



Mr. SHAILESHKUMAR NARANBHAI PATNI (30 /M)

UHID : AHIL.0000486547

AHC No : AHILAH179264

Date : 05/12/2022

MEDIWHEEL-FULL BODY CHK-BELOW40-MALE



Dear Mr. SHAILESHKUMAR NARANBHAI PATNI

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
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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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The Emergency Specialist
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Name : Mr. SHAILESHKUMAR NARANBHAI PATNI (30 /M)

Date : 05/12/2022



Address : AHMEDABAD, AHMEDABAD, AHMEDABAD, GUJARAT, INDIA

UHID : AHIL.000048654

Examined by : Dr. SHASHIKANT NIGAM

AHC No : AHILAH179264

MEDIWHEEL-FULL BODY CHK-BELOW40-MALE



Chief Complaints

For Annual health checkup
LOSS OF APPETITE
INSOMNIA
DIFFERENT THOUGHTS
CONSTIPATION



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



Name Mr. SHAILESHKUMAR NARANBHAI PA UHID : AHIL.0000486547

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AHC No AHILAH17926
APOLLO HOSPITALS

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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
Profession - corporate employed
Diet - Mixed Diet
Alcohol - does not consume alcohol
Smoking - No
Chews tobacco - No
Physical activity - Moderate



Family history

- Father - alive
Aged - 60
Mother - alive
Aged - 56
Sisters - 2
Coronary artery disease - none



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Cancer - None
Rheumatoid arthritis - mother

Physical Examination



General

General appearance - normal
Build - normal
Height - 174.5
Weight - 66.1
BMI - 21.71
Pallor - No
Oedema - no



Cardiovascular system

Heart rate (Per minute) - 66
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

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STOOL ROUTINE

Stool test involves the collection and analysis of fecal matter to diagnose the presence or absence of a medical condition. One of the most common stool tests, the fecal occult blood test can be used to diagnose many conditions that cause bleeding in the gastrointestinal system including colorectal cancer or stomach cancer. Parasitic diseases like worm can be diagnosed by examining stools under a microscope for the presence of worm larvae or eggs. Some bacterial diseases can be detected with a stool culture. Viruses such as rotavirus can also be found in stools.

| Test Name | Result | Unit | Level | Range |
|------------------|------------|------|-------|---------|
| Colour: | Brown | | | |
| Consistency : | Semi Solid | | | |
| Mucus: | Absent | | | |
| Blood: | Negative | | | |
| Reaction | Acidic | | | |
| Occult Blood | Negative | | | |
| Pus: | 1-2 /h.p.f | | | 2-3 |
| RBC | Nil | /hpf | | 0-5/hpf |
| Epithelial Cells | Absent | | | |
| Yeast Cells | Absent | | | |
| Vegetable Matter | Present | | | |
| Neutral Fat | Absent | | | |
| Starch Granules | Absent | | | |
| Trophozoite | Absent | | | |
| Ova: | Absent | | | |
| Cysts: | Absent | | | |

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 | 20 | mL | | |
| Specific Gravity | 1.010 | | | |
| Colour: | Pale-Yellow | | | |
| Transparency: | Clear | | | |
| pH | 5.5 | | | |
| Protein : | Nil | | | |

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



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| | | | |
|------------------|------------|---------|---------|
| Sugar: | Nil | | |
| Blood: | Negative | | |
| Ketone | Absent | | |
| Bile Pigments: | Negative | | |
| Urobilinogen | Nil | E.U./dL | |
| Nitrite | Negative | | |
| Pus Cells | Occasional | | 0-5 |
| RBC | Nil | /hpf | 0-5/hpf |
| Epithelial Cells | Occasional | | |
| Casts: | Absent | | |
| Crystals: | Absent | | |

