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Ms. SAKSHI GROVER (33 /F)

UHID : AHIL.0000808323

AHC No : AHILAH169538

Date : 15/10/2022

MEDIWHEEL-FULL BODY CHK-BELOW40-FEMALE

Dear Ms. SAKSHI GROVER

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

Apollo Hospitals International Limited
Plot No.-1A, Bhat, GIDC, Gandhinagar, Gujarat - 382428, India.
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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 : Ms. SAKSHI GROVER (33 /F)

Date : 15/10/2022

Address :

Examined by : Dr. SHASHIKANT NIGAM

UHID : AHIL.0000808323

MEDIWHEEL-FULL BODY CHK-BELOW40-FEMALE

AHC No : AHILAH169538



Chief Complaints

For Annual health checkup
No specific complaints



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

ENT : - Nil Significant

Musculoskeletal system :

Spine and joints
- Nil Significant

Skin : - Nil Significant



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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

- Fistulectomy - 3 TIMES



Personal history

- Ethnicity - Indian Asian
- Marital status - Married
- Profession - corporate employed
- Diet - Vegetarian
- Alcohol - does not consume alcohol
- Smoking - No
- Chews tobacco - No
- Physical activity - Moderate



Family history

- Father - alive
- Aged - 62
- Mother - has expired
- Aged - 40
- Brothers - 1
- Hypertension - father
- Coronary artery disease - none
- Cancer - None



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Thyroid/other - father
endocrine disorder
CVA - father

Physical Examination



General

General appearance - normal
Build - normal
Height - 158
Weight - 79.5
BMI - 31.85
Pallor - No
Oedema - no



Cardiovascular system

Heart rate (Per minute) - 80
Rhythm - Regular
- B.P. Supine
Systolic(mm of Hg) - 118
Diastolic(mm of Hg) - 90
Heart sounds - S1S2+

Respiratory system

Breath sounds - Normal vesicular breath sounds



Abdomen

Organomegaly - No
Tenderness - No

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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	25	mL		
Specific Gravity	1.010			
Colour:	Pale-Yellow			
Transparency:	Clear			
pH	6			
Protein :	Nil			
Sugar:	Nil			
Blood:	Negative			
Ketone	Absent			
Bile Pigments:	Absent			
Urobilinogen	Nil	E.U./dL		
Nitrite	Negative			
Pus Cells	1-2 /h.p.f			0-5
RBC	Nil	/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)	10.8 *	gm%	●	12-16
Packed cell volume(Calculated)	34.4 *	%	●	36-46
RBC COUNT (Impedance)	5.72 *	Million/ul	●	3.8-5.2
MCV (From RBC Histogram)	60.1 *	fl	●	80-100
MCH(Calculated)	18.84 *	pg	●	27-32
MCHC(Calculated)	31.4	%	●	31-36
RDW(Calculated)	17.8 *	%	●	11.5-14.5
WBC Count (Impedance)	9541	/cu mm	●	4000-11000

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Neutrophils	67	%	●	40-75
Lymphocytes	27	%	●	20-40
Monocytes	04	%	●	2-10
Eosinophils	02	%	●	01-06
Basophils	00	%	●	0-1
Platelet Count (Impedance)	350600	/cu mm	●	150000-450000
MPV (Calculated)	8.6	fl	●	7-11
RBC:	Erythrocytosis noted			
RBC::	Eliptocytes (+)-Anisocytosis (+)-Hypochromia (+)-Microcytes (+)			
ERYTHROCYTE SEDIMENTATION RATE (ESR) (Automated/ optic-electronic)	9	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	18	U/L	●	0-35
ALKALINE PHOSPHATASE - SERUM/PLASMA	106 *	U/L	●	Adult(Female): 35 - 104
AST (SGOT) - SERUM	19	U/L	●	>1 year Female : <32

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Test Name	Result	Unit	Level	Range
Total Bilirubin	0.286 *	mg/dL	●	0.300-1.200
Direct Bilirubin	0.133	mg/dL	●	Upto 0.3 mg/dl
Indirect Bilirubin	0.153	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

CREATININE - SERUM / PLASMA

Test Name	Result	Unit	Level	Range
CREATININE - SERUM / PLASMA	0.79	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)	91	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)	94	mg/dL	●	70-140

GLYCOSYLATED HEMOGLOBIN (HBA1C) - WHOLE BLOOD

Test Name	Result	Unit	Level	Range
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Glycosylated Hemoglobin (HbA1c)	5.5	%	●	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. 111.15

