

Mr. YOGESH JAIN (39 /M)

UHID

AHIL.0000828127

AHC No

AHILAH183280

Date

24/12/2022

MEDIWHEEL-FULL BODY CHK-BELOW40-MALE

Dear Mr. YOGESH JAIN

Thank you for choosing Apollo ProHealth, India's first personalized, predictive health screening program with health risk assessments curated just for you to guide targeted intervention, continuum of care and a path to wellness. Our holistic care continuum integrates clinical expertise and artificial intelligence to gauge and avert the risk, onset and progression of non-communicable diseases (NCDs).

In this personalized health report, you will find your

- Medical History and Physical examination results
- Investigations Results
- Artificial Intelligence powered risk scores
- Physician's Impressions on your Health
- Path to Wellness: A personalized management protocol, including follow-up assessments
- Vaccination counselling advice

Apollo ProHealth encompasses the following processes:

Personalized Health Risk Assessment (pHRA): Based on your online risk assessment, medical history, physical examination, and psychological evaluation, we recommended a health screening assessment for you, including diagnostic and imaging tests. Based on the results of these assessments, we have advised additional follow-up tests and consultations - details of which we have included in your report. Your physician will explain their relevance, and we strongly suggest you comply with the recommendations.

Health Mentor: We have assigned a dedicated health mentor to proactively work with you towards your health goals and ensure that you regularly adhere to the guidance and recommendations from clinical and nutrition consultants. Your health mentor will call you periodically to track your progress







ProHealth App: You will get access to the Apollo ProHealth App, which will facilitate easy navigation of personal health records, progress towards your health goals, appointment booking, customized tips and guidance for health and lifestyle management, and regularly connecting with your Health Mentor through the in-app chat. Until you return for your 2nd-year assessment, you will receive periodic updates and reminders to motivate you to keep up the momentum regarding health goal milestones.

Follow- Up Consultation:

For any follow-up consultations, you can visit your ProHealth physician in-person at the center or you can book a virtual consultation through https://www.apollo247.com/specialties or through the Apollo 247 app on your phone.

Scan the QR code to download the Apollo 247 App



You can also download the Apollo 247 app on

ANDROID IOS

Disclaimer: The services offered in the program may vary as per the respective agreements made in the program or center or agreed mutual consent.

Note: You are entitled to one complimentary follow-up consultation with your ProHealth physician within a period of 1 year. Please contact your health mentor for the complimentary consult coupon code. This is available for ProHealth Super, Regal and Covid Recovery and Wellness programs





Date



UHID

: AHIL.0000828127

AHC No : AHILAH183280

by Join Committeed by : Dr. SHASHIKANT NIGAM



For Annual health checkup **NECK PAIN SINCE 4 DAYS**

Present Known illness

No history of : - Diabetes mellitus, Hypertension, Dyslipidemia, Thyroid disorder



NO KNOWN ALLERGY

:24/12/2022



Address :

Systemic Review

Cardiovascular system

- Nil Significant

Respiratory system

- Nil Significant

Oral and dental

- Nil Significant

Gastrointestinal system

- Nil Significant

Genitourinary system

- Nil Significant

Gynaec history

- Nil Significant

Central nervous system

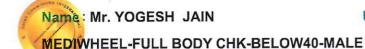
- Nil Significant

Eyes

- Nil Significant

Page 3 of 13









Nil Significant

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Musculoskeletal system

Spine and joints

- Nil Significant

Skin

1

- Nil Significant

General symptoms

:

- Nil Significant



Past medical history

Do you have any

- No

allergies?

Allergies

- Nil

Past medical history

- nil significant

Covid 19

- Yes

- 2021

Post detection (3

- No

Weeks)

Hospitalization for

- No

Covid 19



Surgical history

Surgical history

- Nil



Personal history

Ethnicity

- Indian Asian

Marital status

- Married

No. of children

- 2

Female

- 1

Male

4

Profession

- corporate employed

Diet

- Vegetarian

Alcohol

- does not consume alcohol

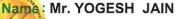
Smoking

- No

Page 4 of 13

The Emergency Specialist

#1055
Sevine Sevine Seven





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Organization is Achews tobacco

- No

Physical activity

- Mild



Family history

Father

- has expired

Mother

- alive

Brothers

_ 1

Sisters

- 1

Diabetes

- mother

Hypertension

mother

Coronary artery

none

disease

Cancer

- mother

Type

Breast

Physical Examination



General

General appearance

- normal

Build

- normal

Height

- 176

Weight

- 95

BMI

- 30.67

Pallor

- No

Oedema

- no



Cardiovascular system

Heart rate (Per minute)

