

Mrs. SHABNAM SINGH (32 /F)

UHID : ASHB.0000033477

AHC No : BPLAH7696 Date : 31/03/2024

MEDIWHEEL FULL BODY HEALTH ANNUAL PLUS

CHECK FEMALE

Dear Mrs. SHABNAM SINGH

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 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.

Name: Mrs. SHABNAM SINGH (32 /F)

Date: 31/03/2024

Address: KATRA HILLS BAGHMUGALIYA BHOPAL, BHOPAL, BHOPAL, MADHYA PRADESH,

INDIA

Examined by : Dr. AKHIL KUMAR TIWARI UHID : ASHB.0000033477

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FEMALE



For corporate health checkup

No specific complaints

Present Known illness

No history of - Hypertension, Dyslipidemia, Heart disease, Stroke, Asthma, COPD, Cancer,

Impaired Glycemia

Diabetes mellitus - type 2; Since - 2yrs; Medication - regular

Thyroid disease - hypothyroidism; Since - 10yrs; Medication - regular

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Drug Allergy

NO KNOWN ALLERGY :01/04/2024

Systemic Review

Cardiovascular system : Chest pain - no; Breathing difficulty - no

Respiratory system : - Nil Significant

Oral and dental : - Nil Significant

Gastrointestinal system : Appetite - normal; Bowel habits - regular

Genitourinary system: Frequency - normal; Dysuria/burning micturition - no; Urgency - no

Gynaec history: Last menstrual period - 16-3-24; Pregnant - No; Periods - regular; No of

Children - 1; No of deliveries - 1; Deliveries - LSCS

Central nervous system : Head ache - on and off

Eyes : - Nil Significant

ENT : - Nil Significant

Musculoskeletal system :

Spine and joints
- Nil Significant

Skin : - Nil Significant

Weight : - stable

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General symptoms: General symptoms - tiredness, weakness

E

Present medications: - Ta

- Tab Thyronorm 150 OD Tab Glimistart M1 BD



Past medical history

Past medical history - nil significant

Covid 19 - Yes Post detection (3 - No

Weeks)

Hospitalization for - No

Covid 19

Oxygen support - No



Surgical history

Caesarian section - 1

Immunization history

- Covid Dose1, Covid Dose2



Personal history

Ethnicity - Indian Asian

Marital status - Married

No. of children - 1

Profession - education and allied fields

Diet - Mixed Diet

Alcohol - does not consume alcohol

Smoking - No
Chews tobacco - No
Physical activity - Mild



Family history

 Father
 - alive

 Aged
 - 58

 Mother
 - alive

 Aged
 - 50

 Brothers
 - 1

 Sisters
 - 2

 Diabetes
 - father

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Hypertension - father

Coronary artery - none

disease

Cancer - None

Physical Examination



General

General appearance - normal

Build - over weight

Height - 166
Weight - 95.4
BMI - 34.62
Pallor - No
Oedema - no



Head and ENT

Ear - Wax



Cardiovascular system

Heart rate (Per minute) - 89

Rhythm - Regular Systolic(mm of Hg) - 103 Diastolic(mm of Hg) - 75

- B.P. Sitting

Heart sounds - S1S2+

Respiratory system

Breath sounds - Normal vesicular breath sounds



Abdomen

Appearance - Normal
Organomegaly - No
Tenderness - No



Central nervous system

- No neurological deficit

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- No significant finding



Musculo Skeletal System

- No significant finding

Psychological Assessment

Psychological assessment - Normal

ENT consultation

ENT consultation done by - Dr Ankit Mishra

ENT findings - Soliwax drop 3 drops TDS

Dental consultation

Dental findings - Dr. Anjali Pandey

O/E Stains & calculus present

Occlusal cavity with

36T/Adv

Oral prophylaxis

Restoration with 36

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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.

