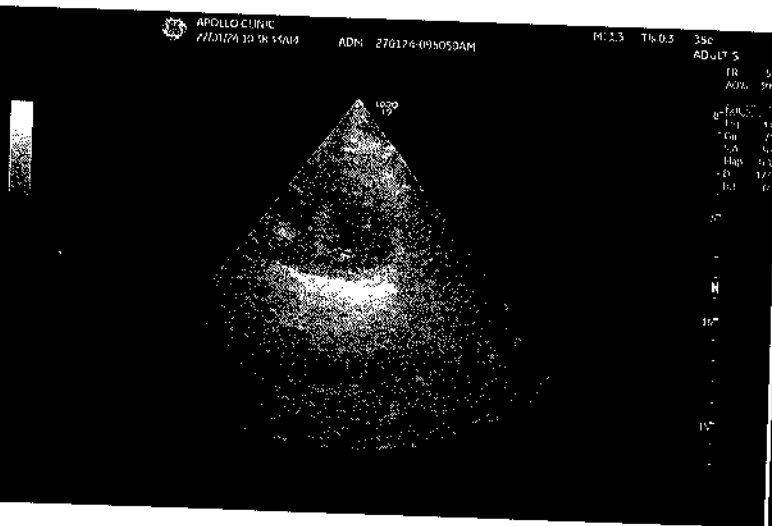
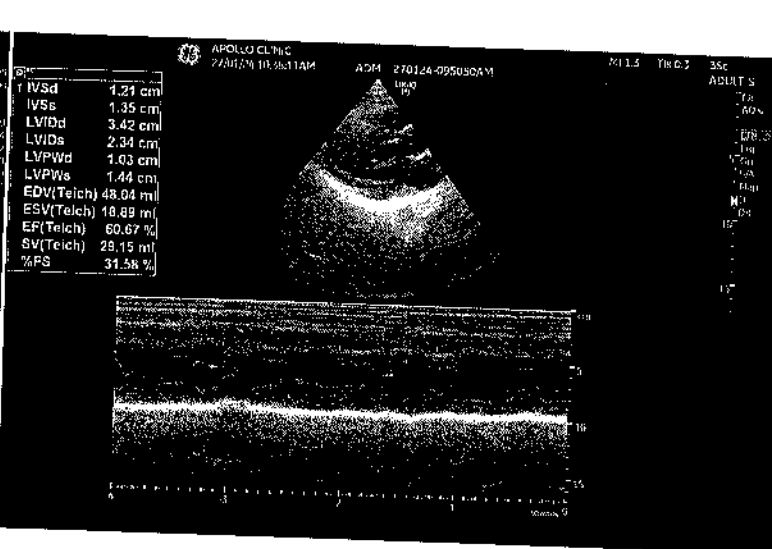
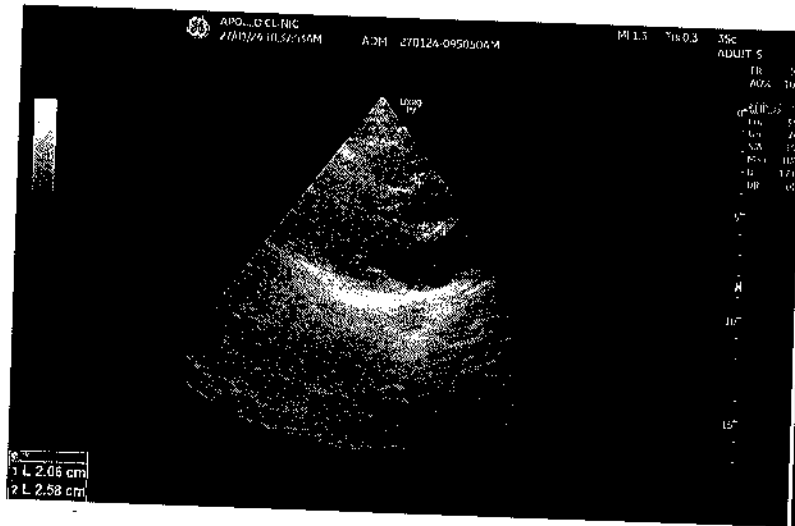
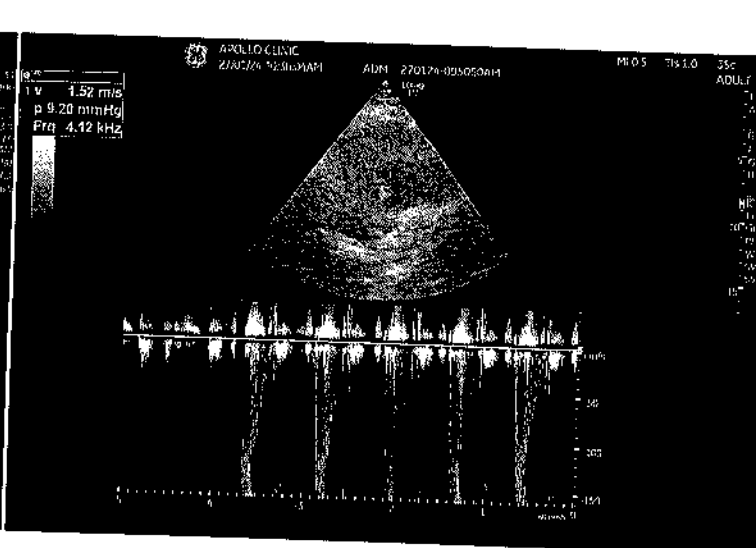
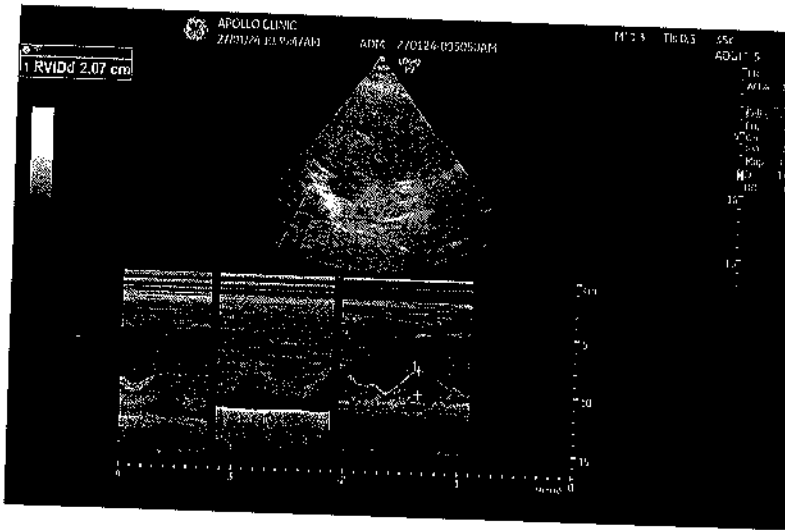
No clot/vegetation/pericardial effusion