- 68

Rhythm

Regular

- B.P. Supine

Systolic(mm of Hg)

- 110

Diastolic(mm of Hg)

- 70

Heart sounds

- S1S2+

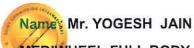
Respiratory system

Breath sounds

- Normal vesicular breath sounds

Page 5 of 13





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MEDIWHEEL-FULL BODY CHK-BELOW40-MALE



Organomegaly

- No

Tenderness

- No

Printed By:

MUKTA S ADALTI

Page 6 of 13





Organization is Accredited by Joint Commission Intelligence FOR ROUTINE EXAMINATION

Urinalysis, is the physical, chemical and microscopic examination of the urine and is one of the most common methods of medical diagnosis. It is used to detect markers of diabetes, kidney disease, infection etc.

Test Name	Result	Unit	Level	Range
Volume	25	mL		
Specific Gravity	1.010			
Colour:	Pale-Yellow			
Transparency:	Clear			
рН	5			
Protein:	Nil			
Sugar:	Nil			
Blood:	Negative			
Ketone	Absent			
Bile Pigments:	Absent			
Urobilinogen	Nil	E.U./dL		
Nitrite	Negative			
Pus Cells	Occassional			0-5
RBC	Nil	/hpf		0-5/hpf
Epithelial Cells	Occassional			
Casts:	Absent			
Crystals:	Absent			

COMPLETE BLOOD COUNT WITH ESR

Test Name	Result	Unit	Level	Range
Hemoglobin (Photometric Measurement)	15.4	gm%		13.0-17.0
Packed cell volume(Calculated)	44.2	%		40-50
RBC COUNT (Impedance)	5.06	Million/ul		4.5-5.9
MCV (From RBC Histogram)	87.4	fl		80-100
MCH(Calculated)	30.43	pg		27-32
MCHC(Calculated)	34.8	%		31-36
RDW(Calculated)	12.9	%		11.5-14.5
WBC Count (Impedance)	6170	/cu mm		4000-11000

Within Normal Range

Borderline High/Low

Out of Range

Page 7 of 13

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Apollo Hospitals - City Centre (NON NAMER-JCI)
1, Tulsibaug Society, Nr. Parimai Garden, Ahmedabad.
Phone: +91 79 66305800 / 01 or +91 76988 15148
E-mail: infoahcc@apolloahd.com

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100	EDI	AUTEL	CILL I	DODY	CHIZ DEL	.OW40-MA	AI E
IAI	EUI	WHEEL	-FULL	BUUT	CUV-DEF	.0440-1417	1LE
-							

Acc	Neutrophils	46	%	40-75	HOSPITALS
	Lymphocytes	42 *	%	20-40	
	Monocytes	06	%	2-10	7
	Eosinophils	06	%	01-06	
	Basophils	00	%	0-1	
	Platelet Count (Impedance)	316800	/cu mm	150000-450000	
	MPV (Calculated)	7.2	fl	7-11	
	ERYTHROCYTE SEDIMENTATION RATE (ESR) (Automated/ optic– electronic)	04	mm/1st hr	0-15	
	URINE GLUCOSE(FASTING)				

Result Unit Level Range Test Name

Urine Glucose (Post Prandial) Nil

URINE GLUCOSE(POST PRANDIAL)

Test Name Result Unit Level Range

Urine Glucose (Post Prandial) Nil

BLOOD GROUPING AND TYPING (ABO and Rh)

Test Name Result Unit Level Range

BLOOD GROUP: A Positive

LFT (LIVER FUNCTION TEST)

Liver function tests(LFT), are groups of clinical biochemistry blood assays that give information about the state of a patient's liver. These tests can be used to detect the presence of liver disease, distinguish among different types of liver disorders, gauge the extent of known liver damage, and follow the response to treatment.

Test Name	Result	Unit	Level	Range
ALT(SGPT) - SERUM / PLASMA	42	U/L		0-50
ALKALINE PHOSPHATASE - SERUM/PLASMA	113	U/L		Adult(Male): 40 - 129
AST (SGOT) - SERUM	25	U/L		> 1 year Male : <40
Total Bilirubin	0.561	mg/dL		0.300-1.200
Direct Bilirubin	0.203	mg/dL		Upto 0.3 mg/dl
Within Normal Range	Borderline H	igh/Low	Out	of Range

Page 8 of 13

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Organization is Accredited by Joint Commission In Indinect Billirubin

0.358

mg/dL

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1 Day ≤5.1 mg/dL 2 Days ≤7.2 mg/dL 3-5 Days ≤10.3 mg/dL 6-7 Days ≤8.4 mg/dL 8-9 Days ≤6.5 mg/dL 10-11 Days ≤4.6 mg/dL 12-13 Days ≤2.7 mg/dL