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Test Name	Result	Unit	Level	Range
Specific Gravity	1.025		•	1.005 - 1.025
Colour:	Pale-Yellow			
Transparency:	Clear			
pH	Acidic			
Protein:	Nil			
Sugar:	Nil			
Ketone	Nil			
Bilirubin:	Nil			
RBC	Nil			
Pus Cells	1-2	/hpf		0.0 - 5.0/HPF
Epithelial Cells	1-2	/hpf		<20
Yeast Cells	Absent			
Bacteria:	Absent			
Casts:	Absent			ABSENT
Crystals:	Absent			

COMPLETE BLOOD COUNT(CBC) WITH ESR

Within Normal Range

Test Name	Result	Unit	Level	Range
HAEMOGLOBIN	12.7	g/dL	•	12.0 to 15.1
Packed cell volume (Calculated)	37.4	%	•	35.5-44.9
RBC Count	4.34	Million/ul	•	4.00-5.20
MCV-	86.1	fl	•	80-100
MCH-	29.4	pg	•	27-32
MCHC-	34.1	g/dL	•	32-36
RDW	14.4	%	•	12.2-16.1
TLC COUNT	6.88	10³/mm³	•	4.0-11.0
Neutrophils	59	%	•	40-80
Lymphocytes	35	%	•	20-40

Borderline High/Low

Out of Range

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Monocytes	4	%	•	2-10
Eosinophils	2	%	•	1-6
Basophils	0	%	•	0-2
Platelet Count	174.8	10³/mm³	•	150-450
Mean Platelet Volume	12.1 *	fl	•	6.5-12.0
ERYTHROCYTE SEDIMENTATION RATE (ESR)	41 *	mm/1st hr	•	0-20

BLOOD GROUPING AND TYPING (ABO and Rh)

Test Name	Result	Unit	Level	Range

ABO Group: O

Rh (D) Type: Positive

GLUCOSE - SERUM / PLASMA (FASTING)

Test Name	Result	Unit	Level	Range
Glucose - Plasma (Fasting)	181 *	mg/dL	•	70-100

GLUCOSE - SERUM / PLASMA (POST PRANDIAL)

Test Name	Result	Unit	Level	Range

Glucose - Plasma (Post prandial) 268 * mg/dL • 70-140

GLYCOSYLATED HEMOGLOBIN (HBA1C) - WHOLE BLOOD

Test Name	Result	Unit	Level	Range
GLYCOSYLATED HEMOGLOBIN (HBA1C) - WHOLE BLOOD	8.4 *	%	•	4.0-5.6

LIPID PROFILE TEST (PACKAGE)

Test Name	Result	Unit	Level	Range
Total Cholesterol	154	mg/dL	•	Desirable: <200 Borderline High: 200–239 High >240
HDL Cholesterol	41	mg/dL	•	>40

Within Normal Range Borderline High/Low Out of Range

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LDL Cholesterol (Direct LDL)	100	mg/dL	•	Optimal: <100 Above optimal: 100-129 Borderline high: 130-159 High: 160-189 Very high: >190
Triglycerides - Serum	186 *	mg/dL	•	Normal<150 Borderline high 150–199 High 200–499 Very high: ≥ 500
VLDL CHOLESTEROL - SERUM	37 *		•	15-30
Total Cholesterol / HDL Cholesterol Ratio (Calculated)	3.8		•	3.5-5.0
LIVER FUNCTION TEST (PACKAGE)				
Test Name	Result	Unit	Level	Range
Protein Total - Serum	7.2	g/dL	•	6.6-8.3
Albumin - Serum	4.4	g/dL	•	3.5-5.2
GLOBULIN	2.8	g/dL	•	2.6-4.6
ALBUMIN AND GLOBULIN RATIO	1.6		•	0.9-2.0
AST (SGOT)	27	U/L	•	< 35
ALT(SGPT) - SERUM	33	U/L	•	<35
BILIRUBIN TOTAL	0.4	mg/dL	•	0.3–1.2
BILIRUBIN CONJUGATED (DIRECT)	0.1	mg/dL	•	<0.2
BILIRUBIN UNCONJUGATED (INDIRECT)	0.3	mg/dL	•	0.1-1.2
Alkaline Phosphatase - Serum	130 *	U/L	•	30-120
GAMMA GLUTAMYL TRANSPEPTIDASE - SERUM	31	U/L	•	0-38
CREATININE - SERUM / PLASMA				
Test Name	Result	Unit	Level	Range
CREATININE - SERUM / PLASMA	0.54 *	mg/dL	•	0.55-1.02