Normal LV systolic function - LVEF= 60%

DR JAGADEESH H V MD,DM

CONSULTANT CARDIOLOGIST





HRM Dept Bengaluru Central Region

Subject:

FW: Health Check up Booking Confirmed Request(bobS5724),Package Code-PKG10000367, Beneficiary Code-260666

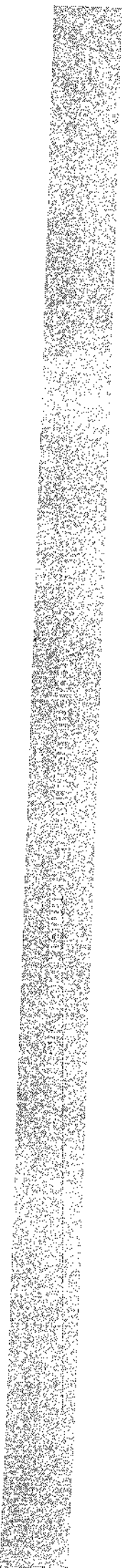
----- Forwarded message -----

From: Mediwheel <wellness@mediwheel.in>
Date: Sat, 20 Jan, 2024, 1:29 pm
Subject: Health Check up Booking Confirmed Request(bobS5724),Package Code-PKG10000367, Beneficiary Code-260666
To: <divyaarish.ds@gmail.com>
Cc: <customercare@mediwheel.in>

Dear DS,
to confirm your health checkup booking request with the following details.

