Name : Ms. ANITA BARAI (48 /F) Date : 12/08/2023

Address :

Examined by: UHID : AMHL.0002195959

Package: MEDI WHEEL FULL BODY HCK - FEMALE (ABOVE 40 YRS WITH AHC No: AMHLAH180302

TMT/ECHO)



For corporate health checkup No specific complaints

### PRESENT KNOWN ILLNESS

No history of - Dyslipidemia, Thyroid

disorder, Heart disease,

**Asthma** 

Diabetes mellitus - type 2; Since - 16 yrs;

Medication - regular

Hypertension Since - 5 yrs; Medication -

regular



NO KNOWN ALLERGY :12/08/2023



### Cardiovascular system

- Nil Significant

### Respiratory system

- Nil Significant

### **Gastrointestinal system**

- Nil Significant

### **Genitourinary system**

- Nil Significant

### **Gynaec history**

Last menstrual period - 7/8/2023; Periods - regular; No of Children - 3; Deliveries - normal vaginal

delivery

### **Eyes**

Vision - normal with glasses; Glasses - yes

#### **ENT**

- Nil Significant

### Musculoskeletal system

Spine and joints

- Nil Significant

#### Skin

- Nil Significant



### **Present medications**

- names not known

## Past medical history

Do you have any - No

allergies?

Do you have any drug - No

allergies?

Covid 19 - No



Tubal ligation - in 2003



Marital status - Married
No. of children - 3

Diet - Non Vegetarian

Alcohol - does not consume alcohol

Smoking - No
Chews tobacco - No
Physical activity - Mild

# Family history

Father - has expired Mother - has expired

Brothers -4 Sisters -3

Diabetes - father, brother

Coronary artery - none

disease

Cancer - None

### PHYSICAL EXAMINATION



Build - over weight

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 Height
 - 151

 Weight
 - 60

 BMI
 - 26.31

 Pallor
 - No

 Oedema
 - no



### Cardiovascular system

Heart rate (Per minute) - 90
Rhythm - Regular
- B.P. Sitting

Systolic(mm of Hg) - 148
Diastolic(mm of Hg) - 88
Heart sounds - S1S2+

### **Respiratory system**

Breath sounds - Normal vesicular breath

sounds



Organomegaly - No Tenderness - No



- No significant finding

### Opthalmology consultation

Opthalmology findings - UCVA:RE:6/12 LE:6/9P

NVA:RE:N10 LE:N10

**OCULAR** 

MOVEMENT:WNL

ANT.SEG:WNL ACCPT:

**SPECTACLE** 

PWRRE:-0.50DDS(6/6)L E:-0.25DS(6/6)ADD(BE):

+2.00DSPH(N6) ADVICE:\* Glass

Rx.\*Review after 1yr/SOS

Printed By: Benazir Begaum

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COMPLETE HAEMO	GRAM PR	OFIL	E		Pus Cells	Occasio	ona/hpf		
Test Name	Result		Level	Range	Epithelial Cells	Occasio	ona <b>/</b> hpf		
Hemoglobin	12.0	g/dl	•	12.0-15.0	Casts:	Not Fou	ınd		
RBC COUNT	5.03 *	Millio ul	n/ 🛑	3.8-4.8	Crystals:	Not Fou	ınd		
Hematocrit - Hct:	38.6	%	•	36-46	NOTE : - Urine glucose rechecked and confirmed by Benedict's test				
MCV	76.6 *	fl	•	83-101			s test		
MCH	23.8 *	pg	•	27-32	URINE SUGAR - POS	T PRAN	DIAL		
MCHC	31.1 *	%	•	31.5-34.5	(QUALITATIVE) Test Name Result Unit URINE +++ GLUCOSE(POST PRANDIAL)	Half Land Banns			
RDW	16.5 *	%	•	11.8-14.0			Unit	Level	Range
WBC Count	12000 *	/cu m	m 🛑	4000-10000		+++			
Platelet Count	2.73	lacs/c mm	cu •	1.5-4.0					
Neutrophils	67	%		40-80	URINE SUGAR- FASTING(QUALITATIVE)		_		
Lymphocytes	28	%	•	20-40	Test Name URINE	Result	Unit	Level	Range
Monocytes	04	%		2-10	GLUCOSE(FASTING)	777			
Eosinophils	01	%		01-06	BLOOD GROUPING A	ND TVE	DINIC (	A D	
Basophils	00	%		0-0	Test Name	Result	•		Range
RBC:	Anisocyt Hypochro		Microcy	tic	ABO Group:	0	•		rungo
WBC:	Neutroph	Neutrophilic leucocytosis noted.			Rh (D) Type:	POSITI	VE		
Platelets:	Adequate	Adequate on the smear			LIVER FUNCTION TEST (PACKAGE)				
					Test Name	Result	Unit	Level	Range
ERYTHROCYTE SEDIMENTATION	02	mm/1 hr	st	0-20	ALT(SGPT) - SERUM	23	U/L	•	0-35
RATE (ESR)					ALBUMIN - SERUM	4.7	g/dL		3.5-5.1
IRINE ROUTINE AN	ND MICROS	SCOP	Y		ALIZALINI	00	1.1/1		22.00
Test Name	Result		Level	Range	ALKALINE PHOSPHATASE -	92	U/L		33-98
Volume:	60	mL			SERUM				
Colour:	Pale Stra	aw			ACT (COOT) CERUM	00	11/1		0.05
Appearance	Clear				AST (SGOT) - SERUM	23	U/L		0-35
Specific Gravity	1.015				BILIRUBIN TOTAL -	0.3	mg/d	L •	0.3-1.2
pH:	6.0				SERUM				
Albumin:	Not Dete	Not Detected			LIPID PROFILE TEST (PACKAGE)				
Glucose	+++				Test Name	Result	•	Level	Range
Ketone:	Not Dete	Not Detected  Not Detected		CHOLESTEROL -	323 *	mg/d	L •	0-200	
Bile Pigments	Not Dete			SERUM					
RBC	Nil	/hpf			CREATININE - SERUI	M			

