

Name : Mr. SUBHABRATA DASGUPTA (30 /M)

Date : 08/11/2024

Address :

Examined by: Dr .SUCHISMITA BHAUMIK

UHID : AMHL.0002450057

Package : MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS HCK

AHC No : AMHLAH225862



CHIEF COMPLAINTS

For corporate health checkup
No specific complaints

PRESENT KNOWN ILLNESS

No history of - Diabetes mellitus,
Dyslipidemia, Thyroid
disorder, Heart disease,
Asthma
Hypertension Since - 2022; Medication -
regular



DRUG ALLERGY

NO KNOWN ALLERGY :08/11/2024



SYSTEMIC REVIEW

Cardiovascular system

- Nil Significant

Respiratory system

- Nil Significant

Gastrointestinal system

Appetite - normal; Symptoms - acidity, bloating;
Bowel habits - not regular; Piles - no

Genitourinary system

- Nil Significant

Eyes

Vision - normal with glasses

ENT

- Nil Significant

Musculoskeletal system

Spine and joints
- Nil Significant

Skin

- Nil Significant



Present medications

- T CTD MT 6.25/50/40



Past medical history

Covid 19 - No
Jaundice - 2003
Dengue - 2013



Surgical history

Others - Surgery for lymphangioma
in childhood



Personal history

Marital status - Married
Diet - Non Vegetarian
Alcohol - does not consume alcohol
Smoking - No
Chews tobacco - No
Physical activity - Active



Family history

Father - has expired
Mother - alive
Diabetes - father
Hypertension - mother
Coronary artery
disease - father
Cancer - None

PHYSICAL EXAMINATION



General

Build - obese
Height - 168
Weight - 103
BMI - 36.49
Pallor - No
Oedema - no



Cardiovascular system

Heart rate (Per minute) - 77
Rhythm - Regular
- B.P. Sitting
Systolic(mm of Hg) - 137
Diastolic(mm of Hg) - 109
Heart sounds - S1S2+

Respiratory system

Breath sounds - Normal vesicular breath sounds



Abdomen

Organomegaly - No
Tenderness - No



Skin

- No significant finding

Ophthalmology consultation

Ophthalmology findings - OCULAR MOVEMENTS:
(RE):FULL (LE):FULL
ANTERIOR SEGMENTS:
(RE):WNL (LE):WNL
VISUAL ACUITY
DISTANCE:WITH GLASS
(RE):6/6 (LE):6/6 VISUAL
ACUITY NEAR:WITHOUT
GLASS (RE):N6 (LE):N6
ADVICE:*To continue
present glass*Detail
funduscopy*Review after
1yr/SOS

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COMPLETE HAEMOGRAM

Test Name	Result	Unit	Level	Range
Hemoglobin	14.0	g/dl	●	13.0-17.0
RBC COUNT	4.93	Million/ ul	●	4.5-5.5
Hematocrit - Hct:	45.4	%	●	41-53
MCV	92.1	fl	●	83-101
MCH	28.4	pg	●	27-32
MCHC	30.8 *	%	●	31.5-34.5
RDW	13.6	%	●	11.8-14.0
WBC Count	9100	/cu mm	●	4000-10000
Platelet Count	2.10	lacs/cu mm	●	1.5-4.0
Neutrophils	60	%	●	40-80
Lymphocytes	26	%	●	20-40
Monocytes	05	%	●	2-10
Eosinophils	09 *	%	●	01-06
Basophils	00	%	●	0-0
RBC:	Normocytic Normochromic cells			
WBC:	Eosinophilia noted			
Platelets:	Adequate.			

ERYTHROCYTE SEDIMENTATION RATE (ESR)

Test Name	Result	Unit	Level	Range
ERYTHROCYTE SEDIMENTATION RATE (ESR)	21 *	mm/1st hr	●	0-15

URINE ROUTINE AND MICROSCOPY

Test Name	Result	Unit	Level	Range
Volume:	50	mL		
Colour:	Pale Straw			
Appearance	Slightly Turbid			
Specific Gravity	1.005			
pH:	6.0			
Albumin:	Not Detected			
Glucose	Not Detected			
Ketone:	Not Detected			
Bile Pigments	Not Detected			
RBC	Nil	/hpf		

Pus Cells	Occasional/hpf
Epithelial Cells	Occasional/hpf
Casts:	Not Found
Crystals:	Not Found

URINE SUGAR - POST PRANDIAL (QUALITATIVE)

Test Name	Result	Unit	Level	Range
URINE GLUCOSE(POST PRANDIAL)	Nil			

URINE SUGAR- FASTING(QUALITATIVE)

Test Name	Result	Unit	Level	Range
URINE GLUCOSE(FASTING)	Nil			

BLOOD GROUPING AND TYPING (ABO AND RH)

