

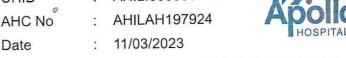
#### Mrs. CHANDRIKABEN PATEL (48 /F)

UHID

AHIL.0000554408

Date

MEDIWHEEL-FULL BODY CHK-ABOVE40-FEMALE



#### Namaste Mrs. CHANDRIKABEN PATEL,

Thank you for choosing Apollo ProHealth, India's first Al-powered health management program, curated to help you make positive health shifts. Being healthy is about making smart choices, and you have taken the first step with this program. We are privileged to be your healthcare partner. Your health is our priority.

We are with you on your path to wellness by:

Predicting your risk: Audicial Intelligence-powered predictive risk scores are generated, based on your personal, medical, and family history and detailed multi-organ evaluation of your body through diagnostic and imaging tests.

Preventing onset or progress of chronic lifestyle diseases: Your Health Mentor is available to help you understand your physician's recommendations and helping you handle any concerns (complimentary service up to one year)

Overcoming barriers to your wellbeing: Your Health Mentor will help you set your health goals and guide you with tips to stay on track. We will also, digitally remind you to proactively prioritize your health.

Through this report, you will be able to understand your overall health status, your health goals and the recommendations for your path to wellness. Your Health Report will include the following:

- Your medical history and physical examination reports
- Results from your diagnostic and imaging tests
- Al powered health risk scores
- Your physician's impression and recommendations regarding your overall health
- Your personalized path to wellness, including your follow-up assessments and vaccinations



We have reviewed the results of the tests and have identified some areas for you to act on. We believe that with focus and targeted interventions, you can be healthier and happier.

Scan the QR code to download the Apollo 247 App



You can visit your proHealth physician in person at this center, or you can book a virtual consultation for review via <a href="www.apollo247.com">www.apollo247.com</a> or through the Apollo 24\*7 mobile app. You can avail 30% discount on additional tests and follow-up tests at Apollo Hospitals within one week. You may call your Health Mentor on 04048492633 or email at prohealthcare@apollohospitals.com

Stay Healthy and happy! 

Apollo ProHealth Care team

**Disclaimer:** The services offered in the program may vary depending on any prior mutual agreements between guests and the facility/unit.

For Enquiry/Appointments Contact +91 76988 15003 / +91 79 66701880





: Mrs. CHANDRIKABEN PATEL (48 /F)

MEDIWHEEL-FULL BODY CHK-ABOVE40-FEMALE

Address: SABARKANTHA, SABARKANTHA, SABARKANTHA, GUJARAT, INDIA



Examined by : Dr. SHASHIKANT NIGAM

UHID

Date

AHIL.0000554408

AHC No : AHILAH197924



## **Chief Complaints**

For Annual health checkup GASTRIC PROBLEM



### 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

General symptoms

- Nil Significant



#### Past medical history

Do you have any

- No

allergies?

Do you have any drug - No

allergies?



#### Surgical history

Caesarian section

2004

Hysterectomy

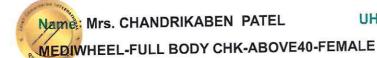
2020



Personal history

Page 3 of 12





0

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Organization is Actuated nicity

- Indian Asian

Marital status

- Married

No. of children

Female

2

Male

Profession

- corporate employed

Diet

- Vegetarian

Alcohol

- does not consume alcohol

Smoking

No

Chews tobacco

- No

Physical activity

- Moderate

#### Family history

Father

- has expired

Aged

- 74

Mother

- has expired

Aged

- 73

**Brothers** 

- 2

Sisters

- 1

Coronary artery

- none

disease

Cancer

- None

## **Physical Examination**



#### General

General appearance

- normal

Build

- normal

Height

- 152

Weight

- 67.5

BMI

- 29.22

Pallor

- No

Oedema

- no

### Cardiovascular system

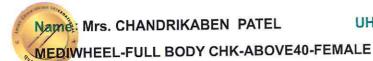
Heart rate (Per minute)