- : 18-01-2024
- : Mediwheel Full Body Annual Plus Above 50 Male
- : Mediwheel Full Body Health Checkup Male Above 40
- : Apollo Clinic
- : 2012,1st floor, Above vision express, Next to Starbucks, 100 feet road, HAL 2nd stage, Indiranagar - 560038
- : Bangalore
- : 560038

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HRM Dept Bengaluru Central Region

Subject:

FW: Health Check up Booking Confirmed Request(bobE4915),Package Code-PKG10000377, Beneficiary Code-260666

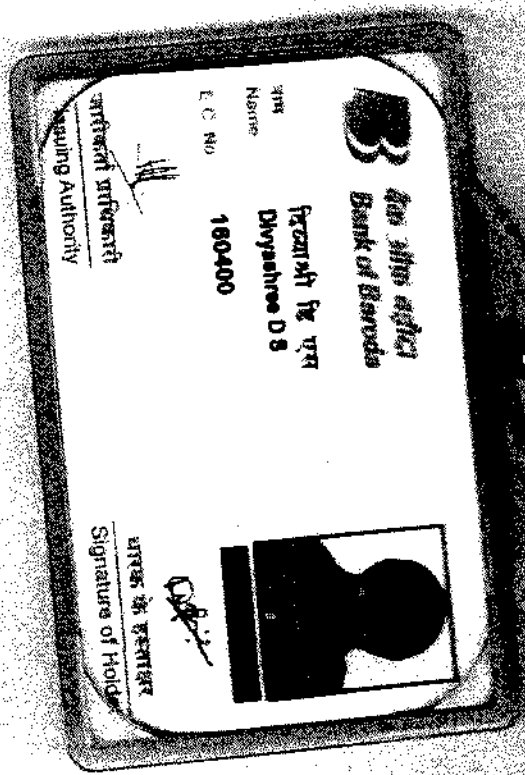
----- Forwarded message -----

From: Mediwheel <wellness@mediwheel.in>
Date: Fri, 19 Jan, 2024, 5:03 pm
Subject: Health Check up Booking Confirmed Request(bobE4915),Package Code-PKG10000377, Beneficiary Code-260666
To: <divyagirish.ds@gmail.com>
Cc: <customercare@mediwheel.in>

Divyashree D S,

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

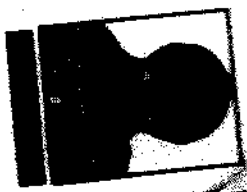
Booking Date : 10-01-2024
Original Package Name : Mediwheel Full Body Health Annual Plus Check
Current Package Name : Mediwheel Full Body Health Checkup Female Below 40
Name of Diagnostic/Hospital : Apollo Clinic
Address of Diagnostic/Hospital : 2012, 1st floor, Above vision express, Next to Starbucks, 100 feet road, HAL 2nd stage, Indiranagar - 560038
:
:
:
:
Code : 560038



Bank of Baroda
बँक ऑफ बरौडा

Name
Divyashree D S

E.O. No.
180400



Bank of Baroda
Issuing Authority

Signature of Holder



Patient Name : Mrs. Divyashree D S

Age/Gender : 36 Y/F

UHID/MR No. : CINR.0000161909

OP Visit No : CINROPV217181

Sample Collected on :

Reported on : 27-01-2024 16:55

LRN# : RAD2217671

Specimen :

Ref Doctor : SELF

Emp/Auth/TPA ID : 9164784227

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

NOT DONE.

Patient Name : Mrs. Divyashree D S

Age/Gender : 36 Y/F

UHID/MR No. : CINR.0000161909

OP Visit No : CINROPV217181

Sample Collected on :

Reported on : 27-01-2024 11:59

LRN# : RAD2217671

Specimen :

Ref Doctor : SELF

Emp/Auth/TPA ID : 9164784227

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

LIVER: Appears normal in size, **shape and show mild diffusely increased echogenicity.** No focal parenchymal lesions identified. No evidence of intra/extrahepatic biliary tree dilatation noted. Portal vein appears to be of normal size.

GALLBLADDER: Moderately distended. No definite calculi identified. No evidence of abnormal wall thickening noted.

SPLEEN: Appears normal in size, shape and echopattern. No focal parenchymal lesions identified.

PANCREAS: Obscured by bowel gas. However, the visualized portion appear normal.

KIDNEYS: Both kidneys appear normal in size, shape and echopattern. Corticomedullary differentiation appears maintained. No evidence of calculi or hydronephrosis on either side.

URINARY BLADDER: Distended and appears normal. No evidence of abnormal wall thickening noted.

UTERUS: Anteverted and appears normal in size. Myometrial echoes appear normal. The endometrial lining appears intact. Endometrium measures 6 mm.

OVARIES: Both ovaries appearing normal in size and echopattern.

No free fluid is seen.

IMPRESSION:

GRADE I FATTY LIVER.



