

| Mr. ABHISHEK KUMAR GIRI (41 /M) | | | | | | |
|--------------------------------------------------|---|-----------------|--|--|--|--|
| UHID | : | ASHB.0000033516 | | | | |
| AHC No | : | BPLAH7716 | | | | |
| Date | : | 01/04/2024 | | | | |
| MEDIWHEEL FULL BODY ANNUAL PLUS ABOVE 50 MALE | | | | | | |

Dear Mr. ABHISHEK KUMAR GIRI

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 <u>https://www.apollo247.com/specialties</u> 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

| Address : H NO 502, DK 2, DANISH KUNJ, KOLAR ROAD, BHOPAL, BHOPAL, MADHYA PRADESH, INDIA | | | | | |
|---------------------------------------------------------------------------------------------|----------|--------------------------------------------------------------------------------------|--------------------------|----------|--|
| Examined by : Dr. AKHIL KUMAR TIWARI UHID : ASHB.0000033516 | | | | | |
| MEDIWHEEL FULL BODY ANN | UAL PI | US ABOVE 50 MALE | AHC No : BPLAH | 7716 | |
| 5 | betes m | nellitus, Hypertension, Dyslipidemia, Thy oke, Asthma, COPD, Cancer, Impaired G | | | |
| NO KNOWN ALLERGY | 1 | :01/04/2024 | | | |
| Systemic Review | <u>/</u> | | | | |
| Cardiovascular system | : | Chest pain - no; Breathing difficulty - no |) | | |
| Respiratory system | : | - Nil Significant | | | |
| Oral and dental | : | - Nil Significant | | | |
| Gastrointestinal system | : | Appetite - normal; Dyspepsia - yes; Nat acidity; Bowel habits - regular, incomple | • | iptoms - | |
| Genitourinary system | : | Frequency - normal; Dysuria/burning m | icturition - no; Urgency | y - no | |
| Central nervous system | : | Dizziness - on and off | | | |
| Eyes | : | Vision - normal with glasses; Glasses - | yes; Glasses for - rea | ding | |
| ENT | : | - Nil Significant | | | |
| Musculoskeletal system Spine and joints Shoulder (bilateral) - pain | : | | | | |
| Skin | : | - Nil Significant | | | |
| Weight | : | - stable | | | |
| General symptoms | : | - Nil Significant | | | |
| Tesent medications | : | - Nil | | | |
| Past medical history | | | | | |

Date : 01/04/2024

| MEDIWHEEL FULL BODY | NNUAL PLUS ABOVE 50 MALE | AHC No: BPLAH7716 |
|----------------------------|-------------------------------|-------------------|
| Past medical history | nil significant | |
| Covid 19 | No | |
| Surgical history | | |
| Surgical history | Nil | |
| Immunization histor | | |
| | Covid Dose1,Covid Dose2 | |
| Personal histor | | |
| Ethnicity | Indian Asian | |
| Marital status | Married | |
| No. of children | 2 | |
| Diet | Mixed Diet | |
| Alcohol | consumes alcohol occasionally | |
| Frequency | occasional | |
| Smoking | No | |
| Chews tobacco | No | |
| Physical activity | Mild | |
| Family history | | |
| Father | alive | |
| Aged | 62 | |
| Mother | alive | |
| Aged | 62 | |
| Brothers | 2 | |
| Sisters | 1 | |
| Coronary artery disease | none | |
| Cancer | None | |
| Physical Examinat | <u>n</u> | |
| General | | |
| General appearance | - normal | |
| Build | - well built | |

Height - 170

Name: Mr. ABHISHEK KUMAR GIRI

UHID : ASHB.0000033516

| MEDIWHEEL FULL BODY ANN | UAL PLUS ABOVE 50 MALE | AHC No : BPLAH7716 |
|-------------------------|----------------------------------|--------------------|
| Weight | - 77.5 | |
| BMI | - 26.82 | |
| Pallor | - No | |
| Oedema | - no | |
| ••• Head and ENT | | |
| | - No significant finding | |
| Oral and Dental | | |
| | - No significant finding | |
| Cardiovascular system | 1 | |
| Heart rate (Per minute) | - 72 | |
| Rhythm | - Regular | |
| Systolic(mm of Hg) | - 107 | |
| Diastolic(mm of Hg) | - 77 | |
| | - B.P. Sitting | |
| Heart sounds | - S1S2+ | |
| Respiratory system | | |
| Breath sounds | - Normal vesicular breath sounds | |
| Abdomen | | |
| Appearance | - Normal | |
| Organomegaly | - No | |
| Tenderness | - No | |
| Central nervous system | m | |
| | - No neurological deficit | |
| Skin | | |
| | - No significant finding | |
| Musculo Skeletal System | em | |
| • | - No significant finding | |
| | | |

| Name : Mr. ABHISHEK KUMAR MEDIWHEEL FULL BODY ANN | | Date : 01/04/2024 AHC No : BPLAH7716 |
|-------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|
| Psychological Assessment | | |
| Psychological assessment | - Normal | |
| Opthalmology consultation | | |
| Opthalmology consultation done by Opthalmology findings Eyemist 4 times/day for 1 month BE Progressive glasses | Dr.Siddhartha Malaiya BE A/s wnl BE Central fundus: Disc N CDR 0.3, FR + Treatment BE e/d | |
| ENT consultation | | |
| ENT consultation done by | - Dr Ankit Mishra | |
| Dental consultation | | |
| Dental findings | Dr. Anjali Pandey O/E Multiple pit caries in upper & lower teeth. T/Adv OPG | |