Borderline High/Low

Out of Range

Within Normal Range

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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.

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Test Name	Result	Unit	Level	Range
Uric Acid - Serum	4.6	mg/dL	•	2.6-6.0
BUN (BLOOD UREA NITROGEN)				
Test Name	Result	Unit	Level	Range
BUN (BLOOD UREA NITROGEN)	8.8	mg/dL		Female: <50yrs 7.01-18.7 mg/dl Female:>50yrs 9.81-20.1 mg/dl
THYROID PACKAGE				
Test Name	Result	Unit	Level	Range
TOTAL T3: TRI IODOTHYRONINE - SERUM	0.97	ng/ml	•	0.60-1.81
TOTAL T4: THYROXINE - SERUM	11.11	µg/dL	•	5.01 - 12.45
TSH: Thyroid Stimulating Hormone PAP SMEAR /CERVICAL SMEAR Histopathology	6.11 *	μIU/mL	•	0.35-5.50

Lab Ref No:

ASP/351/24

Specimen:

Received two conventional alcohol-fixed smears for cervical cytology. Papanicolaou staining done.

SPECIMEN ADEQUACY:

Satisfactory for evaluation

Microscopic Description:

Smears show superficial and intermediate squamous cells against clear background. Endocervical cells not seen in smears examined.

INTERPRETATION/RESULT:

Negative for intraepithelial lesion or malignancy (NILM)

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ULTRASOUND - WHOLE ABDOMEN

IMPRESSION:- Sonography Study Reveals:-

- · Borderline hepatomegaly with grade I fatty liver.
- · Mild enlarged right kidney.
- Mild prominence of intra hepatic vessels Needs 2 D Echo correlation.

ADV:- Clinical Correlation.

CARDIOLOGY

TMT/2D ECHO

ECG

X Ray

X-RAY CHEST PA

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Executive Summary



DIABETES MELLITUS
HYPOTHYROIDISM
OBESITY
LV DYSFUNCTION, ? ISCHEMIC CARDIOMYOPATHY

Wellness Prescription

Advice On Diet :-



LOW FAT/CARB DIET

Advice On Physical Activity:-



REGULAR EXERCISE.

Medications

TAB THYRONORM 175 MCG 1 DAILY
TAB VERIFICA DM FORTE 1 DAILY WITH BREAKFAST.
TAB GLIMSTER M1 1 DAILY
TAB DYTOR 10 PLUS 1 DAILY

Recommended Follow-up Consultations

Speciality Name	Doctor Name	Schedule WithIn	Remarks
CARDIOLOGY	GAURAV KHANDELWAL DR.C S MUTHUKUMARAN	1 Day(s)	

Follow-up and Review Plan



CAG

Printed By: Akhil Kumar Tiwari



Dr.AKHIL KUMAR TIWARI

AHC Physician / 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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Medications

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Dr.AKHIL KUMAR TIWARI

AHC Physician / Consultant Internal Medicine

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AICVD RISK SCORE REPORT

RISK STATUS	YOUR SCORE	ACCEPTABLE SCORE
High Risk	7	3

Your likelihood of developing cardiovascular disease in the next ten years is 1.6 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.
- 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 3 months if you have:
 - o Uncontrolled high blood pressure
 - o Diabetes
 - o Dyslipidemia
 - o Coronary heart disease
- You will be referred to a cardiologist.

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