Dr. DHANALAKSHMI B
MBBS, DMRD
Radiology

Patient Name : Mrs.DIVYASHREE D S	Collected : 27/Jan/2024 08:36AM
Age/Gender : 36 Y 3 M 22 D/F	Received : 27/Jan/2024 12:00PM
UHID/MR No : CINR.0000161909	Reported : 27/Jan/2024 01:39PM
Visit ID : CINROPV217181	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9164784227	

DEPARTMENT OF HAEMATOLOGY

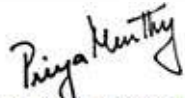
ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Status	Unit	Bio. Ref. Range	Method
HEMOGRAM , WHOLE BLOOD EDTA					
HAEMOGLOBIN	13.2	L	g/dL	12-15	Spectrophotometer
PCV	38.00	L	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.48	L	Million/cu.mm	3.8-4.8	Electrical Impedance
MCV	84.7	L	fL	83-101	Calculated
MCH	29.4	L	pg	27-32	Calculated
MCHC	34.7	H	g/dL	31.5-34.5	Calculated
R.D.W	12.4	L	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	7,760	L	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)					
NEUTROPHILS	54.7	L	%	40-80	Electrical Impedance
LYMPHOCYTES	33.5	L	%	20-40	Electrical Impedance
EOSINOPHILS	1.6	L	%	1-6	Electrical Impedance
MONOCYTES	9.5	L	%	2-10	Electrical Impedance
BASOPHILS	0.7	L	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT					
NEUTROPHILS	4244.72	L	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2599.6	L	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	124.16	L	Cells/cu.mm	20-500	Calculated
MONOCYTES	737.2	L	Cells/cu.mm	200-1000	Calculated
BASOPHILS	54.32	L	Cells/cu.mm	0-100	Calculated
PLATELET COUNT	243000	L	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	18	L	mm at the end of 1 hour	0-20	Modified Westegren method
PERIPHERAL SMEAR		L			

RBCs: are normocytic normochromic



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



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



SIN No: BED240019298

THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFESTYLE LIMITED- RRL BANGALORE

Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)
Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016 |
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APOLLO CLINICS NETWORK

Telangana: Hyderabad (AS Rao Nagar | Chanda Nagar | Kondapur | Nallakunta | Nizampet | Manikonda | Uppal) | Andhra Pradesh: Vizag (Seethamma Peta) | Karnataka: Bangalore (Basavanagudi | Bellandur | Electronics City | Fraser Town | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli | Koramangala | Sarjapur Road) | Mysore (VV Mohalla) | Tamilnadu: Chennai (Annanagar | Kotturpuram | Mogappair | T Nagar | Valasaravakkam | Velachery) | Maharashtra: Pune (Aundh | Nigdi Pradhikaran | Viman Nagar | Wanowrie) | Uttar Pradesh: Ghaziabad (Indrapuram) | Gujarat: Ahmedabad (Satellite) | Punjab: Amritsar (Court Road) | Haryana: Faridabad (Railway Station Road)

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

 1860 500 7788
www.apolloclinic.com

Patient Name : Mrs.DIVYASHREE D S	Collected : 27/Jan/2024 08:36AM
Age/Gender : 36 Y 3 M 22 D/F	Received : 27/Jan/2024 12:00PM
UHID/MR No : CINR.0000161909	Reported : 27/Jan/2024 01:39PM
Visit ID : CINROPV217181	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9164784227	

DEPARTMENT OF HAEMATOLOGY

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

WBCs: are normal in total number with normal distribution and morphology.

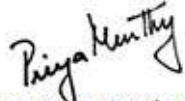
PLATELETS: appear adequate in number.

HEMOPARASITES: negative

IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE



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



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



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UHID/MR No : CINR.0000161909	Reported : 27/Jan/2024 03:21PM
Visit ID : CINROPV217181	Status : Final Report
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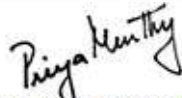
DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Status	Unit	Bio. Ref. Range	Method
BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA					
BLOOD GROUP TYPE	B	N			Microplate Hemagglutination
Rh TYPE	Positive	N			Microplate Hemagglutination



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



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Consultant Pathologist



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UHID/MR No : CINR.0000161909	Reported : 27/Jan/2024 01:17PM
Visit ID : CINROPV217181	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9164784227	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Status	Unit	Bio. Ref. Range	Method
GLUCOSE, FASTING , NAF PLASMA	91	L	mg/dL	70-100	HEXOKINASE

