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**Mrs. DIMPALBEN BHARATKUMAR DARJI (30 /F)**

UHID : AHIL.0000495697

AHC No : AHILAH175287

Date : 16/11/2022

MEDIWHEEL-FULL BODY CHK-BELOW40-FEMALE

**Dear Mrs. DIMPALBEN BHARATKUMAR DARJI**

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

For Enquiry/Appointments Contact +91 76988 15003 / +91 79 66701880

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**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

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**Name** : Mrs. DIMPALBEN BHARATKUMAR DARJI (30 /F)

**Date** : 16/11/2022

**Address** : PLOT NO 9/2 SECTOR 4-A GANDHINAGAR, GANDHI NAGAR, GANDHI NAGAR,  
GUJARAT, INDIA

**Examined by** : Dr. SHASHIKANT NIGAM

**UHID** : AHIL.0000495697

**MEDIWHEEL-FULL BODY CHK-BELOW40-FEMALE**

**AHC No** : AHILAH175287



### Chief Complaints

For Annual health checkup  
LOW BLOODPRESSURE  
BLACKENING OF EYES  
HEADACHE



### Drug Allergy

NO KNOWN ALLERGY :10/01/2019



### 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





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ENT : - Nil Significant

Musculoskeletal system :

Spine and joints  
- Nil Significant

Skin : - Nil Significant

General symptoms : - Nil Significant

 Past medical history

Do you have any allergies? - No  
Do you have any drug allergies? - No  
Covid 19 - Yes  
Hospitalization for Covid 19 - No

 Surgical history

Surgical history - Nil

 Personal history

Ethnicity - Indian Asian  
Marital status - Married  
No. of children - 1  
Male - 1  
Diet - Vegetarian  
Alcohol - does not consume alcohol  
Smoking - No  
Chews tobacco - No  
Physical activity - Moderate

 Family history

Father - alive



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Aged - 57  
Mother - alive  
Aged - 53  
Brothers - 2  
Hypertension - father,mother  
Coronary artery disease - father,mother  
Cancer - None  
Thyroid/other endocrine disorder - mother

### Physical Examination



#### General

General appearance - normal  
Build - normal  
Height - 152  
Weight - 58.3  
BMI - 25.23  
Pallor - No  
Oedema - no



#### Cardiovascular system

Heart rate (Per minute) - 70  
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



#### Abdomen

Organomegaly - No  
Tenderness - No

Printed By : MUKTA S ADALTI

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### URINE 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	30	mL		
Specific Gravity	1.010			
Colour:	Pale-Yellow			
Transparency:	Slightly Turbid			
pH	5.5			
Protein :	Nil			
Sugar:	Nil			
Blood:	2+			
Ketone	Absent			
Bile Pigments:	Absent			
Urobilinogen	Nil	E.U./dL		
Nitrite	Negative			
Pus Cells	1-2 /h.p.f			0-5
RBC	8-10 /h.p.f	/hpf		0-5/hpf
Epithelial Cells	1-2 /h.p.f			
Casts:	Absent			
Crystals:	Absent			

### COMPLETE BLOOD COUNT WITH ESR

Test Name	Result	Unit	Level	Range
Hemoglobin (Photometric Measurement)	10.1 *	gm%	●	12-16
Packed cell volume (Calculated)	32.1 *	%	●	36-46
RBC COUNT (Impedance)	4.4	Million/ul	●	3.8-5.2
MCV (From RBC Histogram)	73 *	fl	●	80-100
MCH(Calculated)	22.88 *	pg	●	27-32
MCHC(Calculated)	31.3	%	●	31-36
RDW(Calculated)	15.5 *	%	●	11.5-14.5
WBC Count (Impedance)	6237	/cu mm	●	4000-11000