Printed By : NEELAM JAIN

Date : 01/04/2024

MEDIWHEEL FULL BODY ANNUAL PLUS ABOVE 50 MALE

AHC No: BPLAH7716

COMPLETE BLOOD COUNT(CBC) WITH ESR

| Test Name | Result | Unit | Level | Range |
|-----------------------------------------|--------|------------|-------|-----------|
| HAEMOGLOBIN | 15.0 | g/dL | • | 13.0-17.0 |
| Packed cell volume (Calculated) | 43.2 | % | ٠ | 38.3-48.6 |
| RBC Count | 5.04 | Million/ul | ٠ | 4.50-5.90 |
| MCV- | 85.7 | fl | ٠ | 80-100 |
| MCH- | 29.7 | pg | ٠ | 27-32 |
| MCHC- | 34.7 | g/dL | • | 32-36 |
| RDW | 14.5 | % | • | 11.8-14.5 |
| TLC COUNT | 5.68 | 10³/mm³ | ٠ | 4.0-11.0 |
| Neutrophils | 59 | % | ٠ | 40-80 |
| Lymphocytes | 31 | % | ٠ | 20-40 |
| Monocytes | 7 | % | ٠ | 2-10 |
| Eosinophils | 3 | % | • | 1-6 |
| Basophils | 0 | % | • | 0-2 |
| Platelet Count | 154.0 | 10³/mm³ | ٠ | 150-450 |
| Mean Platelet Volume | 12.1 * | fl | • | 6.5-12.0 |
| ERYTHROCYTE SEDIMENTATION RATE (ESR) | 1 | mm/1st hr | ٠ | 0-15 |

URINE ROUTINE (CUE)

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 |
|---------------|---------------------|--------------|---------|-------|---------------|
| Specific Grav | ity | 1.025 | | • | 1.005 - 1.025 |
| Colour: | | Pale-Yellow | | | |
| Transparency | /: | Clear | | | |
| pН | | Acidic | | | |
| Protein : | | Nil | | | |
| Sugar: | | Nil | | | |
| Ketone | | Nil | | | |
| Bilirubin: | | Nil | | | |
| | | | | | |
| | Within Normal Range | Borderline H | igh/Low | Out | of Range |

| Name : Mr. ABHISHEK KUMAR (MEDIWHEEL FULL BODY ANNU | | | 000033516 Date AHC N | : 01/04/2024 o : BPLAH7716 |
|---------------------------------------------------------|--------|------|-------------------------|-------------------------------|
| RBC | Nil | | | |
| Pus Cells | 1-2 | /hpf | 0.0 - 5.0/HPF | |
| Epithelial Cells | 1-2 | /hpf | <20 | |
| Yeast Cells | Absent | | | |
| Bacteria: | Absent | | | |

Absent

Absent

ABSENT

| BLOOD GROUPING AND TYPING (ABO and Rh) | |
|----------------------------------------|--|

Casts:

Crystals:

| Test Name | Result | Unit | Level | Range | | |
|--------------------------------------------------|------------|-------|-------|----------------------------------------------------------|--|--|
| ABO Group: | В | | | | | |
| Rh (D) Type: | Positive | | | | | |
| <u>GLUCOSE - SERUM / PLASMA (FAS</u> | TING) | | | | | |
| Test Name | Result | Unit | Level | Range | | |
| Glucose - Plasma (Fasting) | 92 | mg/dL | • | 70-100 | | |
| <u>GLUCOSE - SERUM / PLASMA (POS</u> | T PRANDIAL |) | | | | |
| Test Name | Result | Unit | Level | Range | | |
| Glucose - Plasma (Post prandial) | 111 | mg/dL | • | 70-140 | | |
| GLYCOSYLATED HEMOGLOBIN (HBA1C) - WHOLE BLOOD | | | | | | |
| Test Name | Result | Unit | Level | Range | | |
| GLYCOSYLATED HEMOGLOBIN (HBA1C) - WHOLE BLOOD | 5.2 | % | • | 4.0-5.6 | | |
| LIPID PROFILE TEST (PACKAGE) | | | | | | |
| Test Name | Result | Unit | Level | Range | | |
| Total Cholesterol | 164 | mg/dL | • | Desirable: <200 Borderline High: 200–239 High >240 | | |
| HDL Cholesterol | 48 | mg/dL | • | >40 | | |
| | | | | | | |