Comment:

As per American Diabetes Guidelines, 2023

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

Note:

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

Test Name	Result	Status	Unit	Bio. Ref. Range	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	193	L	mg/dL	70-140	HEXOKINASE

Comment:

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

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

Test Name	Result	Status	Unit	Bio. Ref. Range	Method
HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA					
HBA1C, GLYCATED HEMOGLOBIN	6	H	%		HPLC




DR.SHIVARAJA SHETTY
M.B.B.S,M.D(Biochemistry)
CONSULTANT BIOCHEMIST

SIN No:EDT240008141

THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFESTYLE LIMITED- RRL BANGALORE

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Age/Gender : 36 Y 3 M 22 D/F	Received : 27/Jan/2024 12:01PM
UHID/MR No : CINR.0000161909	Reported : 27/Jan/2024 01:17PM
Visit ID : CINROPV217181	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9164784227	

DEPARTMENT OF BIOCHEMISTRY

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

ESTIMATED AVERAGE GLUCOSE (eAG)	126	N	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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Patient Name : Mrs.DIVYASHREE D S	Collected : 27/Jan/2024 08:36AM
Age/Gender : 36 Y 3 M 22 D/F	Received : 27/Jan/2024 11:49AM
UHID/MR No : CINR.0000161909	Reported : 27/Jan/2024 01:14PM
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DEPARTMENT OF BIOCHEMISTRY

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


Test Name	Result	Status	Unit	Bio. Ref. Range	Method
LIPID PROFILE , SERUM					
TOTAL CHOLESTEROL	163	L	mg/dL	<200	CHO-POD
TRIGLYCERIDES	109	L	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	41	L	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	122	L	mg/dL	<130	Calculated
LDL CHOLESTEROL	100.5	H	mg/dL	<100	Calculated
VLDL CHOLESTEROL	21.8	L	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.98	L		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.



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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Status	Unit	Bio. Ref. Range	Method
LIVER FUNCTION TEST (LFT) , SERUM					
BILIRUBIN, TOTAL	1.02	L	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.16	L	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.86	L	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	26	L	U/L	<35	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	26.0	L	U/L	<35	IFCC
ALKALINE PHOSPHATASE	53.00	L	U/L	30-120	IFCC
PROTEIN, TOTAL	7.32	L	g/dL	6.6-8.3	Biuret
ALBUMIN	4.37	L	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.95	L	g/dL	2.0-3.5	Calculated
A/G RATIO	1.48	L		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:




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Patient Name : Mrs.DIVYASHREE D S
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Visit ID : CINROPV217181
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : 9164784227

Collected : 27/Jan/2024 08:36AM
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• 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

Test Name	Result	Status	Unit	Bio. Ref. Range	Method
RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM					
CREATININE	0.64	L	mg/dL	0.51-0.95	Jaffe's, Method
UREA	15.60	L	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	7.3	L	mg/dL	8.0 - 23.0	Calculated
URIC ACID	5.55	L	mg/dL	2.6-6.0	Uricase PAP
CALCIUM	9.20	L	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	3.41	L	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	135	L	mmol/L	136-146	ISE (Indirect)
POTASSIUM	4.1	L	mmol/L	3.5-5.1	ISE (Indirect)
CHLORIDE	102	L	mmol/L	101-109	ISE (Indirect)



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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Status	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	22.00	L	U/L	<38	IFCC



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DEPARTMENT OF IMMUNOLOGY

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


Test Name	Result	Status	Unit	Bio. Ref. Range	Method
THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM					
TRI-IODOTHYRONINE (T3, TOTAL)	1.17	L	ng/mL	0.64-1.52	CMIA
THYROXINE (T4, TOTAL)	8.79	L	µg/dL	4.87-11.72	CMIA
THYROID STIMULATING HORMONE (TSH)	1.800	L	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

- 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
High	High	High	High	Pituitary Adenoma; TSHoma/Thyrotropinoma

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www.apolloclinic.com

Patient Name : Mrs.DIVYASHREE D S	Collected : 27/Jan/2024 08:36AM
Age/Gender : 36 Y 3 M 22 D/F	Received : 27/Jan/2024 11:48AM
UHID/MR No : CINR.0000161909	Reported : 27/Jan/2024 03:27PM
Visit ID : CINROPV217181	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9164784227	

