

# Mr. GAUTAM MAKWANA (32 /M)

UHID

AHIL.0000802633

AHC No

AHILAH165904

Date

24/09/2022

Apollo HOSPITALS

MEDIWHEEL-FULL BODY CHK-BELOW40-MALE

#### Dear Mr. GAUTAM MAKWANA

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 <a href="https://www.apollo247.com/specialties">https://www.apollo247.com/specialties</a> 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 : 24/09/2022 GAR, GANDHI NAGAROLO

Address: 36 KANTAM RESIDENCY RAILWAY EAST KALOL, GANDHI NAGAR, GANDHI NA Organization is Accredited by Joint Commission International

GUJARAT, INDIA

Examined by : Dr. SHASHIKANT NIGAM

UHID

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MEDIWHEEL-FULL BODY CHK-BELOW40-MALE

AHC No : AHILAH165904



# **Chief Complaints**

For Annual health checkup No specific complaints

### **Present Known illness**

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



# **Drug Allergy**

NO KNOWN ALLERGY

:24/09/2022



#### 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

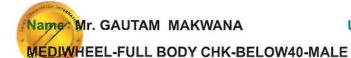
Eyes

2

- Nil Significant

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Apollo Hospitals International Limited Plot No.-1A, Bhat, GiDC. Gandhinagar, Gujarat - 3824 Phone : +91 79 6501800 | Fax No. : +91 79 65 E-mail : info@apolloahd.com | www.ahmedabad apollol



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Nil Significant

Musculoskeletal system

Spine and joints

- Nil Significant

Skin

•

- Nil Significant

General symptoms

•

- Nil Significant



# Past medical history

Do you have any

- No

allergies?

Allergies

- Nil

Past medical history

- nil significant

Covid 19

- No

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

- 1

Male

- 1

Profession

- corporate employed

Diet

Mixed Diet

Alcohol

- does not consume alcohol

Smoking

- No

Chews tobacco

- No

Physical activity

- Moderate

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For online appointment: www.askapollo.com

Keep the records carefully and bring them along during your next visit to our Hespital

# Family history

Father

- has expired

Aged

59

Mother

alive

Aged

50

**Brothers** 

Coronary artery

- none

disease Cancer

- father

Type

- LUNG

# **Physical Examination**



#### General

General appearance

- normal

Build

- normal

Height

- 165.8

Weight

- 84.4

BMI

-30.7

Pallor

- No

Oedema

- no



## Cardiovascular system

Heart rate (Per minute)

- 68

Rhythm

- Regular

Systolic(mm of Hg)

- 110

Diastolic(mm of Hg)

- 70

- B.P. Sitting

Heart sounds

- S1S2+

#### Respiratory system

Breath sounds

- Normal vesicular breath sounds



#### ) Abdomen

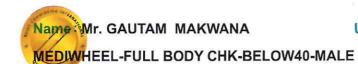
Organomegaly

- No

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AHC No : AHIL AHI 65904

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Organizatio Tenderness

- No

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Printed By :

MUKTA S ADALTI

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# Joint Commission to According to Joint Commission to PRINE 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.

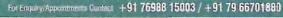
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Test Name	Result	Unit	Level	Range			
Volume	30	mL					
Specific Gravity	1.005						
Colour:	Pale-Yellow						
Transparency:	Clear						
pH	6						
Protein:	Nil						
Sugar:	Nil						
Blood:	Negative						
Ketone	Absent						
Bile Pigments:	Absent						
Urobilinogen	Nil	E.U./dL					
Nitrite	Negative						
Pus Cells	1-2 /h.p.f			0-5			
RBC	Nil	/hpf		0-5/hpf			
Epithelial Cells	Occassional						
Casts:	Absent						
Crystals:	Absent						

#### COMPLETE BLOOD COUNT WITH ESR

Test Name	Result	Unit	Level	Range
Hemoglobin (Photometric Measurement)	13.6	gm%		13.0-17.0
Packed cell volume(Calculated)	41.1	%		40-50
RBC COUNT (Impedance)	4.79	Million/ul		4.5-5.9
MCV (From RBC Histogram)	85.8	fl		80-100
MCH(Calculated)	28.5	pg		27-32
MCHC(Calculated)	33.2	%		31-36
RDW(Calculated)	13.7	%	•	11.5-14.5
WBC Count (Impedance)	5041	/cu mm		4000-11000