Test Name	Result	Unit	Level	Range
ABO Group:	AB			
Rh (D) Type:	POSITIVE			

ALT(SGPT) - SERUM

Test Name	Result	Unit	Level	Range
ALT(SGPT) - SERUM	37	U/L	●	0-50

ALBUMIN - SERUM

Test Name	Result	Unit	Level	Range
ALBUMIN - SERUM	4.6	g/dL	●	3.5-5.1

ALKALINE PHOSPHATASE - SERUM

Test Name	Result	Unit	Level	Range
ALKALINE PHOSPHATASE - SERUM	83	U/L	●	43-115

AST (SGOT) - SERUM

Test Name	Result	Unit	Level	Range
AST (SGOT) - SERUM	27	U/L	●	0-50

BILIRUBIN, TOTAL - SERUM

Test Name	Result	Unit	Level	Range
BILIRUBIN TOTAL - SERUM	1.1	mg/dL	●	0.3-1.2

● Within Normal Range ● Borderline High/Low ● Out of Range

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CHOLESTEROL - SERUM

Test Name	Result	Unit	Level	Range
CHOLESTEROL - SERUM	141	mg/dL	●	0-200
Non-HDL Cholesterol	105			

Test Name

Test Name	Result	Unit	Level	Range
LDL CHOLESTEROL -SERUM	94	mg/dL	●	Optimal: <100
VLDL CHOLESTEROL - SERUM (Calculated)	11	mg/dL	●	0-35

CREATININE - SERUM

Test Name	Result	Unit	Level	Range
CREATININE - SERUM	1.0	mg/dL	●	0.9-1.3

PROTEIN TOTAL - SERUM

Test Name	Result	Unit	Level	Range
PROTEIN TOTAL - SERUM	7.6	g/dL	●	6.4-8.3
Albumin/Globulin Ratio	1.5		●	1.0-2.0
GLOBULIN: (CALCULATED) - SERUM	3.0	g/dL	●	1.8-3.6

GGTP: GAMMA GLUTAMYL TRANSPEPTIDASE - SERUM

Test Name	Result	Unit	Level	Range
GGTP: GAMMA GLUTAMYL TRANSPEPTIDASE - SERUM	22	U/L	●	0-55

TOTAL T3: TRI IODOTHYRONINE - SERUM

Test Name	Result	Unit	Level	Range
TOTAL T3: TRI IODOTHYRONINE - SERUM (Chemiluminescence)	0.89	ng/ml	●	0.87-1.78

GLUCOSE - PLASMA (FASTING)

Test Name	Result	Unit	Level	Range
GLUCOSE - PLASMA (FASTING)	88	mg/dL	●	70-99

TOTAL T4: THYROXINE - SERUM

Test Name	Result	Unit	Level	Range
TOTAL T4: THYROXINE - SERUM (Chemiluminescence)	10.28	µg/dL	●	5.48-14.28

GLUCOSE - PLASMA (POST PRANDIAL)

Test Name	Result	Unit	Level	Range
GLUCOSE - PLASMA (POST PRANDIAL)	111	mg/dL	●	70-140

HBA1C (GLYCOSYLATED HAEMOGLOBIN)-WHOLE BLOOD

Test Name	Result	Unit	Level	Range
HBA1C (GLYCOSYLATED HAEMOGLOBIN)-WHOLE BLOOD	5.4	%	●	Nondiabetic : 4 - 5.6 % Prediabetics : 5.7 - 6.4% Diabetes : >= 6.5% ADA Therapeutic goal : <7%

TRIGLYCERIDES - SERUM

Test Name	Result	Unit	Level	Range
TRIGLYCERIDES - SERUM	73	mg/dL	●	0-150

TSH: THYROID STIMULATING HORMONE - SERUM

Test Name	Result	Unit	Level	Range
TSH: THYROID STIMULATING HORMONE - SERUM (Chemiluminescence)	2.66	µIU/mL	●	0.38-5.33

HDL CHOLESTEROL - SERUM

Test Name	Result	Unit	Level	Range
HDL CHOLESTEROL - SERUM	36	mg/dL	●	30-70
TC/HDL-C ratio serum	4 *		●	Optimal<3.5

URIC ACID - SERUM

Test Name	Result	Unit	Level	Range
URIC ACID - SERUM	8.2 *	mg/dL	●	2.6-7.2

LDL CHOLESTEROL -SERUM

BILIRUBIN CONJUGATED (DIRECT) - SERUM

Test Name	Result	Unit	Level	Range

● Within Normal Range ● Borderline High/Low ● Out of Range

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BILIRUBIN 0.2 mg/dL ● 0.0-0.2
CONJUGATED
(DIRECT) - SERUM

BUN (BLOOD UREA NITROGEN)

Test Name	Result	Unit	Level	Range
BUN (BLOOD UREA NITROGEN)	16.4	mg/dL	●	7.0-18.0
UREA - SERUM	35	mg/dL	●	13-43

BUN/CREATININE RATIO

Test Name	Result	Unit	Level	Range
BUN/CREATININE RATIO	16.4			
BUN (BLOOD UREA NITROGEN)	16.4	mg/dL	●	7.0-18.0
UREA - SERUM	35	mg/dL	●	13-43
CREATININE - SERUM	1.0	mg/dL	●	0.9-1.3

ULTRASOUND SCREENING WHOLE ABDOMEN

- * Grade I fatty liver.
- * Bilateral renal cyst.

