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Mr. ARINDOM KAUSHIK (39 /M)

UHID : AHIL.0000808324
 AHC No : AHILAH169532
 Date : 15/10/2022
 MEDIWHEEL-FULL BODY CHK-BELOW40-MALE

Dear Mr. ARINDOM KAUSHIK

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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Date : 15/10/2022

Address :

Examined by : Dr. SHASHIKANT NIGAM

UHID : AHIL.0000808324

MEDIWHEEL-FULL BODY CHK-BELOW40-MALE

AHC No : AHILAH169532



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

- Surgical history - Nil



Personal history

- Ethnicity - Indian Asian
- Marital status - Married
- Profession - corporate employed
- Diet - Mixed Diet
- Alcohol - consumes alcohol occasionally
- Frequency - monthly
- Consuming alcohol for - 15 YRS
- Smoking - No
- Chews tobacco - No
- Physical activity - Moderate



Family history

- Father - has expired
- Aged - 35
- Mother - alive
- Aged - 72
- Sisters - 1
- Diabetes - mother
- Coronary artery disease - none



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Cancer - None

Physical Examination



General

General appearance - normal
Build - normal
Height - 165
Weight - 85.1
BMI - 31.26
Pallor - No
Oedema - no



Cardiovascular system

Heart rate (Per minute) - 92
Rhythm - Regular
- B.P. Supine
Systolic(mm of Hg) - 128
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	20	mL		
Specific Gravity	1.030			
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	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)	43.2	%	●	40-50
RBC COUNT (Impedance)	4.99	Million/ul	●	4.5-5.9
MCV (From RBC Histogram)	86.6	fl	●	80-100
MCH(Calculated)	29.51	pg	●	27-32
MCHC(Calculated)	34.1	%	●	31-36
RDW(Calculated)	13.5	%	●	11.5-14.5
WBC Count (Impedance)	7678	/cu mm	●	4000-11000

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



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Neutrophils	60	%	●	40-75
Lymphocytes	30	%	●	20-40
Monocytes	07	%	●	2-10
Eosinophils	03	%	●	01-06
Basophils	00	%	●	0-1
Platelet Count (Impedance)	168100	/cu mm	●	150000-450000
MPV (Calculated)	11.7 *	fl	●	7-11

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)	Trace			

BLOOD GROUPING AND TYPING (ABO and Rh)

Test Name	Result	Unit	Level	Range
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.

Test Name	Result	Unit	Level	Range
ALT(SGPT) - SERUM / PLASMA	98 *	U/L	●	0-50
ALKALINE PHOSPHATASE - SERUM/PLASMA	94	U/L	●	Adult(Male): 40 - 129
AST (SGOT) - SERUM	48 *	U/L	●	> 1 year Male : <40
Total Bilirubin	0.624	mg/dL	●	0.300-1.200
Direct Bilirubin	0.279	mg/dL	●	Upto 0.3 mg/dl

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Indirect Bilirubin	0.345	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	0.84	mg/dL	●	Adult Male: 0.6 - 1.3

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Test Name	Result	Unit	Level	Range
GGTP: GAMMA GLUTAMYL TRANSPEPTIDASE - SERUM	78 *	U/L	●	Male : 10 - 71 Female : 6 - 42

GLUCOSE - SERUM / PLASMA (FASTING)

Test Name	Result	Unit	Level	Range
Glucose - Plasma (Fasting)	117 *	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)	142 *	mg/dL	●	70-140

GLYCOSYLATED HEMOGLOBIN (HBA1C) - WHOLE BLOOD

Test Name	Result	Unit	Level	Range
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Glycosylated Hemoglobin (HbA1c)	6.1 *	%	●	Normal < 5.7
<p>%Increased risk for Diabetes 5.7 - 6.4%</p> <p>Diabetes >= 6.5%</p> <p>Monitoring criteria for Diabetes Mellitus <7.0 : Well Controlled Diabetes 7.1 – 8.0 : Unsatisfactory Control > 8.0 : Poor Control & Needs Immediate Treatment</p>				

Estimated Average Glucose. 128.37

LFT (LIVER FUNCTION TEST)

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Test Name	Result	Unit	Level	Range
PROTEIN TOTAL - SERUM / PLASMA	7.19	g/dL	●	6.00-8.00
PROTEIN TOTAL - SERUM / PLASMA	7.19	g/dL	●	6.00-8.00
ALBUMIN - SERUM	4.68	g/dL	●	Adult(18 - 60 Yr): 3.5 - 5.2
ALBUMIN - SERUM	4.68	g/dL	●	Adult(18 - 60 Yr): 3.5 - 5.2
Globulin-Serum/Plasma	2.51		●	2.20-4.20
Globulin-Serum/Plasma	2.51		●	2.20-4.20
A/G ratio	1.86		●	1.00-2.00
A/G ratio	1.86		●	1.00-2.00

