Name : Mr. SUSANTA MAJUMDER (50 /M) Date : 08/03/2025

Address

Examined by: UHID : AMHL.0002050936

Package : MEDIWHEEL - FULL BODY ANNUAL PLUS WITH TMT MALE HCK AHC No: AMHLAH237975



For corporate health checkup

PRESENT KNOWN ILLNESS

No history of - Diabetes mellitus,

Dyslipidemia, Thyroid

disorder

Medication - regular Hypertension



SYSTEMIC REVIEW

Cardiovascular system

- Nil Significant

Respiratory system

- Nil Significant

Gastrointestinal system

- Nil Significant

Genitourinary system

- Nil Significant

Central nervous system

- Nil Significant

Eyes

Vision - normal with glasses; Glasses - yes

ENT

- Nil Significant

Musculoskeletal system

Spine and joints

- Nil Significant

Skin

- Nil Significant



Present medications

- SNumlo 2.5



Cholecystectomy - yes



Personal history

Marital status - Single Diet - Vegetarian

- does not consume alcohol Alcohol

- No **Smoking** Chews tobacco - No Physical activity - Mild



Family history

Father - has expired

Mother - alive Hypertension - mother Coronary artery - none

disease

Cancer None

PHYSICAL EXAMINATION



General

Height - 163 Weight - 64 BMI - 24.09 Pallor - No Oedema - no



Cardiovascular system

Heart rate (Per minute) - 69 Rhythm - Regular - B.P. Sitting

Systolic(mm of Hg) - 110 Diastolic(mm of Hg) - 74 Heart sounds - S1S2+

Respiratory system

Breath sounds - Normal vesicular breath sounds



Organomegaly - No Name : Mr. SUSANTA MAJUMDER (50 /M) UHID : AMHL.0002050936 Date : 08/03/2025

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Tenderness - No

Opthalmology consultation

Opthalmology findings

- OCULAR MOVEMENTS: (RE):FULL (LE):FULL ANTERIOR SEGMENTS: (RE):WNL (LE):WNL VISUAL ACUITY DISTANCE:WITH GLASS

DISTANCE:WITH GLASS (RE):6/9 (LE):6/9 VISUAL ACUITY NEAR:WITH GLASS (RE):N6p (LE):N6p SPECTACLE POWER: RE: +0.75/+0.25x10*(6/6) LE: +0.75/+0.25x160*(6/6) ADD:

+2.00DSPH(N6)