14 Days - 9 Years 0.2-0.8 mg/dL 10-19 Years 0.2-1.1 mg/dL ≥20 Years 0.2-1.2 mg/dL

CREATININE - SERUM / PLASMA

Test Name Result Unit Level Range

CREATININE - SERUM / PLASMA 0.89 mg/dL • Adult Male: 0.6 - 1.3

LFT (LIVER FUNCTION TEST)

Liver function tests(LFT), are groups of clinical biochemistry blood assays that give information about the state of a patient's liver. These tests can be used to detect the presence of liver disease, distinguish among different types of liver disorders, gauge the extent of known liver damage, and follow the response to treatment.

Test Name Result Unit Level Range

GGTP: GAMMA GLUTAMYL 30 U/L Male: 10 - 71

TRANSPEPTIDASE - SERUM Female: 6 - 42

GLUCOSE - SERUM / PLASMA (FASTING)

Test Name Result Unit Level Range

Glucose - Plasma (Fasting) 94 mg/dL 70 - 100 : Normal

100 - 125 : Impaired Glucose Tolerance

>= 126 : Diabetes Mellitus

GLUCOSE - SERUM / PLASMA (POST PRANDIAL) - PPBS

Test Name Result Unit Level Range

Glucose - Plasma (Post Prandial) 131 mg/dL • 70-140

GLYCOSYLATED HEMOGLOBIN (HBA1C) - WHOLE BLOOD

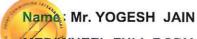
Test Name Result Unit Level Range

Within Normal Range

Borderline High/Low

Out of Range

Page 9 of 13





Organization is AccreGlycosylated Hemoglobin (HbA1c) by Joint Commission International

Normal < 5.7

%Increased risk for Diabetes 5.7 - 6.4%

Diabetes >= 6.5%

Monitoring criteria for Diabetes Mellitus < 7.0 : Well Controlled Diabetes 7.1 - 8.0 : Unsatisfactory Control > 8.0 : Poor Control & Needs Immediate

Treatment

Range

Level

Estimated Average Glucose.

Test Name

102.54

Result

LFT (LIVER FUNCTION TEST)

Liver function tests(LFT), are groups of clinical biochemistry blood assays that give information about the state of a patient's liver. These tests can be used to detect the presence of liver disease, distinguish among different types of liver disorders, gauge the extent of known liver damage, and follow the response to treatment.

Unit

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%

PROTEIN TOTAL - SERUM / PLASMA	7.23	g/dL		6.00-8.00
PROTEIN TOTAL - SERUM / PLASMA	7.23	g/dL		6.00-8.00
ALBUMIN - SERUM	4.74	g/dL		Adult(18 - 60 Yr): 3.5 - 5.2
ALBUMIN - SERUM	4.74	g/dL		Adult(18 - 60 Yr): 3.5 - 5.2
Globulin-Serum/Plasma	2.49			2.20-4.20
Globulin-Serum/Plasma	2.49			2.20-4.20
A/G ratio	1.9			1.00-2.00
A/G ratio	1.9		-	1.00-2.00
THYROID PROFILE (T3,T4 AND TSF	<u>1)</u>			
Test Name	Result	Unit	Level	Range
TOTAL T3: TRI IODOTHYRONINE - SERUM	2.28	nmol/L	•	Adults(20-120 Yrs): 1.2 - 3.1 Pregnant Female : First Trimester : 1.61 - 3.53 Second Trimester : 1.98 - 4.02 Third Trimester : 2.07 - 4.02
TOTAL T4: THYROXINE - SERUM	123	nmol/L	•	Adults(20-100 Yrs):66 - 181 Pregnant Female : First Trimester : 94.3 - 190 Second Trimester : 102 - 207 Third Trimester : 89 - 202
TSH: THYROID STIMULATING HORMONE - SERUM	2.02	μIU/mL	•	14-120 years : 0.27 - 4.20
Within Normal Range	Borderline H	ligh/Low	Out	of Range

Page 10 of 13







Organization is According by Joint Commission Into Park ACID - SERUM

Uric acid is a product of the metabolic breakdown of purine. High blood concentrations of uric acid can lead to gout. It is also associated with other medical conditions including diabetes and the formation of kidney stones.