Name : Ms. ANITA BARAI (48 /F) UHID : AMHL.0002195959 **Date** : 12/08/2023 Package: MEDI WHEEL FULL BODY HCK - FEMALE (ABOVE 40 YRS WITH AHC No: AMHLAH180302 TMT/ECHO) GLOBULIN: g/dL **Test Name** Result Unit 2.9 1.8-3.6 Level Range (CALCULATED) -**CREATININE - SERUM** mg/dL 0.7 0.6 - 1.1SERUM **LIVER FUNCTION TEST (PACKAGE)** THYROID PROFILE - I(T3,T4 AND TSH) **Test Name** Result Unit Level Range Level Range **Test Name** Result Unit **GGTP: GAMMA** 25 U/L 0-38 ng/ml TOTAL T3: TRI 0.95 0.87-1.78 **GLUTAMYL IODOTHYRONINE -**TRANSPEPTIDASE -**SERUM SERUM** TOTAL T4: 9.00 µg/dL **GLUCOSE - PLASMA (FASTING)** 5.93-13.29 THYROXINE - SERUM **Test Name** Result Unit Level Range GLUCOSE - PLASMA 120 \* mg/dL • 70-99 LIPID PROFILE TEST (PACKAGE) (FASTING) **Test Name** Result Unit Level Range TRIGLYCERIDES -300 \* mg/dL **GLUCOSE - PLASMA (POST PRANDIAL)** 0-150 **SERUM Test Name** Result Unit Level Range **GLUCOSE - PLASMA** 280 \* mg/dL 70-140 THYROID PROFILE - I(T3,T4 AND TSH) (POST PRANDIAL) **Test Name** Result Unit Level Range TSH: THYROID μIU/mL **HBA1C (GLYCOSYLATED** 4.5 0.380-5.330 STIMULATING HAEMOGLOBIN)-WHOLE BLOOD HORMONE - SERUM **Test Name** Result Unit Level Range 9.1 \* % HBA1C Nondiadetic: 4 **URIC ACID - SERUM** (GLYCOSYLATED - 5.6 % **Test Name** Result Unit Level Range HAEMOGLOBIN)-WHO Prediabetics: LE BLOOD 5.7 - 6.4% URIC ACID - SERUM mg/dL 4.3 2.4-5.7 Diabetes >/= 6.5% LIVER FUNCTION TEST (PACKAGE) ADA Result Unit Level Range **Test Name** Theraputic goal **BILIRUBIN** 0 1 mg/dL 0.0 - 0.2: <7% CONJUGATED (DIRECT) - SERUM LIPID PROFILE TEST (PACKAGE) **Test Name** Result Unit Level Range **BUN (BLOOD UREA NITROGEN)** HDL CHOLESTEROL -78 \* mg/dL • 30-70 **Test Name** Result Unit Level Range **SFRUM BUN (BLOOD UREA** 19.0 \* mg/dL 7.0-18.0 NITROGEN) LDL CHOLESTEROL 206 \* mg/dL 0 - 100-SERUM LIVER FUNCTION TEST (PACKAGE) **VLDL CHOLESTEROL -**39 \* mg/dL • 0-35 **Test Name** Result Unit Level Range SERUM (Calculated) A/G - RATIO 1.6 1.0-2.0 **LIVER FUNCTION TEST (PACKAGE)** PAP SMEAR /CERVICAL SMEAR **Test Name** Result Unit Level Range Ref No: PROTEIN TOTAL -7.6 g/dL 6.4-8.3