- 75

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Date AHC No

Organization is Applied thm by Joint Commission Internsycthm

- Regular

- B.P. Supine

Systolic(mm of Hg)

- 150

Diastolic(mm of Hg)

- 90

Heart sounds

- S1S2+

Respiratory system

Breath sounds

- Normal vesicular breath sounds

Abdomen

Organomegaly

- No

Tenderness

- No

Printed By:

MUKTA S ADALTI

Page 5 of 12



## Organization is Accredited by Joint Commission International 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	30	mL		
Specific Gravity	1.010			
Colour:	Pale-Yellow			
Transparency:	Clear			
рН	6			,
Protein:	Nil			
Sugar:	Nil			
Blood:	Negative			
Ketone	Absent			
Bile Pigments:	Absent			
Urobilinogen	Nil	E.U./dL		
Nitrite	Negative			
Pus Cells	Occassional			0-5
RBC	Nil	/hpf		0-5/hpf
Epithelial Cells	Occassional			
Casts:	Absent			
Crystals:	Absent			
COMPLETE BLOOD COUNT WITH E	SR			

## COMPLETE BLOOD COUNT WITH ESR

Test Name	Result	Unit	Level	Range
Hemoglobin (Photometric Measurement)	12.7	gm%		12-16
Packed cell volume(Calculated)	37.3	%		36-46
RBC COUNT (Impedance)	3.42 *	Million/ul		3.8-5.2
MCV (From RBC Histogram)	109.2 *	fl		80-100
MCH(Calculated)	37.12 *	pg		27-32
MCHC(Calculated)	34	%		31-36
RDW(Calculated)	14.4	%		11.5-14.5
WBC Count (Impedance)	7967	/cu mm		4000-11000

Within Normal Range



Borderline High/Low



**Out of Range** 

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Date AHC No

oredited Interestrophils	65	%		40-75	
Lymphocytes	28	%		20-40	
Monocytes	5	%		2-10	
Eosinophils	2	%		01-06	
Basophils	0	%		0-1	
Platelet Count (Impedance)	256000	/cu mm		150000-450000	
MPV (Calculated)	7.2	fl		7-11	
RBC::	Macro-ovalo	ocytes (+)~Macro	cytes (+)		
WBC:	Few hypers	egmented neutro	ohils are	seen.	
ERYTHROCYTE SEDIMENTATION RATE (ESR) (Autralia & Capitic— electronic)	18	mm/1st hr		0-20	
SUGGEST:	S. Vitamin I	B12 assay is indic	ated		

### **URINE GLUCOSE(FASTING)**

Unit Level Range Result Test Name

Nil Urine Glucose (Post Prandial)

## **URINE GLUCOSE(POST PRANDIAL)**

Range Level Result Unit **Test Name** 

Nil Urine Glucose (Post Prandial)

## **BLOOD GROUPING AND TYPING (ABO and Rh)**

Unit Level Range Result Test Name

**B** Positive **BLOOD GROUP:** 

## 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, gau the extent of known liver damage, and follow the response to treatment.

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## MEDIWHEEL-FULL BODY CHK-ABOVE40-FEMALE

Conanization	is Accredited
	sion International
•	Tota

al Bilirubin Direct Bilirubin

ma/dL 0.621

mg/dL 0.229

0.300-1.200

Upto 0.3 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

Indirect Bilirubin

Result

Unit

mg/dL

Level

Range

CREATININE - SERUM / PLASMA

0.7

0.392

mg/dL

Adult Female: 0.5 - 1.2

#### 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, gaug the extent of known liver damage, and follow the response to treatment.