COMPLETE BLOOD COUNT WITH ESR

| Test Name | Result | Unit | Level | Range |
|--------------------------------------|--------|------------|-------|---------------|
| Hemoglobin (Photometric Measurement) | 14.7 | gm% | ● | 13.0-17.0 |
| Packed cell volume(Calculated) | 43.8 | % | ● | 40-50 |
| RBC COUNT (Impedance) | 5.28 | Million/ul | ● | 4.5-5.9 |
| MCV (From RBC Histogram) | 83 | fl | ● | 80-100 |
| MCH(Calculated) | 27.88 | pg | ● | 27-32 |
| MCHC(Calculated) | 33.6 | % | ● | 31-36 |
| RDW(Calculated) | 13.4 | % | ● | 11.5-14.5 |
| WBC Count (Impedance) | 6423 | /cu mm | ● | 4000-11000 |
| Neutrophils | 56 | % | ● | 40-75 |
| Lymphocytes | 34 | % | ● | 20-40 |
| Monocytes | 08 | % | ● | 2-10 |
| Eosinophils | 02 | % | ● | 01-06 |
| Basophils | 00 | % | ● | 0-1 |
| Platelet Count (Impedance) | 199900 | /cu mm | ● | 150000-450000 |
| MPV (Calculated) | 8 | fl | ● | 7-11 |

URINE GLUCOSE(FASTING)

| Test Name | Result | Unit | Level | Range |
|-------------------------------|--------|------|-------|-------|
| Urine Glucose (Post Prandial) | Nil | | | |

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



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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 | 15 | U/L | ● | 0-50 |
| ALKALINE PHOSPHATASE - SERUM/PLASMA | 90 | U/L | ● | Adult(Male): 40 - 129 |
| AST (SGOT) - SERUM | 15 | U/L | ● | > 1 year Male : <40 |
| Total Bilirubin | 0.591 | mg/dL | ● | 0.300-1.200 |
| Direct Bilirubin | 0.239 | mg/dL | ● | Upto 0.3 mg/dl |
| Indirect Bilirubin | 0.352 | 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 | 0.73 | mg/dL | ● | Adult Male: 0.6 - 1.3 |

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



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| Test Name | Result | Unit | Level | Range |
|---|--------|------|-------|-----------------------------------|
| GGTP: GAMMA GLUTAMYL TRANSPEPTIDASE - SERUM | 24 | U/L | ● | Male : 10 - 71 Female : 6 - 42 |

GLUCOSE - SERUM / PLASMA (FASTING)

| Test Name | Result | Unit | Level | Range |
|----------------------------|--------|-------|-------|---|
| Glucose - Plasma (Fasting) | 97 | 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) | 113 | mg/dL | ● | 70-140 |

GLYCOSYLATED HEMOGLOBIN (HBA1C) - WHOLE BLOOD

| Test Name | Result | Unit | Level | Range |
|---------------------------------|--------|------|-------|---|
| Glycosylated Hemoglobin (HbA1c) | 5.2 | % | ● | 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. | 102.54 | | | |

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| Test Name | Result | Unit | Level | Range |
|--------------------------------|--------|------|-------|------------------------------|
| PROTEIN TOTAL - SERUM / PLASMA | 7.16 | g/dL | ● | 6.00-8.00 |
| PROTEIN TOTAL - SERUM / PLASMA | 7.16 | g/dL | ● | 6.00-8.00 |
| ALBUMIN - SERUM | 4.65 | g/dL | ● | Adult(18 - 60 Yr): 3.5 - 5.2 |
| ALBUMIN - SERUM | 4.65 | g/dL | ● | Adult(18 - 60 Yr): 3.5 - 5.2 |
| Globulin-Serum/Plasma | 2.51 | | ● | 2.20-4.20 |

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



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| | | | |
|-----------------------|------|---|-----------|
| Globulin-Serum/Plasma | 2.51 | ● | 2.20-4.20 |
| A/G ratio | 1.85 | ● | 1.00-2.00 |
| A/G ratio | 1.85 | ● | 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 | 117 | 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 | 0.99 | μIU/mL | ● | 14-120 years : 0.27 - 4.20 |

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) | 10 | mg/dL | ● | 6-20 |
| UREA - SERUM / PLASMA | 22 | mg/dL | ● | 15 - 50 |

LIPID PROFILE - SERUM

| Test Name | Result | Unit | Level | Range |
|-----------------------|--------|-------|-------|---|
| Total Cholesterol | 160 | mg/dl | ● | 0 - 200 : Desirable 200 - 240 : Borderline High 240 - 280 : High > 280 : Very High |
| Triglycerides - Serum | 66 | mg/dL | ● | 0-150 |

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| | | | | |
|--|------|-------|---|--|
| 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) | 101 | mg/dL | ● | 100 : Optimal 100-129 : Near Optimal 130-159 : Borderline High 160-189 : High >=190 : Very High |
| VLDL CHOLESTEROL | 13 | | ● | < 40 mg/dl |
| C/H RATIO | 3 | | ● | 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.