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Borderline High/Low

Out of Range



Within Normal Range

Organization by Joint Commis

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on is isolic	Accredited Neutrophils	37 *	%	•	40-75	HOSPITA	
	Lymphocytes	55 *	%		20-40		
	Monocytes	07	%		2-10		
	Eosinophils	01	%		01-06		
	Basophils	00	%		0-1		
	Platelet Count (Impedance)	268800	/cu mm		150000-450000		
	MPV (Calculated)	9.8	fl		7-11		
	RBC:	Normocytic Nor	mochromic cells				
	WBC:	Lymphocytosis noted					
	Platelets:	Adequate on the					
	ERYTHROCYTE SEDIMENTATION RATE (ESR) (Automated/ optic— electronic)	05	mm/1st hr		0-15		
	URINE GLUCOSE(FASTING)						

UHID : AHIL.0000802633

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
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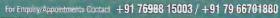
BLOOD GROUP: O Positive

#### 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.

Within Normal Range	Borderline	High/Low	Out	of Range
AST (SGOT) - SERUM	27	U/L		> 1 year Male : <40
ALKALINE PHOSPHATASE - SERUM/PLASMA	116	U/L		Adult(Male): 40 - 129
ALT(SGPT) - SERUM / PLASMA	42	U/L	•	0-50
Test Name	Result	Unit	Level	Range

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The state of the s				
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y Joint Commission International Total Bilirubin	0.453	mg/dL	0.300-1.200	
retar will abilit	0.100		0.000 1.200	

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Direct Bilirubin 0.164 mg/dL Upto 0.3 mg/dl

Indirect Bilirubin mg/dL 0.289 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 Unit Result Level Range CREATININE - SERUM / PLASMA 0.94 mg/dL Adult Male: 0.6 - 1.3

#### LFT (LIVER FUNCTION TEST)

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Test Name	Result	Unit	Level	Range	
GGTP: GAMMA GLUTAMYL TRANSPEPTIDASE - SERUM	27	U/L	•	Male : 10 - 71 Female : 6 - 42	

Result

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

Glucose - Plasma (Fasting)	99	ma/dL	70 - 100 : Normal
Glucose - Flasifia (Fastifig)	99	mg/aL	100 - 125 : Impaired Glucose Tolerance

>= 126 : Diabetes Mellitus

Unit

Level

Range

#### GLUCOSE - SERUM / PLASMA (POST PRANDIAL) - PPBS

Test Name	Result	Unit	Level	Range
Glucose - Plasma (Post Prandial)	121	mg/dL	•	70-140

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

**Test Name** Result Unit Level Range

Within Normal Range Borderline High/Low Out of Range

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**Test Name** 



Organization is AGINEOSylated Hemoglobin (HbA1c)

5.8 \*

%

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.

119.76

#### 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		
PROTEIN TOTAL - SERUM / PLASMA	7.81	g/dL		6.00-8.00		
PROTEIN TOTAL - SERUM / PLASMA	7.81	g/dL		6.00-8.00		
ALBUMIN - SERUM	5.01	g/dL		Adult(18 - 60 Yr): 3.5 - 5.2		
ALBUMIN - SERUM	5.01	g/dL		Adult(18 - 60 Yr): 3.5 - 5.2		
Globulin-Serum/Plasma	2.8			2.20-4.20		
Globulin-Serum/Plasma	2.8			2.20-4.20		
A/G ratio	1.79			1.00-2.00		
A/G ratio	1.79			1.00-2.00		
THYROID PROFILE (T3,T4 AND TSH)						
Test Name	Result	Unit	Level	Range		

Test Name	Result	Unit	Level	Range
TOTAL T3: TRI IODOTHYRONINE - SERUM	2.4	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	129	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	0.92	μIU/mL	•	14-120 years : 0.27 - 4.20