THYROID PROFILE (T3,T4 AND TSH)

Test Name	Result	Unit	Level	Range
TOTAL T3: TRI IODOTHYRONINE - SERUM	1.9	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	100	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	1.28	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	6.1	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	172	mg/dl	●	0 - 200 : Desirable 200 - 240 : Borderline High 240 - 280 : High > 280 : Very High
Triglycerides - Serum	170 *	mg/dL	●	0-150
HDL CHOLESTEROL - SERUM / PLASMA (Direct Enzymatic Colorimetric)	38 *	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)	114	mg/dL	●	100 : Optimal 100-129 : Near Optimal 130-159 : Borderline High 160-189 : High >=190 : Very High
VLDL CHOLESTEROL	34		●	< 40 mg/dl
C/H RATIO	4		●	0-4.5

USG WHOLE ABDOMEN

Ultrasound of the abdomen helps to look for abnormalities of the abdominal organs like liver, spleen, gall bladder, pancreas, kidneys, uterus, etc.

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Liver appears normal in size and shows grade I Fatty 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.

Visualized Head and body of pancreas appear normal in size and echotexture. No focal lesions identified. Pancreatic duct appears normal in caliber.

Spleen measures 8.8 cms, normal in size 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.
Visualized bowel loops appears normal and shows normal peristalsis

Urinary bladder is normal in contour and outline. Wall thickness appears normal. No evidence of any intraluminal pathology seen.

Prostate (volume 18 cc) is normal in size and echopattern.

IMPRESSION :
Fatty Liver.
Rest normal study

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.

Lung fields show diffuse areas of reticular opacities, consistent with interstitial thickening. No evidence of dense consolidation. CT scan suggested SOS

Cardio thoracic ratio is normal.

Both costophrenic angles are clear.

Domes of diaphragm are well delineated.

Bony thorax shows no significant abnormality.

Investigations Not Done / Not Yet Reported

Haematology

STOOL ROUTINE

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CARDIOLOGY
ECHO/TMT
ECG



Within Normal Range



Borderline High/Low



Out of Range

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Executive Summary



.BODY WEIGHT 85 KG,DEAL BODY WEIGHT 51-63 KG
.PRE - DIABETIC (HBA1C = 6.1)
DYSLIPIDEMIA
.ECG - NORMAL SINUS RHYTHM
.TMT — TEST IS NEGATIVE,EXERCISE TIME 8:26 ,WORKLOAD 10.1 METS
.USG ABDOMEN - FATTY LIVER
.CHEST X-RAY - LUNG FIELDS SHOW DIFFUSE AREAS OF RETICULAR OPACITIES,
CONSISTENT WITH INTERSTITIAL THICKENING . NO EVIDENCE OF DENSE CONSOLIDATION .
CT SCAN SUGGESTED SOS
.EYE – NORMAL

Wellness Prescription

Advice On Diet :-



BALANCED DIET---
LOW FAT DIET
LOW CARBOHYDRATE 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 51-63 KG

Follow-up and Review Plan



FBS and PPBS ONCE IN 30 DAYS
HBA1C (GLYCOSYLATED HAEMOGLOBIN) NOW AND ONCE IN 3 MONTHS
CHECK LIPID PROFILE EVERY 6 MONTHS

Coscel Pankhraj

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investigations

Shashikant Nigam
Dr.SHASHIKANT NIGAM

AHC Physician / Consultant Internal Medicine

Dr. Shashikant Nigam

MBBS, MD (Gen. Med.)

Consultant Internal Medicine

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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. ARINDOM KAUSHIK | Male | 39Yr 1Mth 14Days
UHID : AHIL.0000808324 **Patient Location:** AHC
Patient Identifier: AHILAH169532 
DRN : 122116862 **Completed on :** 15-OCT-2022 09:23
Ref Doctor : DR. SHASHIKANT NIGAM

X-RAY CHEST PA

IMPRESSION

Lung fields show diffuse areas of reticular opacities, consistent with interstitial thickening.
 No evidence of dense consolidation. CT scan suggested SOS

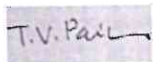
Cardio thoracic ratio is normal.

Both costophrenic angles are clear.

Domes of diaphragm are well delineated.

Bony thorax shows no significant abnormality.