ECHO/TMT

CARDIOLOGY

ECG

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Executive Summary



- .BODY WEIGHT 66.1 KG,DEAL BODY WEIGHT 58-71 KG
- .ECG - NORMAL SINUS RHYTHM
- .ECHO - NORMAL LV SYSTOLIC FUNCTION, LVEF 60 %
- MILD PAH,RVSP:20 MM HG
- .USG ABDOMEN - LEFT KIDNEY SHOWS TINY RENAL CONCRETION IN MID CALYX
- .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 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., Gandhinagar,
Gujarat-382428, INDIA. Regd.No.: G-21951


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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Radiology

Patient Details : Mr. SHAILESHKUMAR NARANBHAI PATNI | Male | 30Yr 6Mth 15Days
UHID : AHIL.0000486547 **Patient Location:** AHC
Patient Identifier: AHILAH179264 
DRN : 222062733 **Completed on :** 05-DEC-2022 10:20
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 caliber. 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 8.8 cms and shows uniform echotexture.

Both kidneys are normal in size and show normal echopattern with good corticomedullary differentiation. Cortical outlines appear smooth. Left kidney shows tiny renal concretion in Middle calyx. 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 measures normal in size and echopattern.

IMPRESSION :

Left kidney shows tiny renal concretion in Middle calyx.

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Reported By : 717876

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Mr. SHAILESHKUMAR NARANBHAI PAI AHIL.0000486547

AHILAH179264

USG WHOLE ABDOMEN

---- END OF THE REPORT ----

Dr. HARSH S VYAS

DNB Resident

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CARDIOLOGY

Patient Details : Mr. SHAILESHKUMAR NARANBHAI PATNI | Male | 30Yr 6Mth 15Days
UHID : AHIL.0000486547 **Patient Location:** AHC
Patient Identifier: AHILAH179264 
DRN : 5622091448 **Completed on :** 05-DEC-2022 14:41
Ref Doctor : DR. SHASHIKANT NIGAM

ECHO/TMT

FINDINGS :

Normal cardiac chamber dimensions.
 Normal LV systolic function, LVEF: 60%
 No Regional wall motion abnormalities at rest.
 Normal LV compliance.
 All cardiac valves are structurally normal.
 IAS/ IVS intact.
 No MR, No AR, Mild TR.
 Mild PAH, RVSP: 20 mm Hg.
 No clots/ vegetation/ effusion.

MEASUREMENTS (mm) ::

| | LVID diastole | LVID systole | IVSd / LVPW | LA Size | AO (Root) |
|-------------------|---------------|--------------|-------------|---------|-----------|
| Measurements (mm) | 43 | 26 | 10/10 | 33 | 30 |

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Mr. SHAILESHKUMAR NARANBHAI PATI AHIL.0000486547

AHILAH179264

ECHO/TMT

PULSED,HPRF,CW AND COLOUR DOPPLER PARAMETERS

| | MITRAL | AORTIC | PULMONAR Y |
|-----------------------------|--------------------|--------|---------------|
| Peak Velocity m/sc. | E: 1.11/A: 0.62 | 1.53 | 0.79 |
| Peak PR. Gradient mm.Hg. | | 9.31 | 2.51 |

IMPRESSION

--- END OF THE REPORT ---

DR SAMEER DANI MD.DM
Interventional Cardiologist

DR. CHIRAG PRAHLADBHAI PATEL
MBBS., PGDCC

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DEPARTMENT OF RADIOLOGY AND IMAGING SCIENCES

Patient Details : Mr. SHAILESHKUMAR NARANBHAI PATNI | Male | 30Yr 6Mth 15Days
UHID : AHIL.0000486547 **Patient Location:** AHC
Patient Identifier: AHILAH179264 
DRN : 122139112 **Completed on :** 05-DEC-2022 14:32
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