Test Name	Result	Unit	Level	Range
URIC ACID - SERUM	5.7	mg/dL		Male : 3.4-7.0 Female : 2.4-5.7
BUN (BLOOD UREA NITROGEN)				э
Test Name	Result	Unit	Level	Range
BUN (BLOOD UREA NITROGEN)	9	mg/dL		6-20
UREA - SERUM / PLASMA	20	mg/dL		15 - 50
LIPID PROFILE - SERUM				
Test Name	Result	Unit	Level	Range
Total Cholesterol	226 *	mg/dl	•	0 - 200 : Desirable 200 - 240 : Borderline High 240 - 280 : High > 280 : Very High
Triglycerides - Serum	140	mg/dL	•	0-150
HDL CHOLESTEROL - SERUM / PLASMA (Direct Enzymatic Colorimetric)	43 *	mg/dL	• = ·	< 40 : Major risk factor for heart disease 40 - 59 : The higher The better. >=60 : Considered protective against heart disease
LDL Cholesterol (Direct LDL)	177 *	mg/dL	•	100 : Optimal 100-129 : Near Optimal 130-159 : Borderline High 160-189 : High >=190 : Very High
VLDL CHOLESTEROL	28			< 40 mg/dl
C/H RATIO	5 *			0-4.5

X-RAY CHEST PA

X-ray imaging creates pictures of the inside of your body. Chest X-ray can reveal abnormalities in the lungs, the heart, and bones that sometimes cannot be detected by examination.

NORMAL STUDY.

Within Normal Range

Borderline High/Low



Out of Range

Page 11 of 13



Organization is Accretion to Accretional Vestigations Not Done / Not Yet Reported by Joint Commission International

Haematology

STOOL ROUTINE

CARDIOLOGY

ECHO/TMT

ECG

Within Normal Range

Borderline High/Low

Out of Range

Page 12 of 13



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BODY WEIGHT 95 KG, IDEAL BODY 58-71 KG

DYSLIPIDEMIA

ECG - NORMAL

ECHO -

- CONCENTRIC LVH
- NORMAL LV SYSTOLIC FUNCTION, LVEF 60%
- REDUCED LV COMPLIANCE
- NO PAH, RVSP: 24 MMHG

TMT — TEST IS NEGATIVE, EXERCISE TIME 6:17 ,WORKLOAD 7.4 METS USG ABDOMEN - GRADE I FATTY LIVER, LEFT RENAL SIMPLE CYST X-RAY - NORMAL VISION – DRY EYE DISEASE

Wellness Prescription

Advice On Diet :-



BALANCED DIET LOW FAT DIET

Advice On Physical Activity :-

smoely lady



REGULAR 30 MINUTES WALK FOR HEALTH AND 60 MINUTES FOR WEIGHT REDUCTION PRACTICE YOGA AND MEDITATION

MAINTAIN WEIGHT BETWEEN 58-71 KG

Printed By : MUKTA S ADALTI

Dr.SHASHIKANT NIGAM

AHC Physician / Consultant Internal Medicine

Dr. Shashikant Nigam MBBS, MD (Gen. Med.) Consultant Internal Medicine Apollo Hospitals International Ltd. Gendhinagar, Gujarat-382428, INDIA, Regd. No.: G-21961

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.

Page 13 of 13





OPIR
Name :
UHID:
Distance \
Right Eye
Left Eye -
Near Visi
Right Eye
Left Eye
\sim
APLN.TI

Mr. Hogen Jan M/39 828127 Vision: umanded : - 6/6P } Pgo 6/6.

No visual Symps | diseases

Date: 24.12-22

Left Eye- mmHg N - Right Eye

Normal, Both Eye - Colour Vision

Both Eye - Anterior Segment Examinations -

Both Eye Posterior Segment Examinations –

AHMROPO28V1

. Optive eld 3 t/d | m/h

Doctor's Signature

Ophthalmologist Name

ß O 11 11 12 # 30 € 0.13-100 Hg Chest: 10.0 mm/mV Linb: 10 nm/mv Speed: 25 mm/sec





DEPARTMENT OF RADIOLOGY AND IMAGING SCIENCES

Patient Details : Mr. YOGESH JAIN | Male | 39Yr 6Mth 23Days

UHID : AHIL.0000828127

Patient Location: AHC

Patient Identifier: AHILAH183280

DRN

122147936

Completed on:

24-DEC-2022 10:34

Ref Doctor

DR. SHASHIKANT NIGAM

X-RAY CHEST PA

FINDINGS:

Lung fields are clear.

Cardio thoracic ratio is normal.

Both costophrenic angles are clear.

Domes of diaphragm are well delineated.

Bony thorax shows no significant abnormality.

IMPRESSION

NORMAL STUDY.

--- END OF THE REPORT ---

T.V. Parc.