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Within Normal Range



Borderline High/Low

Out of Range



# Organization is Accredited by Joint Commission ORIGE 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	5.3	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)	12	mg/dL		6-20
UREA - SERUM / PLASMA	26	mg/dL		15 - 50
LIPID PROFILE - SERUM				
Test Name	Result	Unit	Level	Range
Total Cholesterol	194	mg/dl	•	0 - 200 : Desirable 200 - 240 : Borderline High 240 - 280 : High > 280 : Very High
Triglycerides - Serum	116	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)	134 *	mg/dL	•	100 : Optimal 100-129 : Near Optimal 130-159 : Borderline High 160-189 : High >=190 : Very High
VLDL CHOLESTEROL	23			< 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

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# Organization is Arthur stigations Not Done / Not Yet Reported

Haematology

STOOL ROUTINE

CARDIOLOGY

ECHO/TMT

**ECG** 

Within Normal Range

Borderline High/Low



Out of Range

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# Organization is Accredited by Joint Commiss Exercistive Summary



BODY WEIGHT 84.4 KG ,IDEAL BODY 52-63 KG IMPAIRED GLUCOSE TOLERANCE

**DYSLIPIDEMIA** 

ECG - NORMAL

TMT — TEST IS NEGATIVE, EXERCISE TIME 8:31 ,WORKLOAD 10.1 METS

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USG ABDOMEN - GRADE I FATTY LIVER

X-RAY - NORMAL

**ENT-NORMAL** 

VISION - NORMAL

**DENTAL - AS PER DOCTOR ADVICE** 

# **Wellness Prescription**

#### Advice On Diet :-



BALANCED DIET LOW FAT DIET LOW CARBOHYDRATE DIET

#### Advice On Physical Activity :-

Printed By : MUKTA S ADALTI



REGULAR 30 MINUTES WALK FOR HEALTH AND 60 MINUTES FOR WEIGHT REDUCTION PRACTICE YOGA AND MEDITATION
MAINTAIN WEIGHT BETWEEN 52-63 KG

Dr.SHÁSHIKANT NIGAM

AHC Physician / Consultant Internal Medicine

Dr. Shashikant Nigam MBS, MD (Gen. Med.) Consultant Internal Medicine

Apollo Hospitals International Ltd., Gandhinager 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.

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#### DEPARTMENT OF RADIOLOGY AND IMAGING SCIENCES

Patient Details : Mr. GAUTAM MAKWANA | Male | 32Yr 10Mth 17Days

UHID : AHIL.0000802633 Patient Location: AHC

Patient Identifier: AHILAH165904

DRN : 222048848 Completed on : 24-SEP-2022 11:27

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 7.7 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.

Prostate is normal in size and echopattern.

IMPRESSION:

Grade I fatty liver.

Rest normal study.

Printed on: 24-Scp-2022 15:34 Printed By: 153182 Reported By: 717876 Page 1 of 2





Mr. GAUTAM MAKWANA

AHIL.0000802633

AHILAH165904

#### **USG WHOLE ABDOMEN**

--- END OF THE REPORT ---



DR. VAIBHAVI PATEL

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24-Sep-2022 15:34

Printed By: 153182

Reported By: 717876

Page 2 of 2







# DEPARTMENT OF RADIOLOGY AND IMAGING SCIENCES

Mr. GAUTAM MAKWANA | Male | 32Yr 10Mth 17Days **Patient Details** 

AHIL.0000802633 **Patient Location:** UHID

AHILAH165904 Patient Identifier:

24-SEP-2022 10:18 Completed on: 122108122 DRN

DR. SHASHIKANT NIGAM **Ref Doctor** 

# 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. Pail

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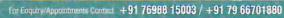
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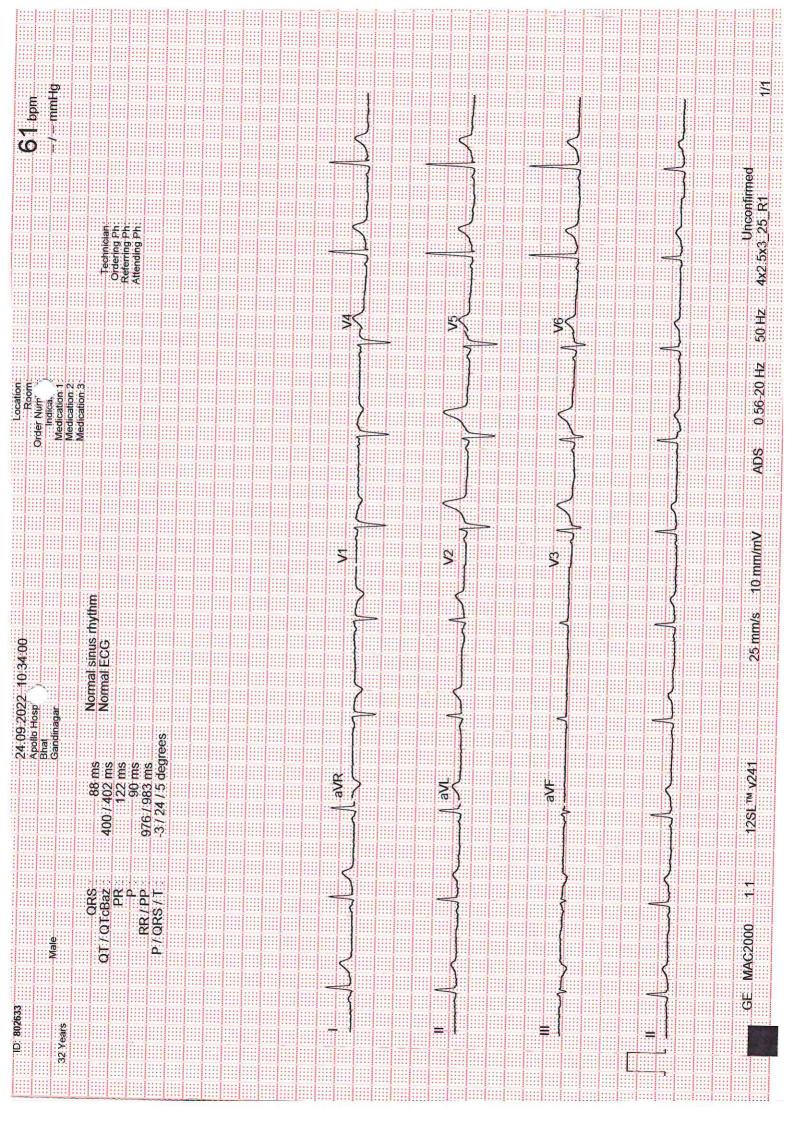




# PRESENT DENTAL HISTORY:

8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8

FUNCTIONAL	ASSESSMENT (Ability to perform routine activities): Todyu	
PSYCHOLOGIC	CALASSESSMENT: Normal Anxious Depressed	
INITIAL DIAGNO	osis: Togaro states A	
PLAN / INVEST	IGATION ORDERED :	
		0
PROPOSED CA		sel
EXPECTED OU	TCOME:  Briefed Yes No  ST: (Subject to change in course of disease)  Briefed Yes No	12/109/12
	DI. CHINA	
	IVESTIGATIONS REVIEWED, DIAGNOSIS AND ADVISED TREATMENTConsultant D  Apollo Hospitais Interna	itional Ltd., Gandhinagar
_		.: A-2761 725402226
PATIENT VISIT I	DOCTO	R'S SIGNATURE
Date & Time	Details	Signature
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т	HOSPITALS DUCHING LIVES
	OPTHALMIC EXAMINATION RECORDS
	Name: M. Grantan Date: 94/6/2
	Name: M. Grantan  UHID: 802633  Date: 24/6/2
	Distance Vision :
	Right Eye - 6/6
	Right Eye - 6 6
^	
	Near Vision :
	Right Eye: $N$ 6  Left Eye: $N$ 6
	Left Eye: N 6
	APLN.TN – Right Eye
$\cap$	Both Eye – Colour Vision
	Both Evo. Antonios Source L. E
	Both Eye – Anterior Segment Examinations –  Both Eye Posterior Segment Examinations –
	Both Eye Posterior Segment Examinations – W

AHMROP028V1

Dr. 18 Gritis Birtha Dr. 18 Gritis Birtha Dr. 18 Gritis Birtha Read Line: Geografia

Doctor's Signature

Ophthalmologist Name