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

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Neutrophils	59	%	●	40-75
Lymphocytes	31	%	●	20-40
Monocytes	08	%	●	2-10
Eosinophils	02	%	●	01-06
Basophils	00	%	●	0-1
Platelet Count (Impedance)	266400	/cu mm	●	150000-450000
MPV (Calculated)	9.1	fl	●	7-11
ERYTHROCYTE SEDIMENTATION RATE (ESR) (Automated/ optic-electronic)	19	mm/1st hr	●	0-20

**URINE GLUCOSE(FASTING)**

Test Name	Result	Unit	Level	Range
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:	B 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	8	U/L	●	0-35
ALKALINE PHOSPHATASE - SERUM/PLASMA	76	U/L	●	Adult(Female): 35 - 104
AST (SGOT) - SERUM	12	U/L	●	>1 year Female: <32
Total Bilirubin	0.318	mg/dL	●	0.300-1.200
Direct Bilirubin	0.129	mg/dL	●	Upto 0.3 mg/dl

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Indirect Bilirubin	0.189	mg/dL	●	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
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**CREATININE - SERUM / PLASMA**

Test Name	Result	Unit	Level	Range
CREATININE - SERUM / PLASMA	0.59	mg/dL	●	Adult Female: 0.5 - 1.2

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Test Name	Result	Unit	Level	Range
GGTP: GAMMA GLUTAMYL TRANSPEPTIDASE - SERUM	13	U/L	●	Male : 10 - 71 Female : 6 - 42

**GLUCOSE - SERUM / PLASMA (FASTING)**

Test Name	Result	Unit	Level	Range
Glucose - Plasma (Fasting)	95	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)	106	mg/dL	●	70-140

**GLYCOSYLATED HEMOGLOBIN (HBA1C) - WHOLE BLOOD**

Test Name	Result	Unit	Level	Range
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● Within Normal Range    ● Borderline High/Low    ● Out of Range

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Glycosylated Hemoglobin (HbA1c)	5.6	%	●	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
Estimated Average Glucose.	114.02			

### LFT (LIVER FUNCTION TEST)

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Test Name	Result	Unit	Level	Range
PROTEIN TOTAL - SERUM / PLASMA	7.39	g/dL	●	6.00-8.00
PROTEIN TOTAL - SERUM / PLASMA	7.39	g/dL	●	6.00-8.00
ALBUMIN - SERUM	4.39	g/dL	●	Adult(18 - 60 Yr): 3.5 - 5.2
ALBUMIN - SERUM	4.39	g/dL	●	Adult(18 - 60 Yr): 3.5 - 5.2
Globulin-Serum/Plasma	3.00		●	2.20-4.20
Globulin-Serum/Plasma	3.00		●	2.20-4.20
A/G ratio	1.46		●	1.00-2.00
A/G ratio	1.46		●	1.00-2.00

### THYROID PROFILE (T3,T4 AND TSH)

Test Name	Result	Unit	Level	Range
TOTAL T3: TRI IODOTHYRONINE - SERUM	1.7	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	88	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	1.07	µIU/mL	●	14-120 years : 0.27 - 4.20

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### URIC 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	3.3	mg/dL	●	Male : 3.4-7.0 Female : 2.4-5.7

### BUN (BLOOD UREA NITROGEN)

Test Name	Result	Unit	Level	Range
BUN (BLOOD UREA NITROGEN)	7	mg/dL	●	6-20
UREA - SERUM / PLASMA	15	mg/dL	●	15 - 50

### LIPID PROFILE - SERUM

Test Name	Result	Unit	Level	Range
Total Cholesterol	197	mg/dl	●	0 - 200 : Desirable 200 - 240 : Borderline High 240 - 280 : High > 280 : Very High
Triglycerides - Serum	145	mg/dL	●	0-150
HDL CHOLESTEROL - SERUM / PLASMA (Direct Enzymatic Colorimetric)	52 *	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)	140 *	mg/dL	●	100 : Optimal 100-129 : Near Optimal 130-159 : Borderline High 160-189 : High ≥190 : Very High
VLDL CHOLESTEROL	29		●	< 40 mg/dl
C/H RATIO	4		●	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.