Test Name

Result

Unit

Level

Range

GGTP: GAMMA GLUTAMYL TRANSPEPTIDASE - SERUM

22

U/L

Male: 10 - 71

Female: 6 - 42

## GLUCOSE - SERUM / PLASMA (FASTING)

Test Name

Result

Unit

Level

Range

Glucose - Plasma (Fasting)

87

mg/dL

70 - 100 : Normal

100 - 125 : Impaired Glucose Toleranc

>= 126 : Diabetes Mellitus

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

Test Name

Result

Unit

Level

Range

Glucose - Plasma (Post Prandial)

123

mg/dL

70-140

## GLYCOSYLATED HEMOGLOBIN (HBA1C) - WHOLE BLOOD

**Test Name** 

Result

Unit

Level

Range



Within Normal Range



Borderline High/Low



Out of Range

Page 8 of 12

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Organization is Accred@lycosylated Hemoglobin (HbA1c) by Joint Commission International

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.

**Test Name** 

85.32

Result

## LFT (LIVER FUNCTION TEST)

Liver function tests(! FT), are groups of clinical biochemistry blood assays that give information about the state of a patient's liver. These tests a hard sed to detect the presence of liver disease, distinguish among different types of liver disorders, gaug the extent of known liver damage, and follow the response to treatment. Range

Level

				675 NO 12127
PROTEIN TOTAL - SERUM / PLASMA	6.65	g/dL		6.00-8.00
PROTEIN TOTAL - SERUM / PLASMA	6.65	g/dL		6.00-8.00
ALBUMIN - SERUM	4.52	g/dL		Adult(18 - 60 Yr): 3.5 - 5.2
ALBUMIN - SERUM	4.52	g/dL		Adult(18 - 60 Yr): 3.5 - 5.2
Globulin-Serum/Plasma	2.13 *			2.20-4.20
	2.13 *			2.20-4.20
Globulin-Serum/Plasma	2.12 *			1.00-2.00
A/G ratio				1.00-2.00
A/G ratio	2.12 *			1.00 2.00
THYROID PROFILE (T3,T4 AND TS	<u>H)</u>			
Test Name	Result	Unit	Level	Range
TOTAL T3: TRI IODOTHYRONINE - SERUM	1.5	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	86	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	2.54	μIU/mL	•	14-120 years : 0.27 - 4.20
Within Normal Range	Border	line High/Low	O:	ut of Range

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## Organization is Accredited by Joint Commission Intermediate CACID - 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	5.2	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)	8	mg/dL		6-20
UREA - SERUM / PLASMA	16	mg/dL		15 - 50
LIPID PROFILE - SERUM				
Test Name	Result	Unit	Level	Range
Total Cholesterol	157	mg/dl	•	0 - 200 : Desirable 200 - 240 : Borderline High 240 - 280 : High > 280 : Very High
Triglycerides - Serum	107	mg/dL		0-150
HDL CHOLESTEROL - SERUM / PLASMA (Direct Enzymatic Colorimetric)	37 *	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)	112	mg/dL		100 : Optimal 100-129 : Near Optimal 130-159 : Borderline High 160-189 : High >=190 : Very High
VLDL CHOLESTEROL	21			< 40 mg/dl
C/H RATIO	4			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.





Borderline High/Low



Out of Range

Page 10 of 12





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Investigations Not Done / Not Yet Reported

Haematology

STOOL ROUTINE

CARDIOLOGY

**ECG** 

Within Normal Range



Borderline High/Low



Out of Range

Page 11 of 12



# Organization is Accredited by Joint Commission International EXECUTIVE Summary



BODY WEIGHT 67.5 KG, DEAL BODY WEIGHT 44-53 KG

.ECG - NORMAL SINUS RHYTHM

.ECHO - NORMAL

.USG ABDOMEN - GRADE I FATTY LIVER

.CHEST X-RAY - NORMAL

.EYE - NORMAL

.DENTAL - AS PER DOCTOR ADVICE

.MAMMOGRAPHY - BIRADS- O

#### 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 44-53 KG

Printed By: MUKTA S ADALTI

Dr.SHASHIKANT NIGAM

AHC Physician / Consultant Internal Medicine

Dr. Shashikant Nigam MBBS, MD (Gen. Med.) mbbb, mb (ben, meu.)
Consultant Internal Madicine
Consultant Internal Ltd., Ganchinegar,
sollo Hospitals International Ltd., Ganchinegar, pollo mospirais international Ltd., Ganuninagar Gyjaral 382428, INDIA. Regd. No. : G-21981

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.