[NOTE: At times pelvic structures are not well visualized due to inadequate patient preparation / excess bowel gas shadow. However suggested clinical correlation and other investigations if clinically indicated.]

Dr. MOURUSI MANDAL
DNB RESIDENT
In consultation with

Dr. SANJIB MAJUMDAR
MD (RADIODIAGNOSIS)
CONSULTANT RADIOLOGIST
Reg. No. 56991 (WBMC)

ECG

NORMAL SINUS RHYTHM, WITHIN NORMAL LIMITS.

X-RAY CHEST PA

* Chest skiagram does not reveal any significant abnormality.

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INVESTIGATIONS NOT DONE / NOT YET REPORTED / NOT PART OF PACKAGE(LAB,RADIOLOGY & CARDIOLOGY)

Biochemistry

A/G - RATIO

Histopathology

PAP SMEAR /CERVICAL SMEAR

CARDIOLOGY

TREADMILL TEST / STRESS TEST

● Within Normal Range ● Borderline High/Low ● Out of Range

Executive Summary



1. H/O Hypertension - on medication.
2. Obesity.
3. Eosinophilia.
4. Hyperuricaemia.
5. USG - A. Grade I fatty liver.
B. Bilateral renal cyst.

Wellness Prescription

Advice On Diet :-



- * Low fat, low calorie, low salt, low purine healthy balanced diet.
- * Drink plenty of fluids.

Advice On Physical Activity :-



- * Regular exercise and maintain ideal weight.

Other Lifestyle Changes & Recommendations :-

- * Monitor BP regularly, if persistently greater than 140/90 mmHg then consult Physician.
- * Weight reduction advised.

Medications

- * To continue home medication as before.

Recommended Follow-up Tests

Test Name	Test Schedule	Repeat Frequency	Remarks
TC,DC	4 Week(s)		Review with report.
LIPID PROFILE TEST (PACKAGE)	4 Month(s)		Review with report.
URIC ACID - SERUM	4 Month(s)		Review with report.

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Follow-up and Review Plan



* Annual health check-up.



Scan the QR code
in AskApollo App
to book your
follow-up
appointments and
investigations

Printed By : AVIJIT DAS

Dr.SUCHISMITA BHAUMIK
AHC Physician / Consultant Internal Medicine

Note :- The Health Check-up 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.

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Dr.SUCHISMITA BHAUMIK

AHC Physician / Consultant Internal Medicine

AICVD RISK SCORE REPORT

RISK STATUS

High Risk

YOUR SCORE

6

ACCEPTABLE SCORE

3

Your likelihood of developing cardiovascular disease in the next ten years is 1.6 times higher than the people of your age and gender

The AICVD risk score developed by Apollo Hospitals is a novel artificial intelligence-based risk scoring system that predicts your risk of having Coronary Artery Disease (CAD) related events in the next ten years. This scoring system uses Indian data and has been validated by multiple national and international institutions. This risk score is more than 92% accurate and has been compiled based on your physical parameters, heart health attributes, lifestyle and medical history. **Note:** The risk category is determined through the ratio between guest score and acceptable score at multiple decimal points. The outputs are shown in whole numbers.

Based on your AICVD risk score you are advised the following:

- Follow the guidance and education on **lifestyle and dietary management provided through the ProHealth program. Maintain a healthy BMI (<25). Avoid tobacco in any form and if you are a smoker, stop smoking.**
- Continue with **medications** for high blood pressure, diabetes, or dyslipidemia, if advised by your physician. Maintain HbA1c <7% (<53mmol/mol), blood pressure <140/90mmHg.
- Follow your physician's advice regarding **follow up tests, consults and annual health assessment**
- **It is recommended that you visit your physician every 3 months** if you have:
 - o Uncontrolled high blood pressure
 - o Diabetes
 - o Dyslipidemia
 - o Coronary heart disease
- You will be referred to a **cardiologist**.

DISCLAIMER

1. This is not a diagnostic tool and it does not guarantee accuracy of the result and cannot be acted upon independently.
2. This risk score and clinical algorithm is a general guideline for physicians. Any additional laboratory investigations, diagnostic imaging, treatment or patient education related to lifestyle management is under the physician's or cardiologist's discretion.
3. To ensure the information in the report is up to date, accurate and correct, doctor shall be consulted for interpretation of the report.
4. Apollo Hospitals and its staff does not offer any assurance on the information made available or be liable for any loss or damage as the said report is based on the AICVD risk score without any intervention from their side.
5. By usage of the AICVD risk score, it is deemed that the beneficiary of this service has agreed to get the same done at his own risk and further agrees with this disclaimer without any limitation or any clauses or sub-clauses.

The Clinical AI Models and APIs used at Apollo Hospitals are certified by ISO 13485 : 2016 vide certificate no. MD 763515