ADVICE:*Glass Rx*Review

after 1yr/SOS

Printed By: Benazir Begaum

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| OMPLETE HAEMO | | | | Damma | Casts: | Not Fou | na | | |
|--|----------------|-------------|---------|--------------------|----------------------------|-----------|--------------------|-------|-------------------|
| Test Name | Result 16.0 | g/dl | Level | Range 13.0-17.0 | Crystals: | Not Fou | nd | | |
| Hemoglobin RBC COUNT | 5.25 | Millio | on/ | 4.5-5.5 | URINE SUGAR - POS | T PRAN | DIAL | | |
| | 47.4 | ul | | 44.50 | (QUALITATIVE) Test Name | Result | l Init | Lovel | Range |
| Hematocrit - Hct: | 47.4 | % | | 41-53 | URINE | Nil | Offic | Levei | Kange |
| MCV | 90.3 | fl | | 83-101 | GLUCOSE(POST | IVII | | | |
| MCH | 30.5 | pg | | 27-32 | PRANDIAL) | | | | |
| MCHC | 33.8 | % | • | 31.5-34.5 | URINE SUGAR- FAST | ING(QU | ALITA [.] | TIVE) | |
| RDW | 13.1 | % | | 11.8-14.0 | Test Name | Result | | • | Range |
| WBC Count | 6600 | /cu n | nm 🔍 | 4000-10000 | URINE | Nil | | | |
| Platelet Count | 1.70 | lacs/ mm | cu • | 1.5-4.0 | GLUCOSE(FASTING) | | | | |
| Neutrophils | 73 | % | | 40-80 | BLOOD GROUPING A | | • | | |
| Lymphocytes | 20 | % | | 20-40 | Test Name | Result | Unit | Level | Range |
| Monocytes | 05 | % | | 2-10 | ABO Group: | AB | | | |
| Eosinophils | 02 | % | | 01-06 | Rh (D) Type: | POSITI | /E | | |
| Basophils | 00 | % | | 0-0 | LIVER FUNCTION TE | ST (PAC | KAGE |) | |
| RBC: | Normod | vtic No | rmochro | mic cells | Test Name | Result | Unit | Level | Range |
| Platelets: | Adequa | - | | | ALT(SGPT) - SERUM | 25 | U/L | | 0-50 |
| ERYTHROCYTE SEDIMENTATION RATE (ESR) | 7 | mm/ hr | 1st | 0-15 | ALBUMIN - SERUM ALKALINE | 4.4 71 | g/dL U/L | • | 3.5-5.1 43-115 |
| RINE ROUTINE AN | ID MICRO | SCOF | Υ | | PHOSPHATASE - SERUM | | | | |
| Test Name | Result | | | Range | | | | | |
| Volume: | 50 | mL | | | AST (SGOT) - SERUM | 27 | U/L | | 0-50 |
| Colour: | Pale Str | aw | | | | | , | | |
| Appearance | Slightly | Turbid | | | BILIRUBIN TOTAL - SERUM | 0.6 | mg/dl | | 0.3-1.2 |
| Specific Gravity | 1.010 | | | | - | | | | |
| pH: | 6.0 | | | | LIPID PROFILE TEST | - | - | | |
| Albumin: | Not Det | ected | | | Test Name | Result | | | Range |
| Glucose | Not Det | | | | CHOLESTEROL - SERUM | 174 | mg/dl | | 0-200 |
| Ketone: | Not Det | | | | Non-HDL Cholesterol | 144 | | | |
| Bile Pigments | Not Det | | | | | | | | |
| RBC | Nil | /hpf | | | CREATININE - SERUM | | | _ | _ |
| Pus Cells | Occasio | | | | Test Name | Result | | | Range |
| Epithelial Cells | Occasio | | | | CREATININE - SERUM | 1.0 | mg/dl | | 0.9-1.3 |

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| ı | IV/ED | FUNC 1 | TEST / | DACK | ACE) |
|---|-------|---------------|--------|------|------|
| L | | FUNC | E91 (| PAUN | AGEL |

Test NameResultUnitLevelRangeGGTP: GAMMA16U/L■0-55GLUTAMYLTRANSPEPTIDASE -

GLUCOSE - PLASMA (FASTING)

SERUM

Test Name Result Unit Level Range
GLUCOSE - PLASMA 85 mg/dL ● 70-99
(FASTING)

GLUCOSE - PLASMA (POST PRANDIAL)

Test NameResultUnitLevelRangeGLUCOSE - PLASMA102mg/dL●70-140(POST PRANDIAL)

HBA1C (GLYCOSYLATED HAEMOGLOBIN)-WHOLE BLOOD

Test Name Result Unit Level Range

HBA1C 5.0 % Nondiadetic : 4

(GLYCOSYLATED + 5.6 % Prediabetics : 5.7 - 6.4% Diabetes : >/= 6.5%

ADA

: <7%

Theraputic goal

LIPID PROFILE TEST (PACKAGE)

Test Name Result Unit Level Range mg/dL HDL CHOLESTEROL -30 30-70 **SERUM** TC/HDL-C ratio serum 6 * Optimal<3.5 LDL CHOLESTEROL mg/dL Optimal: <100 129 -SERUM VLDL CHOLESTEROL -15 mg/dL 0-35 SERUM (Calculated)

LIVER FUNCTION TEST (PACKAGE)

| Test Name | Result | Unit | Level | Range |
|--------------------------|--------|------|-------|---------|
| PROTEIN TOTAL - SERUM | 7.4 | g/dL | • | 6.4-8.3 |
| Albumin/Globulin Ratio | 1.5 | | • | 1.0-2.0 |