Page 12 of 12





### Radiology

Patient Details : Mrs. CHANDRIKABEN PATEL | Female | 48Yr 11Mth 14Days

UHID : AHIL.0000554408 Patient Location: Al

Patient Identifier: AHILAH197924

DRN : 223013679 Completed on : 11-MAR-2023 09:31

Ref Doctor : DR. SHASHIKANT NIGAM

### **USG WHOLE ABDOMEN**

#### FINDINGS:

Liver appears normal in size and shows fatty changes. 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 10.4 cm 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 is not visualized (history of hysterectomy)

**IMPRESSTION** 

Grade I Fatty liver.

Printed on: 13-Mar-2023 9:18 Printed By: 153182 Reported By: 717876 Page 1 of 2







Mrs. CHANDRIKABEN PATEL

AHIL.0000554408

AHILAH197924

#### **USG WHOLE ABDOMEN**

- END OF THE REPORT -

A. A PATEL

Dr. ALPESH A PATEL

**DNB** Resident

Printed on:

13-Mar-2023 9:18

Printed By: 153182

Reported By: 717876

Page 2 of 2







#### **RADIOLOGY**

Patient Details:

Mrs. CHANDRIKABEN PATEL | Female | 48Yr 11Mth 14Days

**UHID** 

AHIL.0000554408

Patient Location:

Patient Identifier:

AHILAH197924

DRN

123031928

Completed on:

11-MAR-2023 11:21

**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 -

RAJVEERSINH P CHAVDA

190

Medical Officer

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13-Mar-2023 9:18

Printed By:

153182

Reported By: 717876

Page 1 of 1





#### **CARDIOLOGY**

Patient Details: Mrs. CHANDRIKABEN PATEL | Female | 48Yr 11Mth 14Days

UHID AHIL.0000554408 **Patient Location: AHC** 

Patient Identifier: AHILAH197924 

DRN 5623023484 Completed on: 11-MAR-2023 17:27

**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.

Trivial MR, No AR, Trivial TR.

No PAH.

No clots/ vegetation/ effusion.

## MEASUREMENTS (mm) ::

	LVID diastole
Measurements (mm)	

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Page 1 of 2

## ECHO/TMT

## PULSED, HPRF, CW AND COLOUR DOPPLER PARAMETERS

	MITRAL
Peak Velocity m/sc.	

**IMPRESSION** 

-- END OF THE REPORT --

a drong -

DR SUBIR GHOSH MD.DM

Interventional Cardiologist

Printed on: 15-Mar-2023 17:25 Printed By: 153182 Reported By: 1120407 Page 2 of 2





#### **RADIOLOGY**

Patient Details : Mrs. CHANDRIKABEN PATEL | Female | 48Yr 11Mth 14Days

UHID : AHIL.0000554408 Patient Location: AHC

Patient Identifier: AHILAH197924

Ref Doctor : DR. SHASHIKANT NIGAM

#### **MAMMOGRAPHY BOTH BREAST**

#### FINDINGS:

Breast composition:-

C. Heterogenously dense parenchyma obscuring optimum mammography evaluation.

Both breasts show normal architecture of parenchyma, with glandular and fibrofatty elements.

No evidence of obvious focal lesion seen.

No evidence of any pleomorphic microcalcification.

No evidence of skin thickening or nipple retraction seen.

Retromammary area is normal.

Axillary tail region appear normal.

Nodes with preserved hilum noted in both axillary region.