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Investigations Not Done / Not Yet Reported

**Haematology**

STOOL ROUTINE

**Histopathology**

CONVENTIONAL PAP SMEAR /CERVICAL SMEAR

**CARDIOLOGY**

ECHO/TMT

ECG

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**Executive Summary**

- .BODY WEIGHT 58.3 KG, IDEAL BODY WEIGHT 44-53 KG
  - .DYSLIPIDEMIA
  - .ECG – NORMAL
  - TMT — TEST IS BORDERLINE POSITIVE, EXERCISE TIME 5:38, WORKLOAD 7.0 METS
  - .USG ABDOMEN – B/L RENAL CALYCEAL CALCULII AS DESCRIBED, NO EVIDENCE OF HYDRONEPHROSIS OR HYDROURETER OON EITHER SIDE AT PRESENT
  - .CHEST X-RAY - NORMAL
  - .VISION – NORMAL
  - .DENTAL - AS PER DOCTOR ADVICE
- Early re-epitization changes in left foot leads.*

**Wellness Prescription**

**Advice On Diet :-**

- BALANCED DIET---
- LOW FAT DIET

**Advice On Physical Activity :-**

- REGULAR WALK FOR 30 MINS FOR HEALTH,
- 60 MINS WALK FOR WEIGHT REDUCTION
- PRACTICE YOGA AND MEDITATION
- MAINTAIN WEIGHT BETWEEN 44-53 KG

**Follow-up and Review Plan**

- CHECK LIPID PROFILE EVERY 6 MONTHS

*Consultant*



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

**Dr. SHASHIKANT NIGAM**

AHC Physician / Consultant Internal Medicine

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Note :- The Health Check-up examinations and routine investigations have been performed. However, it may not be able to detect all the diseases. Any new or persisting symptoms should be reported to the attention of the Consulting Physician. Additional tests, consultations and investigations may be required in some cases.

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



AHIL.0000495697

Mrs. DIMPALBEN  
BHARATKUMAR DARJI

30 Year(s) / Female



**DENTISTRY**

Name : ..... Date : 18/11/22 Unit No. : .....  
 Occupation : ..... Ref. Physician : .....  
 Age : ..... Sex :  Male  Female Copies to : .....

**DENTAL RECORD**

ALLERGIES : - NA

PAIN : Score (0-10) 0 Location : ..... Character : .....

DENTAL CLEANING HABIT  Once  Twice  Occasionally  
 Brush  Finger  Stick  Any other  
 Tooth Paste  Powder  Any other

DO THE GUMS BLEED WHEN YOU BRUSH YOUR TEETH?  Yes  No

ARE YOUR TEETH SENSITIVE TO HEAT / COLD?  Yes  No

ORAL HYGIENE  Good  Fair  Poor

ORAL TISSUE EXAMINATION	PERIODONTAL EXAMINATION	OCCLUSION
NORMAL FINDINGS IN DISEASE	MILD MOD SEV	CLASS I II III CROSSBITE
Lips : Cheeks : Tongue : Floor of the mouth : Palate : Tonsillar Area : Any other :	Gingivitis <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Calculus <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Recession <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Periodontal Pockets <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Attrition <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Erosion <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Mobility <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Hypoplasia Impaction <u>8/8</u> Non-vital Fracture Abscess Ulcers Caries Missing Teeth Supernumerary Others

PRESENT COMPLAINT : - PAIN TO CLEANING


PRE-MEDICAL HISTORY:  DM  HTN  Thyroid  Acidity  Pregnancy  
 Anticoagulant  Under Drug Therapy  
- NA - Hypertension



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## DEPARTMENT OF RADIOLOGY AND IMAGING SCIENCES

**Patient Details** : Mrs. DIMPALBEN BHARATKUMAR DARJI | Female | 30Yr 9Mth 28Days  
**UHID** : AHIL.0000495697 **Patient Location:** AHC  
**Patient Identifier:** AHILAH175287   
**DRN** : 122129530 **Completed on :** 16-NOV-2022 09:06  
**Ref Doctor** : DR. SHASHIKANT NIGAM

### X-RAY CHEST PA

#### FINDINGS :

Lung fields are clear.