DEPARTMENT OF CLINICAL PATHOLOGY

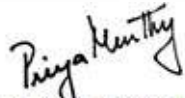
ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Status	Unit	Bio. Ref. Range	Method
COMPLETE URINE EXAMINATION (CUE) , URINE					
PHYSICAL EXAMINATION					
COLOUR	PALE YELLOW	N		PALE YELLOW	Visual
TRANSPARENCY	CLEAR	N		CLEAR	Visual
pH	5.5	L		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	1.025	L		1.002-1.030	Bromothymol Blue
BIOCHEMICAL EXAMINATION					
URINE PROTEIN	NEGATIVE	N		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE	N		NEGATIVE	GLUCOSE OXIDASE
URINE BILIRUBIN	NEGATIVE	N		NEGATIVE	AZO COUPLING REACTION
URINE KETONES (RANDOM)	NEGATIVE	N		NEGATIVE	SODIUM NITRO PRUSSIDE
UROBILINOGEN	NORMAL	N		NORMAL	MODIFIED EHRlich REACTION
BLOOD	NEGATIVE	N		NEGATIVE	Peroxidase
NITRITE	NEGATIVE	N		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE	N		NEGATIVE	LEUCOCYTE ESTERASE
CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY					
PUS CELLS	1-2	L	/hpf	0-5	Microscopy
EPITHELIAL CELLS	2-3	N	/hpf	<10	MICROSCOPY
RBC	NIL	N	/hpf	0-2	MICROSCOPY
CASTS	NIL	L		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT	N		ABSENT	MICROSCOPY

Page 13 of 15



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



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



SIN No: UR2268906

THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFESTYLE LIMITED- RRL BANGALORE

Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)
Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016 |
www.apollohl.com | Email ID: enquiry@apollohl.com, Ph No: 040-4904 7777, Fax No: 4904 7744

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)

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

 1860 500 7788
www.apolloclinic.com

Patient Name : Mrs.DIVYASHREE D S	Collected : 27/Jan/2024 08:36AM
Age/Gender : 36 Y 3 M 22 D/F	Received : 27/Jan/2024 11:48AM
UHID/MR No : CINR.0000161909	Reported : 27/Jan/2024 12:25PM
Visit ID : CINROPV217181	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9164784227	

DEPARTMENT OF CLINICAL PATHOLOGY

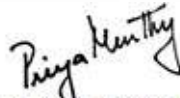
ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324

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

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



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



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



SIN No: UF010327

THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFESTYLE LIMITED- RRL BANGALORE

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

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

Patient Name : Mrs.DIVYASHREE D S	Collected : 27/Jan/2024 02:17PM
Age/Gender : 36 Y 3 M 22 D/F	Received : 28/Jan/2024 04:51PM
UHID/MR No : CINR.0000161909	Reported : 30/Jan/2024 01:37PM
Visit ID : CINROPV217181	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9164784227	

DEPARTMENT OF CYTOLOGY

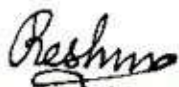
LBC PAP TEST (PAPSURE) , CERVICAL BRUSH SAMPLE

	CYTOLOGY NO.	1673/24
I	SPECIMEN	
a	SPECIMEN ADEQUACY	ADEQUATE
b	SPECIMEN TYPE	LIQUID-BASED PREPARATION (LBC)
	SPECIMEN NATURE/SOURCE	CERVICAL SMEAR
c	ENDOCERVICAL-TRANSFORMATION ZONE	ABSENT
d	COMMENTS	SATISFACTORY FOR EVALUATION
II	MICROSCOPY	Superficial and intermediate squamous epithelial cells with benign morphology. Negative for intraepithelial lesion/ malignancy.
III	RESULT	
a	EPITHEIAL CELL	
	SQUAMOUS CELL ABNORMALITIES	NOT SEEN
	GLANDULAR CELL ABNORMALITIES	NOT SEEN
b	ORGANISM	NIL
IV	INTERPRETATION	NEGATIVE FOR INTRAEPITHELIAL LESION OR MALIGNANCY

Pap Test is a screening test for cervical cancer with inherent false negative results. Regular screening and follow-up is recommended (Bethesda-TBS-2014) revised

*** End Of Report ***

Result/s to Follow:
PERIPHERAL SMEAR



Dr. Reshma Stanly
M.B.B.S, DNB(Pathology)
Consultant Pathologist

SIN No:CS073561

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

THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFESTYLE LIMITED- RRL BANGALORE

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