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Within Normal Range

Borderline High/Low

Out of Range

Name: Mr. ABHISHEK KUMAR GIRI UHID : ASHB.0000033516 Date : 01/04/2024 MEDIWHEEL FULL BODY ANNUAL PLUS ABOVE 50 MALE AHC No: BPLAH7716 LDL Cholesterol (Direct LDL) 102 * mg/dL Optimal: <100 Above optimal: 100-129 Borderline high: 130-159 High: 160-189 Very high: >190 Triglycerides - Serum 154 * mg/dL Normal<150 Borderline high 150–199 High 200-499 Very high: ≥ 500 **VLDL CHOLESTEROL - SERUM** 31 * 15-30 Total Cholesterol / HDL Cholesterol Ratio 3.5 3.5-5.0 (Calculated) LIVER FUNCTION TEST (PACKAGE) **Test Name** Result Unit Level Range Protein Total - Serum 7.0 g/dL 6.6-8.3 Albumin - Serum 4.5 g/dL 3.5-5.2 GLOBULIN 2.5 * g/dL 2.6-4.6 ALBUMIN AND GLOBULIN RATIO 1.8 0.9-2.0 U/L AST (SGOT) 25 < 50 U/L <50 ALT(SGPT) - SERUM 27 **BILIRUBIN TOTAL** 0.9 mg/dL 0.3-1.2 **BILIRUBIN CONJUGATED (DIRECT)** 0.2 mg/dL <0.2 **BILIRUBIN UNCONJUGATED** 0.7 mg/dL 0.1-1.2 (INDIRECT) Alkaline Phosphatase - Serum 84 U/L 30-120 19 U/L GAMMA GLUTAMYL 0 - 55 **TRANSPEPTIDASE - SERUM CREATININE - SERUM / PLASMA Test Name** Result Unit Level Range **CREATININE - SERUM / PLASMA** 0.82 mg/dL 0.72 - 1.18

Borderline High/Low

Out of Range

Within Normal Range

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MEDIWHEEL FULL BODY ANNUAL PLUS ABOVE 50 MALE

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URIC ACID - SERUM / PLASMA

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 | 9.0 * | mg/dL | ٠ | 3.5-7.2 |
| BUN (BLOOD UREA NITROGEN) | | | | |
| Test Name | Result | Unit | Level | Range |
| BUN (BLOOD UREA NITROGEN) | 9.6 | mg/dL | | Male: <50yrs 8.87-20.5 mg/dl Male:>50yrs 8.41-25.7 mg/dl |
| THYROID PACKAGE | | | | |
| Test Name | Result | Unit | Level | Range |
| TOTAL T3: TRI IODOTHYRONINE - SERUM | 1.03 | ng/ml | ٠ | 0.60-1.81 |
| TOTAL T4: THYROXINE - SERUM | 9.02 | µg/dL | ٠ | 5.01 - 12.45 |
| TSH: Thyroid Stimulating Hormone | 1.88 | µIU/mL | ٠ | 0.35-5.50 |

PROSTATIC SPECIFIC ANTIGEN (PSA TOTAL) - SERUM

PSA is present in small quantities in the serum of men with healthy prostates, but is often elevated in the presence of prostate cancer or some prostate disorders. PSA is not a unique indicator of prostate cancer, it may also detect prostatitis or benign prostatic hyperplasia. Only about 30 percent of patients with high PSA have prostate cancer diagnosed after biopsy. It is recommended in men above 50 years of age.

Borderline High/Low

Out of Range

| Test Name | Result | Unit | Level | Range |
|----------------------------------------|--------|-------|-------|-------|
| Prostatic Specific Antigen (PSA Total) | 0.9 | ng/mL | • | < 4 |

<u>ECG</u>

-Normal

TMT/2D ECHO

-Mild Concentric LVH -Grade I Diastolic Dysfunction -No RWMA at Rest -Normal LV Systolic Function (LVEF : 60%)

ULTRASOUND - WHOLE ABDOMEN

Within Normal Range

Date : 01/04/2024

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IMPRESSION:- Sonography Study Reveals:-

- Bilateral renal concretions/ tiny calculi with no hydronephrosis.
- No other significant abnormality detected.

ADV:- Clinical Correlation.

Dr Krati Khandelwal Consultant Radiologist.

X-RAY CHEST PA

IMP:- RADIOGRAPHIC IMAGE REVEALS:-Normal findings are seen.

Thanks for Ref





Out of Range

Date : 01/04/2024

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Dr.AKHIL KUMAR TIWARI

Printed By : Akhil Kumar Tiwari

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.

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AICVD RISK SCORE REPORT

| RISK STATUS | YOUR SCORE | ACCEPTABLE SCORE |
|--------------------|------------|------------------|
| Low Risk | 5 | 5 |

Your cardiovascular disease risk in the next 10 years is within the Normal limits for 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.
- 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

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