Cardio thoracic ratio is normal.

Both costophrenic angles are clear.

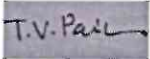
Domes of diaphragm are well delineated.

Bony thorax shows no significant abnormality.

#### IMPRESSION

NORMAL STUDY.

— END OF THE REPORT —



TIRTH VINAYKUMAR PARIKH

Printed on : 16-Nov-2022 14:16

Printed By : 153182

Reported By : 717876

Page 1 of 1

For Enquiry/Appointments Contact +91 76988 15003 / +91 79 66701880

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Saving time. Saving lives.






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## DEPARTMENT OF RADIOLOGY AND IMAGING SCIENCES

**Patient Details** : Mrs. DIMPALBEN BHARATKUMAR DARJI | Female | 30Yr 9Mth 28Days  
**UHID** : AHIL.0000495697 **Patient Location:** AHC  
**Patient Identifier:** AHILAH175287   
**DRN** : 222059111 **Completed on :** 16-NOV-2022 09:30  
**Ref Doctor** : DR. SHASHIKANT NIGAM

### USG WHOLE ABDOMEN

#### FINDINGS :

Liver appears normal in size and shows uniform normal echotexture. No evidence of focal or diffuse 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 10 cms and shows uniform echotexture.

Few renal calyceal calculi noted on right side, largest 5.3 mm at lower calyx. Approx. 4.6 mm sized calculus noted in left lower calyx. No evidence of hydronephrosis or hydroureter noted on either side at present.

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.

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.

On transabdominal scan,

Uterus measures 7.9 x 4.5 x 5.2 cm. ( LMP 12.11.2022 ). Endometrial thickness is 6 mm.

Uterus is anteverted and appears normal in size and echotexture. No focal lesion is seen.

Both ovaries are normal in size and echopattern.

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Mrs. DIMPALBEN BHARATKUMAR DAR AHIL.0000495697

AHILAH175287

**USG WHOLE ABDOMEN**

No free fluid is seen in Pouch Of Douglas.  
No definite evidence of adnexal/pelvic mass is seen.

**IMPRESSION :**

Bilateral renal calyceal calculi as described, no evidence of hydronephrosis or hydroureter on either side at present.

--- END OF THE REPORT ---

*T.V. Parikh*

TIRTH VINAYKUMAR PARIKH

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Reported By: Dr. Office 17876  
19, Bishop Gardens, R.A. Puram, Chennai - 600 028  
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For online appointment : www.askapollo.com



For online appointment : www.askapollo.com  
Keep the records carefully and bring them along during your next visit to our Hospital



**REQUISITION FORM EXFOLIATIVE CYTOLOGY**  
DEPARTMENT OF GYNECOLOGY & CYTOLOGY

AHIL.0000495697			
Name: .....	Mrs. DIMPALBEN .....	Date : .....	UHID No: .....
Occupation	BHARATKUMAR DARJI .....	IP No. : .....	Out Patient.: .....
Age: .....	30 Year(s) / Female IF	Ref. Physician: .....	
Address: ...		Copies to: .....	

**REQUEST FOR INVESTIGATION**

Cytology No. (Dept. Use Only):

Previous cytology done Yes / No

If Yes Previous No.:

Date & Time of Collection:

Investigation Required:

- Routine Follow Up
- Cervical Smear
- Vaginal Smear
- Endometrial Wash
- Other(Specify)

Brief Clinical Notes:

Menstrual History:

LMP:

Post/Perimenopausal

Contraceptive Used:

Vaginal Discharge:

Previous Gynecological History:

Hormonal Therapy:

Hormonal Status:

Details of Previous Surgery:

Receiving Date & Time	Signature of Doctor
-----------------------	---------------------