--- END OF THE REPORT ---



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DEPARTMENT OF RADIOLOGY AND IMAGING SCIENCES

Patient Details : Mr. ARINDOM KAUSHIK | Male | 39Yr 1Mth 14Days
UHID : AHIL.0000808324 **Patient Location:** AHC
Patient Identifier: AHILAH169532 
DRN : 222052929 **Completed on :** 15-OCT-2022 09:34
Ref Doctor : DR. SHASHIKANT NIGAM

USG WHOLE ABDOMEN

IMPRESSION :

Liver appears normal in size and shows grade I Fatty 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.

Visualized Head and body of pancreas appear normal in size and echotexture. No focal lesions identified. Pancreatic duct appears normal in caliber.

Spleen measures 8.8 cms, normal in size 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.

Visualized bowel loops appears normal and shows normal peristalsis

Urinary bladder is normal in contour and outline. Wall thickness appears normal. No evidence of any intraluminal pathology seen.

Prostate (volume 18 cc) is normal in size and echopattern.

IMPRESSION :

Fatty Liver.

Rest normal study

Printed on : 15-Oct-2022 12:35

Printed By : 153182

Reported By : 717876

Page 1 of 2

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Mr Arindom, Kaushik
ID 808324

39 Years Male

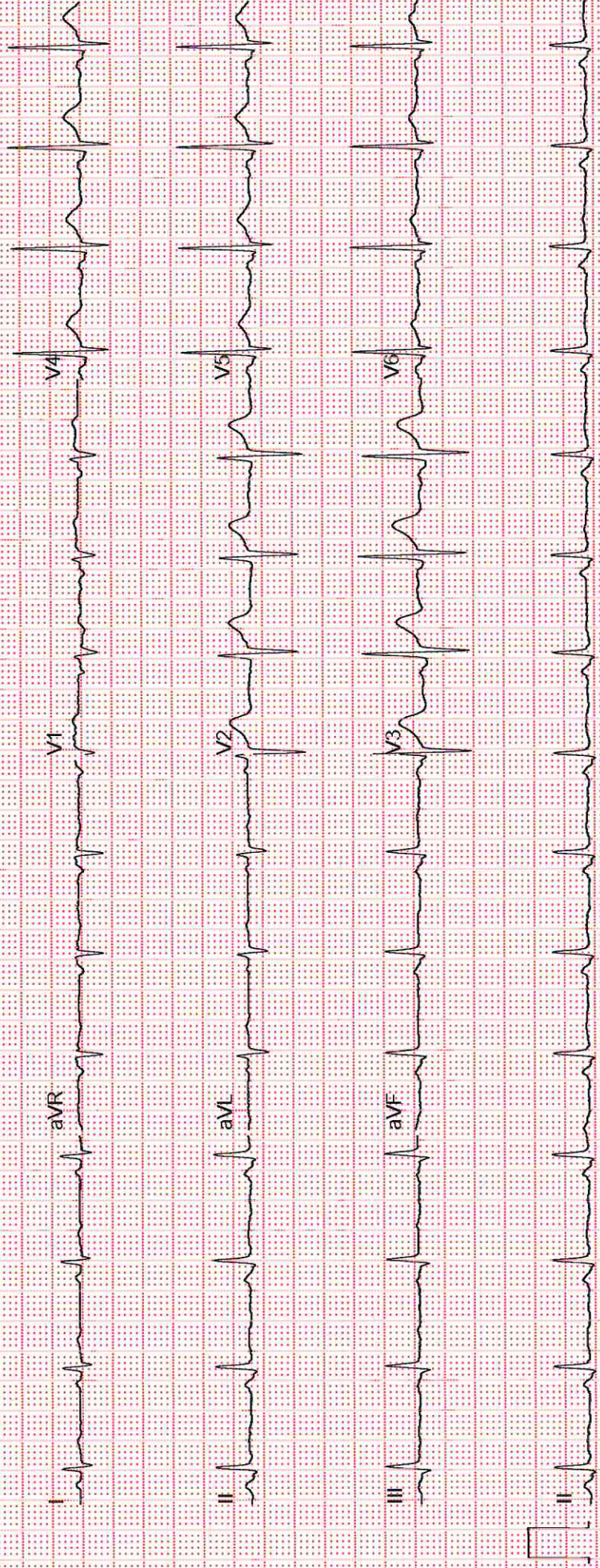
15.10.2027 0:12:04
Apollo Hospit...
Bhat
Gandhinagar

Location: R
Order Num.
Indication
Medication 1
Medication 2
Medication 3

89 bpm
-- / -- mmHg

Normal sinus rhythm
Normal ECG
QRS 76 ms
QT / QTcBaz 348 / 423 ms
PR 142 ms
P 104 ms
RR / PP 674 / 674 ms
P / QRS / T 58 / 78 / 67 degrees

Technician:
Ordering Ph.
Referring Ph.
Attending Ph.