IMPRESSION:

No significant abnormality.

(BIRADS-0)

In dense breast correlation with USG or previous study suggested.

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717876

Page 1 of 2









Mrs. CHANDRIKABEN PATEL

AHIL.0000554408

AHILAH197924

## MAMMOGRAPHY BOTH BREAST

- END OF THE REPORT -

Dr. NIKITA PANDYA

Consultant Radiologist

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13-Mar-2023 9:18

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153182

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Page 2 of 2

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	***		94		F 50~ 0.15-100 HZ PH10 CL
554408 RIKABEN Female					Limb: 10 mm/mV Chest: 10.0 mm/mV
AHIL.0000554408 Mrs. CHANDRIKABEN PATEL 49 Year(s) / Female	Standard Placement aVR	av	ave		Speed: 25 mm/sec
	12 Lead; Sta	H	III	II (	Devi ce:



AHIL.0000554408 Mrs. CHANDRIKABEN PATEL

49 Year(s) / Female

UHID,
ian

## DENTISTRY

	The state of the s		
Name :  Occupation :  Age :			Unit No. :
	DENTAL	RECORD	r .
ALLERGIES: MA		- C / C	
PAIN : Score (0-10)	ocation :	G	haracter:
MAHE O DARNIE	rush Find Find Find Find Find Find Find Find	nger Stid	y other No
ORAL TISSUE EXAMINATION	PERIODONTA	L EXAMINATION	OCCLUSION
NORMAL FINDINGS IN DISEASE  Lips Cheeks Tongue Floor of the mouth: Palate Tonsilar Area  Any other	Gingivitis Calculus Recession Periodontal Pockets Attrition Erosion Mobility	MILD MOD SEV	CLASS I II III CROSSBITE  Hypoplasia Impaction Non-vital Fracture Abcess Ulcers Caries Missing Teeth Supernumerary Others
		chyp	
	☐ HTN ☐ Thyroid		nancy
HMROP007V1	MAN		



If label not available, write Pt, Name, IP No/UHID, Age, Sex, Date, Name of Treating Physician

# OBSTETRICS & GYNAECOLOGY - A

THE STATE OF THE S	
AHIL.0000554408  Mrs. CHANDRIKABEN  Occupation: PATEL  Age:	Date: 11-3-23. Unit No.:  Ref. Physician: 27- Kiyyy Mhay  Copies to:
GYNAEC CHECK UP	
Chief Complaint:	P3+ 13.
Children: 3, 29 107 Deliveries: 80 2 FTND Lusus	Weight:
Deliveries: BARFIND Luscs	BP:
Last Child: Mun   19 years   LSC Abortions: 3-D8 E-	\$
Abortions: 3-D8E-	Breasts: Normal
Periods:  LMP:  Heyrerestory  3 years of	PAP Smear: Nother.
LMP: ( flystere 3 years) cog	Previous Medical H/O:
Menopause:	
G. Condition: F:+	FIHIO: None.
P/A: Soft-	Previous Surgical H/O:
S/E:	Hystorectomy
PIV: WOODS ON COORD	3 years age
DID.	

Impression:

Doctor Signature
Date & Time

1113 12 3



## OPTHALI

AHIL.0000554408 Mrs. CHANDRIKABEN

PATEL

Name:

49 Year(s) / Female

UHID:

0 10 1 1 0 1 10 **10 10 10 10 10 10 10 10 10 10 10 10 10** 

## N RECORDS

Date: 11/3/23

tance Vision:

Right Eye -

86

Left Eye -

616

Near Vision:

Right Eye:

NG

7 +1.7

Left Eye:

N6

APLN.TN - Right Eye

14

Left Eye- 15

mmHg

Both Eye - Colour Vision

WNL

Both Eye - Anterior Segment Examinations -

1 121

NAD

Both Eye Posterior Segment Examinations –

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AHMROP028V1

Ophthalmologist Name