| Name  | : Mrs. MADHURI BISWAS (59 /F)            |                         | Date : 14/11/2024          |
|---|--|-------------------------|----------------------------|
| Address   | : B-7, 296, KALYANI, NADIA, NADIA        | A, WEST BENGAL, INDIA   |                            |
| Examined b  | y: Dr .JHUMA BAGCHI                      |                         | UHID : AGHL.0001524093     |
| Package : MEDIWHEEL - FULL BODY ANNUAL PL<br>FEMALE HCK |  | PLUS CHECK ADVANCE      | AHC No: AMHLAH226678       |
|   | COMPLAINTS                               | General symptoms        |                            |
|   |  | Cramps - feet, calf     |                            |
| <sup>-</sup> or corporate he<br>Iaematuria              | еалт спескир                             | Verify Past medical his | ton                        |
| Back pain   |  |                         | -                          |
|   | IOWN ILLNESS                             | Past medical history    | - nil significant          |
| lo history of   | - Diabetes mellitus,                     | Surgical history        |                            |
|   | Hypertension,                            | Caesarian section       | - yes                      |
|   | Dyslipidemia, Thyroid                    | Knee replacement        | - left 2020                |
| SYSTE   | disorder<br>MIC REVIEW                   | Personal history        |                            |
| $\overline{\Lambda}$                                    |  | Marital status          | - Married                  |
| Cardiovascular  | svstem                                   | Diet                    | - Mixed Diet               |
| Nil Significant   |  | Alcohol                 | - does not consume alcohol |
| ·   | tom                                      | Smoking                 | - No                       |
| Respiratory sys   | stem                                     | Chews tobacco           | - No                       |
| Nil Significant   |  | Physical activity       | - Mild                     |
| Sastrointestina   | -  | Family history          |                            |
| )yspepsia - yes   | ; Nature - intermittent                  | Father                  | - has expired              |
| Genitourinary s   | ystem                                    | Mother                  | - has expired              |
| Dysuria/burning   | micturition - no; Haematuria - yes       | Coronary artery         | - none                     |
| Synaec history  |  | disease                 |                            |
|   | 2; Deliveries - LSCS; Menopause -        | Cancer                  | - None                     |
| res   | , -, -, -, -, -, -, -, -, -, -, -, -, -, | PHYSICAL EXAMIN         | ATION                      |
| Central nervous   | s system                                 | Concernel               |                            |
| Nil Significant   | -  | General                 |                            |
| Iyes  |  | Build                   | - normal                   |
| -   | vith glasses; Glasses - yes              | Height<br>Weight        | - 151<br>- 50              |
|   | Mill glasses, Glasses - yes              | BMI                     | - 21.93                    |
| ENT   |  | Pallor                  | - No                       |
| Nil Significant   |  | Oedema                  | - no                       |
| /lusculoskeleta   | l system                                 | কৈ Cardiovascular s     | system                     |
| Spine and joints  |  | Heart rate (Per minute) | - 96                       |
| Nil Significant   |  | Rhythm                  | - 90<br>- Regular          |
| Skin  |  |                         | - B.P. Sitting             |
| Nil Significant   |  | Systolic(mm of Hg)      | - 106                      |

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# Package : MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCE FEMALE HCK AHC No : AMHLAH226678

| Diastolic(mm of Hg) | - 68                             |
|---------------------|----------------------------------|
| Heart sounds        | - S1S2+                          |
| Respiratory system  |                                  |
| Breath sounds       | - Normal vesicular breath sounds |
| Abdomen             |                                  |
| Organomegaly        | - No                             |
| Tenderness          | - No                             |

Printed By : Benazir Begaum

: 14/11/2024

Date

#### Package : MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCE FEMALE HCK AHC No : AMHLAH226678

| COMPLETE HAEMOGRAM |         |                              |            |  |  |  |
|--------------------|---------|------------------------------|------------|--|--|--|
| Test Name          | Result  | Unit Level                   | Range      |  |  |  |
| Hemoglobin         | 10.9 *  | g/dl 📃 🔴                     | 12.0-15.0  |  |  |  |
| RBC COUNT          | 4.18    | Million/                     | 3.8-4.8    |  |  |  |
| Hematocrit - Hct:  | 33.0 *  | %                            | 36-46      |  |  |  |
| MCV                | 78.8 *  | fl 🔴                         | 83-101     |  |  |  |
| MCH                | 26.1 *  | pg 🔴                         | 27-32      |  |  |  |
| MCHC               | 33.2    | %                            | 31.5-34.5  |  |  |  |
| RDW                | 14.9 *  | %                            | 11.8-14.0  |  |  |  |
| WBC Count          | 8000    | /cu mm 🔍                     | 4000-10000 |  |  |  |
| Platelet Count     | 1.52    | lacs/cu  ●<br>mm             | 1.5-4.0    |  |  |  |
| Neutrophils        | 74      | %                            | 40-80      |  |  |  |
| Lymphocytes        | 20      | %                            | 20-40      |  |  |  |
| Monocytes          | 05      | %                            | 2-10       |  |  |  |
| Eosinophils        | 01      | %                            | 01-06      |  |  |  |
| Basophils          | 00      | %                            | 0-0        |  |  |  |
| RBC:               | Microcy | Microcytic Hypochromic RBCs. |            |  |  |  |
| Platelets:         | Adequa  | te.                          |            |  |  |  |