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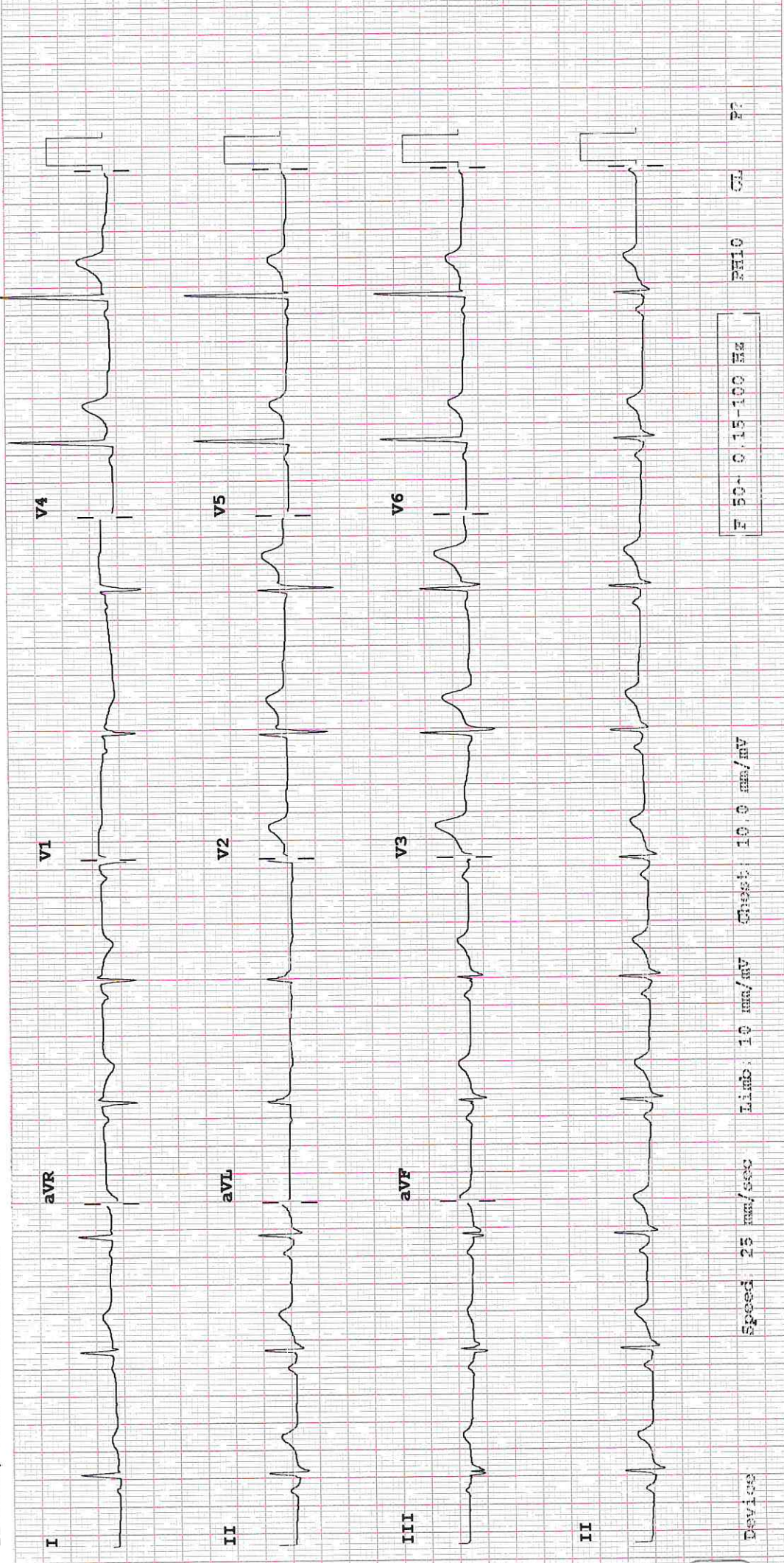
Rate 64

PR 147
QRSD 88
QT 385
QTc 398

--AXIS--

P 71
QRS 2
T 60

12 Lead; Standard Placement



F 50- 0.15-100 Hz

Speed 25 mm/sec Limb: 10 mm/mV Chest: 10.0 mm/mV

PH10 CL PR

Device

OPHTHAL

AHIL.0000486547
Mr. SHAILESHKUMAR
NARANBHAI PATNI
30 Year(s) / Male

ON RECORDS

Date: 85/12/22

Name :

UHID :



Distance Vision :

Right Eye - 6/9 (BE) 6/6
Left Eye - 6/9 6/6

- 0.75 Dsph → RE

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 - Wm

Both Eye Posterior Segment Examinations - Wm

Doctor's Signature

Ophthalmologist Name

AHMROP028V1

Dr. Jagriti Sinha
MS (Optthalmology)
Jr. Consultant
Apollo Hospitals International Ltd., Gandhinagar,
Gujarat-382428, INDIA. Regd. No.: G-68792