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Test Name	Result	Unit	Level	Range
PROTEIN TOTAL - SERUM / PLASMA	7.58	g/dL	●	6.00-8.00
PROTEIN TOTAL - SERUM / PLASMA	7.58	g/dL	●	6.00-8.00
ALBUMIN - SERUM	4.57	g/dL	●	Adult(18 - 60 Yr): 3.5 - 5.2
ALBUMIN - SERUM	4.57	g/dL	●	Adult(18 - 60 Yr): 3.5 - 5.2
Globulin-Serum/Plasma	3.01		●	2.20-4.20
Globulin-Serum/Plasma	3.01		●	2.20-4.20
A/G ratio	1.52		●	1.00-2.00
A/G ratio	1.52		●	1.00-2.00

THYROID PROFILE (T3,T4 AND TSH)

Test Name	Result	Unit	Level	Range
TOTAL T3: TRI IODOTHYRONINE - SERUM	1.8	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	118	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	2.25	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	5.6	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)	12	mg/dL	●	6-20
UREA - SERUM / PLASMA	25	mg/dL	●	15 - 50

LIPID PROFILE - SERUM

Test Name	Result	Unit	Level	Range
Total Cholesterol	202 *	mg/dl	●	0 - 200 : Desirable 200 - 240 : Borderline High 240 - 280 : High > 280 : Very High
Triglycerides - Serum	99	mg/dL	●	0-150
HDL CHOLESTEROL - SERUM / PLASMA (Direct Enzymatic Colorimetric)	44 *	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)	141 *	mg/dL	●	100 : Optimal 100-129 : Near Optimal 130-159 : Borderline High 160-189 : High ≥190 : Very High
VLDL CHOLESTEROL	20		●	< 40 mg/dl
C/H RATIO	4		●	0-4.5

X-RAY CHEST F.F.A

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



Within Normal Range



Borderline High/Low



Out of Range



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Executive Summary



- .BODY WEIGHT 79.5 KG,DEAL BODY WEIGHT 47-57 KG
- .DYSLIPIDEMIA
- .ECG - NORMAL SINUS RHYTHM / ST & V1-V3
- .TMT — TEST IS NEGATIVE,EXERCISE TIME 8:09 ,WORKLOAD 10.1 METS
- .USG ABDOMEN - NORMAL STUDY
- .CHEST X-RAY - NORMAL
- .EYE – NORMAL

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 47-57 KG

Follow-up and Review Plan



CHECK LIPID PROFILE EVERY 6 MONTHS

Adv Hb Electrophoresis



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

Printed By : MUKTA S ADALTI

[Signature]
Dr.SHASHIKANT NIGAM

AHC Physician / Consultant Internal Medicine

Dr. Shashikant Nigam

MBBS, MD (Gen. Med.)

Consultant Internal Medicine

Apollo Hospitals International Gandhinagar,
Gujarat-382428, INDIA. Regd. No. : G-21961


Note :- The Health Check-up examinations and routine investigations are 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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DEPARTMENT OF RADIOLOGY AND IMAGING SCIENCES

Patient Details : Ms. SAKSHI GROVER | Female | 33Yr 10Mth 23Days
UHID : AHIL.0000808323 **Patient Location:** AHC
Patient Identifier: AHILAH169538 
DRN : 122116903 **Completed on :** 15-OCT-2022 09:25
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. Parikh

TIRTH VINAYKUMAR PARIKH

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Patient Details : Ms. SAKSHI GROVER | Female | 33Yr 10Mth 23Days
UHID : AHIL.0000808323 **Patient Location:** AHC
Patient Identifier: AHILAH169538 
DRN : 222052913 **Completed on :** 15-OCT-2022 09:45
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 10.2 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.

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.

Uterus measures 7.8 x 4.5 x 5.6 cm. Endometrial thickness is 7.4 mm.

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

Myometrial and endometrial echopattern appear normal.

Both ovaries are normal in size and echopattern.

No free fluid is seen in Pouch Of Douglas.

No definite evidence of adnexal/pelvic mass is seen.

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AHILAH169538

USG WHOLE ABDOMEN

IMPRESSION :
Normal study.