AG01.C2305853

**Borderline High/Low** 

SPECIMEN TYPE:

**Out of Range** 

Within Normal Range

**SERUM** 

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Conventional cervical smear (Pap) x 1

SPECIMEN ADEQUACY:

Satisfactory for evaluation with endocervical cells and

Metaplastic cells

INTERPRETATION/RESULT:

Negative for intraepithelial lesion or malignancy,

Reactive cellular changes associated with inflammation

(includes typical repair)

### **ECG**

SINUS TACHYCARDIA. LOW VOLTAGE T WAVES.

#### TREADMILL TEST / STRESS TEST

STRESS TEST IS INCONCLUSIVE FOR PROVOCABLE MYOCARDIAL ISCHAEMIA.

#### **ULTRASOUND BREAST BILATERAL**

\* Both breasts sonographic study within normal limits.

BI-RADS category - 1 (normal).

Dr. TANDRA SARKAR MBBS, DMRE, DNB (RADIODIAGNOSIS), MNAMS CONSULTANT RADIOLOGIST Reg. No. 49319 (WBMC)

#### **ULTRASOUND SCREENING WHOLE ABDOMEN**

- \* Grade-I fatty liver.
- \* Bulky uterus.

#### X-RAY CHEST PA

No significant abnormalities seen.

INVESTIGATIONS NOT DONE / NOT YET REPORTED / NOT PART OF PACKAGE(LAB,RADIOLOGY & CARDIOLOGY)

#### Haematology

STOOL ROUTINE

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Printed By: AHC Physician / Consultant Internal Medicine

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.

AHC No: AMHLAH180302

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### **AICVD RISK SCORE REPORT**

RISK STATUS	YOUR SCORE	ACCEPTABLE SCORE
Moderate Risk	6	5

Your likelihood of developing cardiovascular disease in the next ten years is 1.3 times higher than the people of your age and gender

The AICVD risk score developed by Apollo Hospitals is a novel artificial intelligence-based risk scoring system that predicts your risk of having Coronary Artery Disease (CAD) related events in the next ten years. This scoring system uses Indian data and has been validated by multiple national and international institutions. This risk score is more than 92% accurate and has been compiled based on your physical parameters, heart health attributes, lifestyle and medical history. **Note:** The risk category is determined through the ratio between guest score and acceptable score at multiple decimal points. The outputs are shown in whole numbers.

### Based on your AICVD risk score you are advised the following:

- Follow the guidance and education on lifestyle and dietary management provided through the ProHealth program. Maintain a healthy BMI (<25). Avoid tobacco in any form and if you are a smoker, stop smoking.</li>
- Continue with **medications** for high blood pressure, diabetes, or dyslipidemia, if advised by your physician.Maintain HbA1c <7% (<53mmol/mol), blood pressure <140/90mmHg.
- Follow your physician's advice regarding follow up tests, consults and annual health assessment
- It is recommended that you visit your physician every 6 months if you have:
  - Uncontrolled high blood pressure, Diabetes, Dyslipidemia, Coronary heart disease

#### DISCLAIMER

- 1. This is not a diagnostic tool and it does not guarantee accuracy of the result and cannot be acted upon independently.
- 2. This risk score and clinical algorithm is a general guideline for physicians. Any additional laboratory investigations, diagnostic imaging, treatment or patient education related to lifestyle management is under the physician 's or cardiologist's discretion.
- 3. To ensure the information in the report is up to date, accurate and correct, doctor shall be consulted for interpretation of the report.
- 4. Apollo Hospitals and its staff does not offer any assurance on the information made available or be liable for any loss or damage as the said report is based on the AICVD risk score without any intervention from their side.
- 5. By usage of the AICVD risk score, it is deemed that the beneficiary of this service has agreed to get the same done at his own risk and further agrees with this disclaimer without any limitation or any clauses or sub-clauses.

The Clinical Al Models and APIs used at Apollo Hospitals are certified by ISO 13485 : 2016 vide certificate no. MD 763515