TIRTH VINAYKUMAR PARIKH

Printed on:

26-Dec-2022 11:41

Printed By: 153

153182

Reported By: 717876

Page 1 of 1









DEPARTMENT OF RADIOLOGY AND IMAGING SCIENCES

Patient Details

Mr. YOGESH JAIN | Male | 39Yr 6Mth 23Days

UHID

AHIL.0000828127

Patient Location:

AHC

Patient Identifier:

AHILAH183280

DRN

222066928

Completed on:

24-DEC-2022 11:25

Ref Doctor

DR. SHASHIKANT NIGAM

USG WHOLE ABDOMEN

FINDINGS:

Liver appears normal in size and shows uniform hyperechoic echotexture. No evidence of focal pathology seen. Intra and extra hepatic biliary radicles are not dilated. Portal vein is normal in calibre. Intrahepatic portal radicles appear normal.

Gall bladder appears normal with no evidence of calculus. Wall thickness appears normal. No evidence of pericholecystic collection.

Head, body and tail of pancreas appear normal in size and echotexture. No focal lesions identified. Pancreatic duct appears normal in caliber.

Spleen measures 9 cms and shows uniform echotexture.

Both kidneys are normal in size and show normal echopattern with good corticomedullary differentiation. Cortical outlines appear smooth. No evidence of calculi. Pelvicalyceal system on both sides appear normal.

Approximately 16 x 15 mm sized simple cyst is seen in upper pole of left kidney.

No evidence of ascites or lymphadenopathy.

Urinary bladder is normal in contour and outline. Wall thickness appears normal. No evidence of any intraluminal pathology seen.

Prostate is normal in size and echopattern.

IMPRESSION ·

Grade I fatty liver.

Left renal simple cyst.

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26-Dec-2022 11:41

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Reported By:

717876

Page 1 of 2





All Colored	- W				Ź	ax HR. 170hor	n 936 of may	predicted 18	hom		100 mm/m
Referred by: DRSUBIR GHOSH, MHC Test ind: Stage STANDING STAGE 1 STAGE 2 STAGE 3 STA	TATION AND A					The state of the s	1 20'0 H	non-in-			10.V IIIIV III
Stage	24-Dec-2022 16:03:38	39years 176cm 176cm 176cm Test ind:	Asian 95kg 181k GHOSH	HM	Zª ŮZZZĖŽ	ax BP: 140/90 ason for Term meents. TES RMAI, HEYN) ANCINA OC) GAILOP ST TERMINA ST TERMINA	ination: Patie ODAYNAMIC CURRED, NO MURMUR AT TED DUE TO FORT TOLERA	Maximum wat fatigue E. FOR IND RESPONSE ARRHYTHE PEAK EXE PATIENT F	OTKLOAD: 7.4IN UCIBLE ISCH MIAS AT PRO RCISE ATIGUE AND	EMIA AT MOD VOKED THR ACHIEVE	100hz JERATE WOR
SST. SUPINE 1175	Shase	Stage		Time in	Speed	Grade	WorkLoad	HR	Bp	RPP	
STACE 1 3.00 1.7 1.9 1.00 0.9 1.0 0.2 1.00 0.2 1.00 0.2 1.00 0.2 1.00 0.2 1.00 0.2 1.00 0.2 1.00 0.2 1.00 0.2 1.00 0.1 1	Name	Name		Stare	(udm;	(%)	(METS)	(hom)	(mmHg)	(x100)	
STAGE 1 8000 1.7 10.0 4.6 182 (24.70 5.70 5.70 5.70 5.70 5.70 5.70 5.70 5	PRETEST	SUPINE		<u> </u>	*	* * * * * * * * * * * * * * * * * * * *	0,	85	120/70	2	
STACE 2 3.00 1.7 10.0 1.2 1.2 1.24.70 STACE 3 0.17 3.4 1.0 7.4 1.0 1.0 1.0 1.0 1.0 1.0 1.0 1.0 1.0 1.0		STANDII	9	0.16	0.8	0.0	O.	88	120/70	115	
STACE 3 STACE 3 STACE 3 RECOVERY RECOVERY S124 **, **, **, **, **, **, **, **, **, **	TXERCISE	STAGE		3:00	E	19.0	.c. <u>4</u>	132	124/70	164	
STACES 3 RECOVERY RECOVE		STAGE :	2	3:00	λc ci	12.0	0.7	162	130/80	211	
RECOVERY 3:14 *** *** 1:0 1:11 1:20/70		STAGE	8	0.17	3.4	14.0	7	170	130/80	221	
	RECOVERY	RECOVE	ТКУ	3.24	×. ×	Я. 	O	port - 1744 - 1774	120/70	133	