GLOBULIN: 3.0 g/dL • 1.8-3.6

(CALCULATED) -SERUM

THYROID PROFILE - I(T3,T4 AND TSH)

Test Name Result Unit Level Range TOTAL T3: TRI 1.1 ng/ml 0.8 - 2**IODOTHYRONINE -SERUM** (Electrochemiliminesce nce (ECLIA)) TOTAL T4: 6.3 ug/dL 5.1-14.1 THYROXINE - SERUM (Electrochemiliminesce nce (ECLIA))

LIPID PROFILE TEST (PACKAGE)

Test NameResultUnitLevelRangeTRIGLYCERIDES -114mg/dL●0-150SERUM

THYROID PROFILE - I(T3,T4 AND TSH)

Test Name Result Unit Level Range

TSH: THYROID 1.38 μIU/mL ■ 0.27-4.2

STIMULATING

HORMONE - SERUM
(Electrochemiliminesce
nce (ECLIA))

URIC ACID - SERUM

Test NameResultUnitLevelRangeURIC ACID - SERUM5.6mg/dL●2.6-7.2

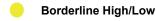
LIVER FUNCTION TEST (PACKAGE)

Test NameResultUnitLevelRangeBILIRUBIN0.1mg/dL●0.0-0.2CONJUGATED
(DIRECT) - SERUM

PROSTATIC SPECIFIC ANTIGEN (PSA TOTAL) - SERUM

Test Name Result Unit Level Range
PROSTATIC SPECIFIC 0.5 ng/mL ○ 0.0-6.5
ANTIGEN (PSA TOTAL)
- SERUM
(Electrochemiliminesce
nce (ECLIA))





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BUN (BLOOD UREA NITROGEN)

| Test Name | Result | Unit Level | Range |
|------------------------------|--------|------------|----------|
| BUN (BLOOD UREA NITROGEN) | 10.7 | mg/dL • | 7.0-18.0 |
| UREA - SERUM | 23 | mg/dL | 13-43 |

BUN/CREATININE RATIO

| Test Name | Result | Unit | Level | Range |
|------------------------------|--------|-------|-------|----------|
| BUN/CREATININE RATIO | 10.7 | | | |
| BUN (BLOOD UREA NITROGEN) | 10.7 | mg/dl | - • | 7.0-18.0 |
| UREA - SERUM | 23 | mg/dl | • | 13-43 |
| CREATININE - SERUM | 1.0 | mg/dl | • | 0.9-1.3 |

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

Biochemistry

A/G - RATIO

CARDIOLOGY

TREADMILL TEST / STRESS TEST

X-RAY CHEST PA

Mildly increased bilateral bronchovascular markings noted.

ULTRASOUND SCREENING WHOLE ABDOMEN

- * Prostatomegaly.
- * Small anechoic pear-shaped structure in gall bladder fossa -? partial cholecystectomy status/? post cholecystectomy dilated stump.

Suggested clinical correlation and further evaluation if clinically indicated.

[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.]

DONE BY
Dr. HENA PARVIN
DNB RESIDENT
In consultation with

ECG

SINUS RHYTHM.
POOR "R" WAVE PROGRESSION.

Within Normal Range



Borderline High/Low



Out of Range

^{*} Mildly prominent horizontal fissure.

| Name | : Mr. SUSANTA MAJUMDER (50 /M) | UHID : AMHL.0002050936 | Date | : 08/03/2025 |
|------|----------------------------------|------------------------|------|--------------|
| Name | . WII. 303ANTA WASOWDER (30 /WI) | OTTID ANTIE.0002030930 | Date | . 00/03/2023 |

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AHC No: AMHLAH237975

Printed By: 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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AICVD RISK SCORE REPORT

| RISK STATUS | YOUR SCORE | ACCEPTABLE SCORE |
|-------------|------------|------------------|
| Low Risk | 4 | 7 |

Your cardiovascular disease risk in the next 10 years is within the Normal limits for 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

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