ID: 000808324

Visit: MEDIWHEEL
39 years
165cm

Asian
85kg

Male

BRUCE

Max HR: 193bpm
Max BP: 150/90
Maximum workload: 10.1 METS

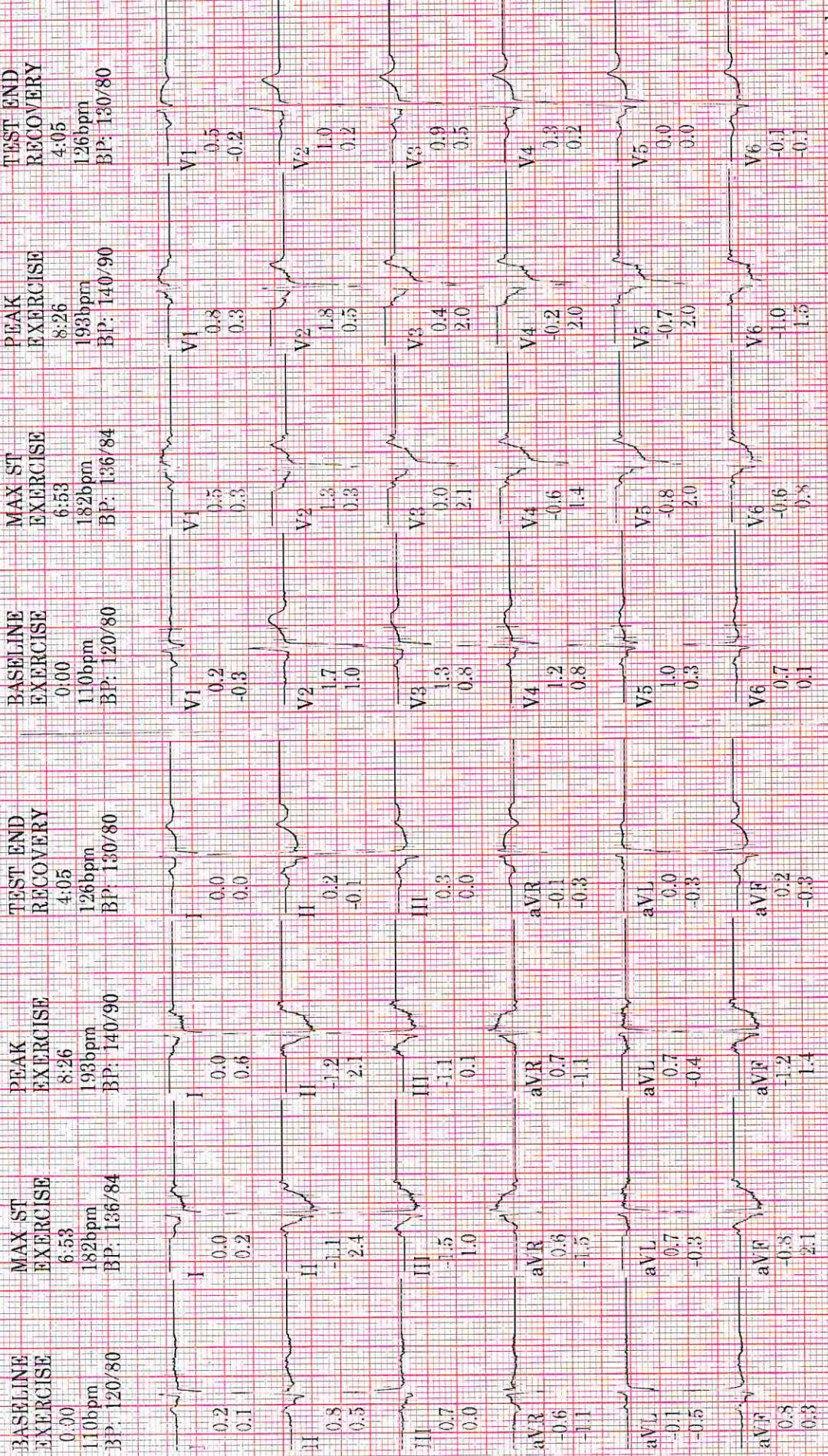
Total Exercise time: 8:26

25.0 mm/s
0.0 mm/mV
100hz

Referred by: DR. SUBIR GHOSH, MHC

Test indi:

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



Technician: FALGUNI VIHOL

Unconfirmed

APOLLO HOSPITALS INTERNATIONAL LIMITED

MAC55-010B

Lead ST(mm) Slope(mV/s)