#### **ERYTHROCYTE SEDIMENTATION RATE (ESR)**

| Test Name                                  | Result | Unit       | Level | Range |
|--|--------|------------|-------|-------|
| ERYTHROCYTE<br>SEDIMENTATION<br>RATE (ESR) | 99 *   | mm/1<br>hr | Ist ● | 0-20  |

#### URINE ROUTINE AND MICROSCOPY

| Test Name        | Result Unit  | Level Range |
|------------------|--------------|-------------|
| Volume:          | 30 mL        |             |
| Colour:          | Redish       |             |
| Appearance       | Turbid       |             |
| Specific Gravity | 1.020        |             |
| pH:              | 5.5          |             |
| Albumin:         | +++          |             |
| Glucose          | Not Detected |             |
| Ketone:          | Not Detected |             |
| Bile Pigments    | Not Detected |             |
| RBC              | >100 /hpf    |             |
| Pus Cells        | 30-35 /hpf   |             |

| Epithelial Cells                   | 4-6 /h.p   | .f /hpf  |       |         |  |
|------------------------------------|--|----------|-------|---------|--|
| Casts:                             | Not Fou  | Ind      |       |         |  |
| Crystals:                          | Not Fou  | Ind      |       |         |  |
| NOTE : -                           | Urine protein rechecked and<br>confirmed by sulphosalicylic acid<br>test |          |       |         |  |
| URINE SUGAR - POS<br>(QUALITATIVE) | T PRAN   | DIAL     |       |         |  |
| Test Name                          | Result   | Unit     | Level | Range   |  |
| URINE<br>GLUCOSE(POST<br>PRANDIAL) | Nil  |          |       |         |  |
| URINE SUGAR- FAST                  | 'ING(QU  | ALITA    | TIVE) |         |  |
| Test Name                          | Result   |          | -     | Range   |  |
| URINE<br>GLUCOSE(FASTING)          | Nil  |          |       |         |  |
| BLOOD GROUPING A                   |  | PING (/  | ABO A | ND RH)  |  |
| Test Name                          | Result   | Unit     | Level | Range   |  |
| ABO Group:                         | В  |          |       |         |  |
| Rh (D) Type:                       | POSITI   | POSITIVE |       |         |  |
| ALT(SGPT) - SERUM                  |  |          |       |         |  |
| Test Name                          | Result   | Unit     | Level | Range   |  |
| ALT(SGPT) - SERUM                  | 12   | U/L      | •     | 0-35    |  |
| ALBUMIN - SERUM                    |  |          |       |         |  |
| Test Name                          | Result   | Unit     | Level | Range   |  |
| ALBUMIN - SERUM                    | 4.0  | g/dL     |       | 3.5-5.1 |  |
|                                    | TAOF   |          |       |         |  |
| ALKALINE PHOSPHA                   |  |          |       | Denne   |  |
|                                    | Result   |          | Level | -       |  |
| ALKALINE<br>PHOSPHATASE -<br>SERUM | 158 *  | U/L      | •     | 33-98   |  |
| AST (SGOT) - SERUN                 | 1  |          |       |         |  |
| Test Name                          | Result   | Unit     | Level | Range   |  |
| AST (SGOT) - SERUM                 | 20   | U/L      | •     | 0-35    |  |
| BILIRUBIN, TOTAL - S               | SERUM  |          |       |         |  |
| Test Name                          | Result   | Unit     | Level | Range   |  |
| BILIRUBIN TOTAL -                  | 0.5  | mg/d     | L     | 0.3-1.2 |  |

Within Normal Range

Borderline High/Low

SERUM

Out of Range

LDL CHOLESTEROL -SERUM

TC/HDL-C ratio serum

LDL CHOLESTEROL

SERUM (Calculated)

PROTEIN TOTAL -

Albumin/Globulin Ratio

VLDL CHOLESTEROL -

**PROTEIN TOTAL - SERUM** 

**Test Name** 

-SERUM

**Test Name** 

GLOBULIN:

(CALCULATED) -

SERUM

SERUM

: 14/11/2024

Optimal<3.5

0-100

0-35

6.4-8.3

1.0-2.0

1.8-3.6

Level Range

Result Unit Level Range

mg/dL 🔍

mg/dL 🔍

g/dL

g/dL

Date

3

88

13

7.0

1.3

3.0

**TOTAL T3: TRI IODOTHYRONINE - SERUM** 

Result Unit

#### Package : MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCE FEMALE HCK AHC No : AMHLAH226678

#### **CHOLESTEROL - SERUM**

| Test Name              | Result | Unit Level | Range |
|------------------------|--------|------------|-------|
| CHOLESTEROL -<br>SERUM | 157    | mg/dL 🔍    | 0-200 |
| Non-HDL Cholesterol    | 101    |            |       |

#### **CREATININE - SERUM**

| Test Name                 | Result | Unit  | Level | Range   |
|---------------------------|--------|-------|-------|---------|
| CREATININE - SERUM        | 0.9    | mg/dL | •     | 0.6-1.1 |
| <b>CREATININE - SERUM</b> | 0.9    | mg/dL |       | 0.6-1.1 |

#### **GGTP: GAMMA GLUTAMYL TRANSPEPTIDASE -**

| SERUM            |        |      |       |       |
|------------------|--------|------|-------|-------|
| Test Name        | Result | Unit | Level | Range |
| GGTP: GAMMA      | 11     | U/L  | •     | 0-38  |
| GLUTAMYL         |        |      |       |       |
| TRANSPEPTIDASE - |        |      |       |       |
| SERUM            |        |      |       |       |

#### **GLUCOSE - PLASMA (FASTING)**

| Test Name                     | Result | Unit  | Level | Range |
|-------------------------------|--------|-------|-------|-------|
| GLUCOSE - PLASMA<br>(FASTING) | 98     | mg/dL | •     | 70-99 |

#### GLUCOSE - PLASMA (POST PRANDIAL)

| Test Name        | Result | Unit  | Level | Range  |
|------------------|--------|-------|-------|--------|
| GLUCOSE - PLASMA | 110    | mg/dL | •     | 70-140 |
| (POST PRANDIAL)  |        |       |       |        |

Within Normal Range

# HBA1C (GLYCOSYLATED HAEMOGLOBIN)-WHOLE BLOOD

| Test Name                                  | Result | Unit         | Level                                | Range  | Test Name                                      | Resu |
|--|--------|--------------|--------------------------------------|--|--|------|
| HBA1C<br>(GLYCOSYLATED<br>HAEMOGLOBIN)-WHO | 5.5    | %            | •                                    | Nondiadetic : 4<br>- 5.6 %<br>Prediabetics : | TRIGLYCERIDES -<br>SERUM                       | 78   |
| LE BLOOD                                   |        |              | 5.7 - 6.4%<br>Diabetes :<br>>/= 6.5% | TSH: THYROID STIMU<br>SERUM                  | LATI   |      |
|  |        |              |                                      | ADA  | Test Name                                      | Resu |
|  |        |              |                                      | Theraputic goal<br>: <7%                     | TSH: THYROID<br>STIMULATING<br>HORMONE - SERUM | 1.46 |
| HDL CHOLESTEROL ·                          | SERUI  | M            |                                      |  | (Chemiliminescence)                            |      |
| <b>Test Name</b><br>HDL CHOLESTEROL -      | Result | Unit<br>mg/d |                                      | <b>Range</b><br>30-70                        | URIC ACID - SERUM                              |      |
| SERUM                                      | 90     | mg/u         | L                                    | 30-70  | Test Name                                      | Resu |
|  |        |              |                                      |  | URIC ACID - SERUM                              | 5.1  |

**Borderline High/Low** 

**Out of Range** 

| Test Name           | Result | Unit  | Level | Range     |
|---------------------|--------|-------|-------|-----------|
| TOTAL T3: TRI       | 1.06   | ng/ml |       | 0.87-1.78 |
| IODOTHYRONINE -     |        |       |       |           |
| SERUM               |        |       |       |           |
| (Chemiliminescence) |        |       |       |           |

#### **TOTAL T4: THYROXINE - SERUM**

| Test Name           | Result | Unit  | Level | Range      |
|---------------------|--------|-------|-------|------------|
| TOTAL T4:           | 13.44  | µg/dL |       | 5.48-14.28 |
| THYROXINE - SERUM   |        |       |       |            |
| (Chemiliminescence) |        |       |       |            |