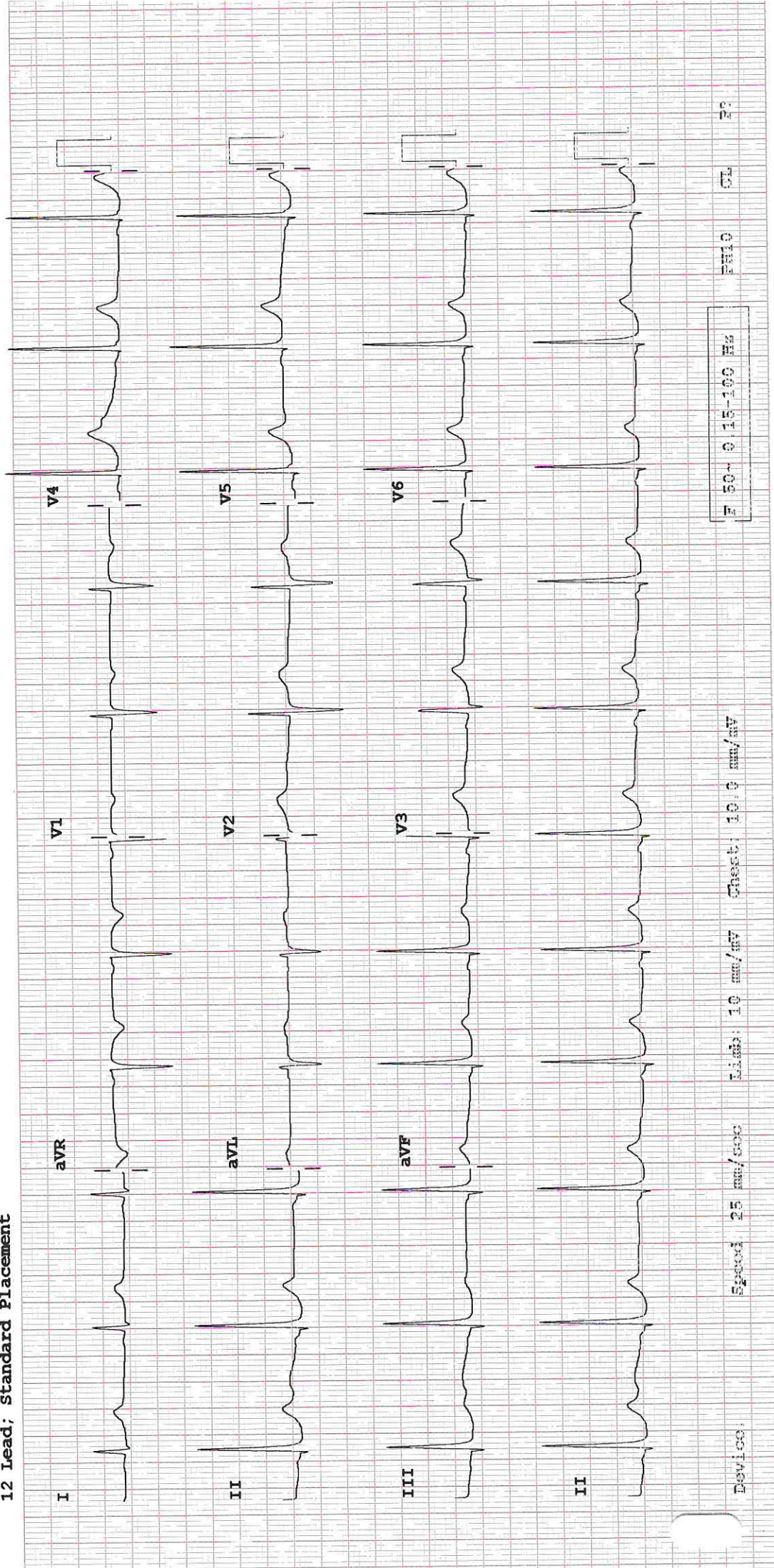
Rate 65

PR 116  
QRS 87  
QT 403  
QTc 419

--AXIS--

P 56  
QRS 76  
T 38

12 Lead; Standard Placement



F 50-0 15-100 Hz

Speed: 25 mm/sec Sens: 10 mm/mV

Device:

FW10 CL P2



ID: 000495697

Vist: MEDIWHEEL

30years  
152cm

Asian  
58kg

Female

BRUCE

Total Exercise time: 5:38

Max HR: 167bpm 87% of max predicted 190bpm  
Max BP: 130/80  
Maximum workload: 7.0METS

Reason for Termination: Patient fatigue

Comments: TEST IS BORDERLINE POSITIVE FOR INDUCIBLE ISCHEMIA AT MODERATE WORKLOAD AND NORMAL HEYMODYNAMIC RESPONSE ST-T CHANGES SEEN DURING EXERCISE AND RECOVERY NO GALLOP // MURMUR AT PEAK EXERCISE TEST TERMINATED DUE TO PATIENT FATIGUE AND THR ACHIEVED MODERATE EFFORT TOLERANCE.

Referred by: DR.SAMEER DANI, MHC  
Test ind:

BASELINE EXERCISE  
0:00  
92bpm  
BP: 110/70

MAX ST EXERCISE  
5:00  
167bpm  
BP: 124/70

PEAK EXERCISE  
5:38  
165bpm  
BP: 130/80

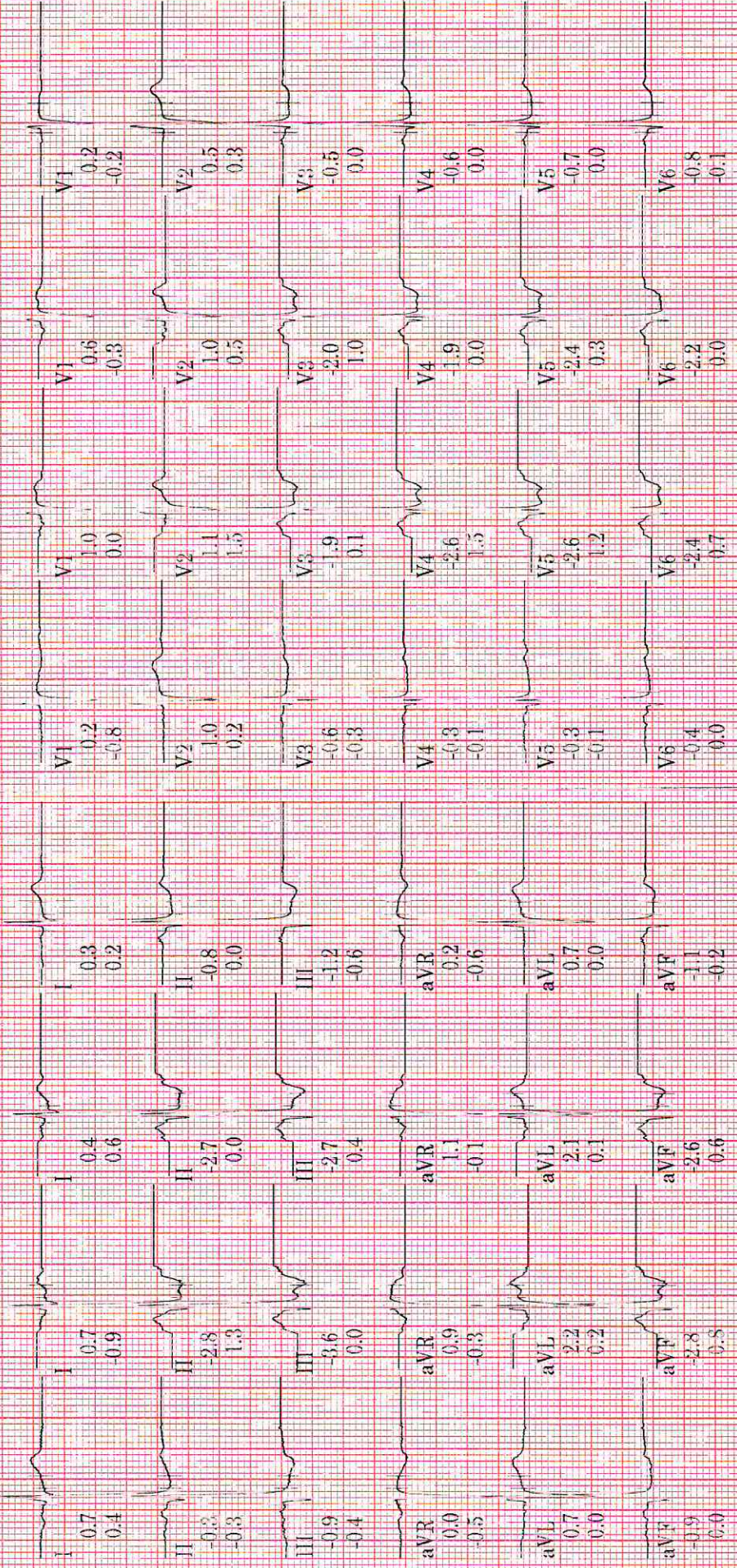
TEST END RECOVERY  
7:37  
99bpm  
BP: 120/70