--- END OF THE REPORT ---

T.V. Parikh

TIRTH VINAYKUMAR PARIKH

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AHIL.0000808323

GYNAECOLOGY - AHC

Name :
Occupation :
Age :
Ms. SAKSHI GROVER
33 Year(s) / Female



Date : 15/10/22 Unit No. :
Ref. Physician : Dr. Kirti Nair
Copies to :

GYNAEC CHECK UP

Chief Complaint: *NAD*

Children: *Nulliparous*

Weight:

Deliveries:

BP:

Last Child:

Abortions:

Breasts: *Normal*

Periods: *Regular / 4-5 days / 28-32 days*

PAP Smear: *Taken*

LMP: *10/10/22*

Previous Medical H/O: *no*

Menopause:

G. Condition:

Previous Surgical H/O: *Fistula - 3 times*

P/A: *Soft*

S/E:

P/V:

*UT NS AV
Gx Healthy*

PH - DM, HTN.

P/R:

Impression:

Doctor Signature
Date & Time

OPHTHALM

AHIL.0000808323

Ms. SAKSHI
GROVER

33 Year(s) / Female



RECORDS

Date: 15/10/22

Name :

UHID :

Distance Vision :

Right Eye -

6/6

Left Eye -

(aided) 6/6

Near Vision :

Right Eye :

N6

Left Eye :

(unaided) N6

- Megabrom eye drop
bd (BE)
x 15 days
↳ stop

- Gentecol eye
drop bd (BE)
x 2 wk

- Telb (BE)
x 2 wk.

APLN.TN - Right Eye

14

Left Eye -

12 mmHg

Both Eye - Colour Vision

Normal

Both Eye - Anterior Segment Examinations -

wn

Both Eye Posterior Segment Examinations -

wn

Jugh
Dr. Jagriti Chitla
MS (Ophthalmology)
Jr. Consultant
Apollo Hospitals International Ltd. Gurgaon
Gurgaon-122028, INDIA. Regd. No.: G-08792