#### **TRIGLYCERIDES - SERUM**

| <b>Test Name</b><br>TRIGLYCERIDES -<br>SERUM                          | <b>Result</b><br>78 | Unit Level<br>mg/dL ● | <b>Range</b><br>0-150 |
|---|---------------------|-----------------------|-----------------------|
| TSH: THYROID STIMU<br>SERUM<br>Test Name                              | LATING<br>Result    | B HORMONE             | -<br>Range            |
| TSH: THYROID<br>STIMULATING<br>HORMONE - SERUM<br>(Chemiliminescence) | 1.46                | µIU/mL ●              | 0.38-5.33             |
| URIC ACID - SERUM   |                     |                       |                       |
| Test Name   | Result              | Unit Level            | Range                 |
| URIC ACID - SERUM   | 5.1                 | mg/dL 🔍               | 2.4-5.7               |

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Date

#### Package : MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCE FEMALE HCK AHC No : AMHLAH226678

# BILIRUBIN CONJUGATED (DIRECT) - SERUM

| Test Name        | Result | Unit  | Level | Range   |
|------------------|--------|-------|-------|---------|
| 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<br>NITROGEN) | 7.0    | mg/dL 🔍    | 7.0-18.0 |
| UREA - SERUM                 | 15     | mg/dL 🔍    | 13-43    |
| UREA - SERUM                 | 15     | mg/dL 🔍    | 13-43    |

# **BUN/CREATININE RATIO**

| Test Name                    | Result | Unit Leve | el Range |
|------------------------------|--------|-----------|----------|
| BUN/CREATININE<br>RATIO      | 7.8    |           |          |
| BUN (BLOOD UREA<br>NITROGEN) | 7.0    | mg/dL 🔍   | 7.0-18.0 |
| UREA - SERUM                 | 15     | mg/dL 🔍   | 13-43    |
| UREA - SERUM                 | 15     | mg/dL 🔍   | 13-43    |
| CREATININE - SERUM           | 0.9    | mg/dL 🔍   | 0.6-1.1  |
| CREATININE - SERUM           | 0.9    | mg/dL 🔍   | 0.6-1.1  |
|                              |        |           |          |

#### PAP SMEAR /CERVICAL SMEAR

Ref No:

AG01.C2409079

SPECIMEN TYPE:

Conventional cervical smear (Papanicolaou stain) x 1 SPECIMEN ADEQUACY:

Satisfactory for evaluation with metaplastic squamous cells.

INTERPRETATION/RESULT:

Negative for intraepithelial lesion or malignancy, cellular changes associated with Atrophy.

# ECG

NORMAL SINUS RHYTHM, WITHIN NORMAL LIMITS.

X-RAY MAMMOGRAPHY BILATERAL (MHC)

\* Area of clustered calcifications in the outer retroareolar region of the right breast. (BIRADS II)

[Suggested: Routine follow-up.]

BIRADS Category: (0= Requires additional evaluation, 1 = Negative, 2 = Benign findings, 3 = Intermediate, 4 = Suspicious malignancy, 5 = Highly suggestive of malignancy, 6 = Histologically proven malignancy).

Please Note :

False negative mammogram is 10-15%. Dense breast parenchyma may obscure an underlying neoplasm.

---END OF THE REPORT---

Dr. Manisha Gupta M.D. (Radiodiagnosis) Fellow-ICRI Abdominal Radiology Consultant Radiologist WBMC -74061

#### ULTRASOUND SCREENING WHOLE ABDOMEN

\* Grade I fatty liver.

Dr. ARKADEEP DEY DNB RESIDENT In consultation with

Dr. SRIJITA GHOSH SEN DNB (RADIODIAGNOSI) MNAMS, FRCR (LONDON) CONSULTANT RADIOLOGIST Reg. No. 68918 (WBMC)

# X-RAY CHEST PA

Within Normal Range

**Borderline High/Low** 

UHID ; AGHL.0001524093

Date : 14/11/2024

#### Package : MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCE FEMALE HCK AHC No : AMHLAH226678

\* Chest skiagram does not reveal any significant abnormality.

Dr. ARKADEEP DEY DNB RESIDENT In consultation with

Dr. SRIJITA GHOSH SEN DNB (RADIODIAGNOSIS) MNAMS, FRCR (LONDON) CONSULTANT RADIOLOGIST Reg No – 68918 (WBMC)

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

#### Biochemistry

A/G - RATIO CARDIOLOGY TREADMILL TEST / STRESS TEST







Out of Range

Package : MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCE FEMALE HCK AHC No ; AMHLAH226678

Printed By :

#### Dr.JHUMA BAGCHI

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.

Date : 14/11/2024

Package : MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCE FEMALE HCK AHC No : AMHLAH226678

| AICVD RISK SCORE REPORT |                  |  |  |  |
|-------------------------|------------------|--|--|--|
| YOUR SCORE              | ACCEPTABLE SCORE |  |  |  |
| 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.</li>
- 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 AI Models and APIs used at Apollo Hospitals are certified by ISO 13485 : 2016 vide certificate no. MD 763515