BASELINE EXERCISE  
0:00  
92bpm  
BP: 110/70

MAX ST EXERCISE  
5:00  
167bpm  
BP: 124/70

PEAK EXERCISE  
5:38  
165bpm  
BP: 130/80

TEST END RECOVERY  
7:37  
99bpm  
BP: 120/70



Technician: FALGUN VIHOL

Unconfirmed

APOLLO HOSPITALS INTERNATIONAL LIMITED

MAC55-010B

Lead  
ST(mm)  
Slope(mV/s)



**OBSTETRICS & GYNAECOLOGY - AHC**

Name : .....	AHIL.0000495697	Date : 16/11/2022	Unit No. : .....
Occupation : .....	Mrs. DIMPALBEN BHARATKUMAR DARJI	Ref. Physician : Dr. Sheroo Z.	.....
Age : .....	30 Year(s) / Female	Copies to : .....	.....



**GYNAEC CHECK UP**

Chief Complaint:

None. G2 P1 A1 L1

Children: 1 ♂

Weight:

Deliveries: LSCS

BP:

Last Child: Mch / 3 years / LSCS

Abortions: 1 - D&C 3 months back

Breasts: Normal.

Periods: Regular 2-3 days  
25-28

PAP Smear: Not taken (4th day of period)

LMP: 12/11/22

Previous Medical H/O:  
None.

Menopause: -

FIH/O: HTN, Hypothyroid

G. Condition: fit

Previous Surgical H/O:

P/A: Soft.

D&C 3 months back  
LSCS 3 years back.

S/E: -

P/V: -

P/R: -

Impression:

→ LDRR

*Sheroo Z.*  
Doctor Signature  
Date & Time

16/11/2022  
10:51 AM.



**OPHTHAL**

AHIL.0000495697  
Mrs. DIMPALBEN  
BHARATKUMAR DARJI  
30 Year(s) / Female

**ON RECORDS**

Name :

UHID :

Date : 16/11/22



Distance Vision :

Right Eye - 6/6

Left Eye - 6/6

Near Vision :

Right Eye : N6

Left Eye : N6

APLN.TN - Right Eye 14 Left Eye- 16 mmHg

Both Eye - Colour Vision

Normal

Both Eye - Anterior Segment Examinations -

WNL

Both Eye Posterior Segment Examinations -

WNL

Dr. Jagdish Sinha  
MS (Ophthalmology)  
Jr. Consultant

Apollo Hospitals International Ltd., Gandhinagar,  
Gujarat-382428, INDIA. Regd. No.: G-68792

Doctor's Signature

Ophthalmologist Name