Doctor's Signature

Ophthalmologist Name

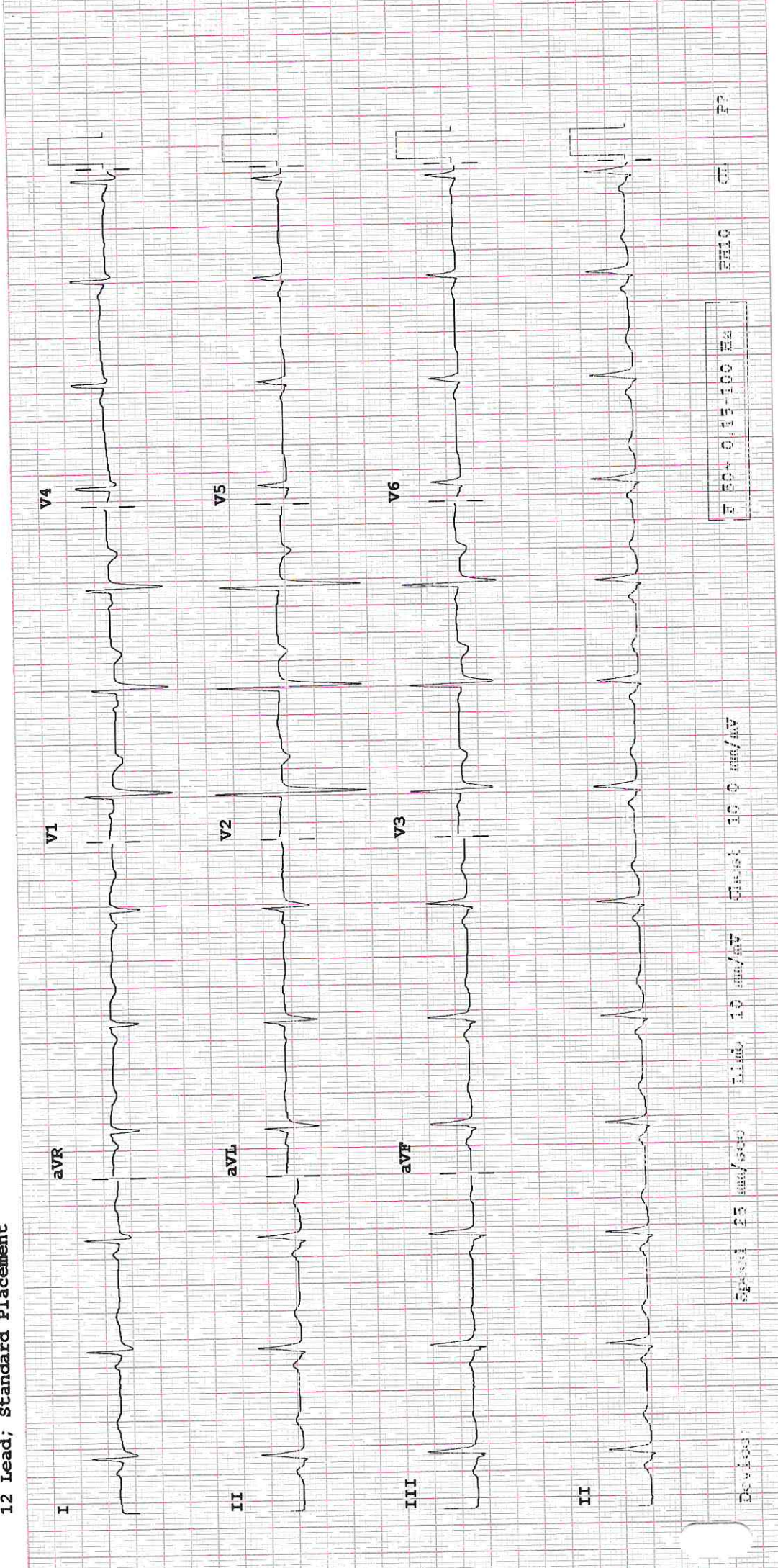
Rate 76

PR 152
QRSD 97
QT 375
QTc 422

--AXIS--

P 57
QRS 79
T 47

12 Lead; Standard Placement



PHILIPPS
0.15-100 Hz

Speed 25 mm/sec Limb 10 mm/mV Chest 10 mm/mV

PH10 CL P3

Devices

ID: 000808323

Visit: MEDIWHEEL
33years
158cm
15-Oct-2022
12:04:05

Female

Asian
79kg

BRUCE Total Exercise time: 8:09

Max HR: 161bpm 86% of max predicted 187bpm
Max BP: 140/88
Maximum workload: 10.1METS
Reason for Termination: Patient fatigue

25.0 mm/s

10.0 mm/mV
100hz

Referred by: DR.SUBIR GHOSH, MHC
Test ind:

Comments: TEST IS NEGATIVE FOR INDUCIBLE ISCHEMIA AT HIGH WORKLOAD
NORMAL HEYMODYNAMIC RESPONSE
NO ANGINA OCCURRED, NO ARRHYTHMIAS AT PROVOKED
NO GALLOP / MURMUR AT PEAK EXERCISE
TEST TERMINATED DUE TO THR ACHIEVED AND PATIENT FATIGUE
GOOD EFFORT TOLERANCE.

BASELINE EXERCISE	MAX ST EXERCISE	PEAK EXERCISE	TEST END RECOVERY	BASELINE EXERCISE	MAX ST EXERCISE	PEAK EXERCISE	TEST END RECOVERY
0:00 97bpm BP: 110/70	7:28 160bpm BP: 120/70	8:09 159bpm BP: 130/80	8:06 100bpm BP: 120/70	0:00 97bpm BP: 110/70	7:28 160bpm BP: 120/70	8:09 159bpm BP: 130/80	8:06 100bpm BP: 120/70
I 0.0 0.2	I 0.5 0.4	I 0.6 0.7	I 0.0 0.4	V1 0.4 -0.1	V1 0.6 -0.3	V1 0.7 -1.0	V1 0.1 -0.8
II -0.5 -0.1	II -2.4 0.0	II -2.1 1.0	II 0.1 0.7	V2 0.3 0.2	V2 1.3 0.6	V2 1.1 0.0	V2 0.5 0.4
III -0.5 -0.4	III -2.9 -0.1	III -2.6 0.0	III -0.6 0.0	V3 -0.4 0.0	V3 -0.9 1.0	V3 -1.4 0.8	V3 0.0 0.6
aVR 0.2 -0.5	aVR 0.7 -1.1	aVR 1.0 -0.2	aVR 0.2 -0.8	V4 -0.4 0.0	V4 -1.9 1.0	V4 -1.3 0.8	V4 -0.7 0.4
aVL 0.2 0.0	aVL 1.3 -0.2	aVL 1.8 0.9	aVL 0.0 -0.1	V5 -0.4 -0.2	V5 -1.4 -0.2	V5 -1.0 0.9	V5 0.3 0.3
aVF -0.5 -0.3	aVF -2.2 -0.4	aVF -2.6 0.2	aVF -0.6 0.5	V6 -0.3 0.0	V6 -1.2 -0.2	V6 -1.2 0.5	V6 0.1 0.4

Technician: FALGUNI VIHOL

APOLLO HOSPITALS INTERNATIONAL LIMITED
Unconfirmed

MAC55-010B

Lead
ST(mm)
Slope(mV/s)