

Mrs. USHA ASNANI (50 /F)

UHID : ASHB.0000033266

AHC No : BPLAH7606 Date : 29/03/2024

MEDIWHEEL FULL BODY ANNUAL PLUS CHECK

ADVANCED-FEMALE

Dear Mrs. USHA ASNANI

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. USHA ASNANI (50 /F) Date : 29/03/2024

Address: H NO 26, NEERAJ NAGAR, BAWADIYAKALAN, BHOPAL, BHOPAL, MADHYA

PRADESH, INDIA

Examined by : Dr. AKHIL KUMAR TIWARI UHID : ASHB.0000033266

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For corporate health checkup

Prolapse Uterus

Present Known illness

No history of - Diabetes mellitus, Hypertension, Dyslipidemia, Thyroid disorder, Heart

disease, Stroke, Asthma, COPD, Cancer, Impaired Glycemia

Drug Allergy

NO KNOWN ALLERGY :29/03/2024

<u>s</u>

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 - 6months; Pregnant - No; Periods - irregular; No of

Children - 2; No of deliveries - 2; Deliveries - normal vaginal delivery

Central nervous system : - Nil Significant

Eyes: Vision - normal with glasses; Glasses - yes; Glasses for - refractive error,

reading

ENT : - Nil Significant

Musculoskeletal system :

Spine and joints

- Nil Significant

Skin : - Nil Significant

Weight : - stable

General symptoms: General symptoms - tiredness, weakness

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Present medications : - Nil



Past medical history

Past medical history - nil significant

Covid 19 - No



Surgical history

Surgical history - Nil

Immunization history

- Covid Dose1, Covid Dose2



Personal history

- Indian Asian Ethnicity

Marital status - Married

- 2 No. of children

Profession - government employee

Diet - Mixed Diet

Alcohol - does not consume alcohol

- No **Smoking** - No Chews tobacco - Mild Physical activity



Family history

Father - has expired

49 Aged

Cause - cancer

- Throat

Mother alive - 70 Aged - 0 **Brothers** Sisters - 3 Coronary artery - none

disease

Cancer - father Type - Throat Name: Mrs. USHA ASNANI UHID : ASHB.0000033266 : 29/03/2024 **Date**

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Physical Examination



📤 General

General appearance - normal Build - obese Height - 153 Weight - 81.7 BMI - 34.9 Pallor - No Oedema - no



Cardiovascular system

- 72 Heart rate (Per minute)

Rhythm - Regular Systolic(mm of Hg) - 124 Diastolic(mm of Hg) - 86 - S1S2+ Heart sounds

Respiratory system

Breath sounds - Normal vesicular breath sounds



🚵 Abdomen

Appearance - Flabby Organomegaly - No **Tenderness** - No



Central nervous system

- No neurological deficit



- No significant finding



Musculo Skeletal System

- No significant finding

Psychological Assessment

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Psychological assessment - Normal

Gynaec findings

Marital status - married

No of Children - 2 Male - 2

Deliveries - NVDs

LMP - 6 months back

Pap smear - Taken

Opthalmology consultation

Opthalmology consultation

done by

- Dr.Siddhartha Malaiya

Opthalmology findings

- BE A/s wnl

BE Central fundus: Disc N CDR 0.3, FR +

Treatment BE e/d

Addwet -

4 times/day for 1 month BE e/d Milflox 4 times/day

for 1 month

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COMPLETE BLOOD COUNT(CBC) WITH ESR

Test Name	Result	Unit	Level	Range
HAEMOGLOBIN	12.9	g/dL	•	12.0 to 15.1
Packed cell volume (Calculated)	37.9	%	•	35.5-44.9
RBC Count	4.57	Million/ul	•	4.00-5.20
MCV-	82.9	fl	•	80-100
MCH-	28.2	pg	•	27-32
MCHC-	34.0	g/dL	•	32-36
RDW	15.6	%	•	12.2-16.1
TLC COUNT	6.74	10³/mm³	•	4.0-11.0
Neutrophils	65	%	•	40-80
Lymphocytes	27	%	•	20-40
Monocytes	6	%	•	2-10
Eosinophils	2	%	•	1-6
Basophils	0	%	•	0-2
Platelet Count	242.8	10³/mm³	•	150-450
Mean Platelet Volume	10.4	fl	•	6.5-12.0
ERYTHROCYTE SEDIMENTATION RATE (ESR)	57 *	mm/1st hr	•	0-20

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 Gravity	1.015		•	1.005 - 1.025
Colour:	Yellow			
Transparency:	Clear			
рН	Acidic			
Protein :	Nil			
Sugar:	Nil			
Ketone	Nil			
Within Normal Range	Borderline	High/Low	Out	of Range

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Bilirubin: Nil

RBC Nil

Pus Cells 4-6 /hpf 0.0 - 5.0/HPF

Epithelial Cells 1-2 /hpf <20

Yeast Cells Absent

Bacteria: Absent

Casts: Absent ABSENT

Crystals: Absent

BLOOD GROUPING AND TYPING (ABO and Rh)

Test Name Result Unit Level Range

ABO Group: A

Rh (D) Type: Positive

GLUCOSE - SERUM / PLASMA (FASTING)

Test Name Result Unit Level Range

Glucose - Plasma (Fasting) 94 mg/dL 70-100

GLUCOSE - SERUM / PLASMA (POST PRANDIAL)

Test Name Result Unit Level Range

Glucose - Plasma (Post prandial) 81 mg/dL 970-140

GLYCOSYLATED HEMOGLOBIN (HBA1C) - WHOLE BLOOD

Test Name Result Unit Level Range

GLYCOSYLATED HEMOGLOBIN 5.3 % 4.0-5.6 (HBA1C) - WHOLE BLOOD

LIPID PROFILE TEST (PACKAGE)

Test Name Result Unit Level Range

Total Cholesterol 246 * mg/dL • Desirable: <200

Borderline High: 200-239

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High >240

HDL Cholesterol 62 mg/dL >40

Within Normal Range
Borderline High/Low
Out of Range

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Within Normal Range	Borderline F	ligh/Low	Out	of Range
CREATININE - SERUM / PLASMA	0.73	mg/dL	•	0.55-1.02
Test Name	Result	Unit	Level	Range
CREATININE - SERUM / PLASMA				
GAMMA GLUTAMYL TRANSPEPTIDASE - SERUM	16	U/L	•	0-38
Alkaline Phosphatase - Serum	92	U/L	•	30-120
BILIRUBIN UNCONJUGATED (INDIRECT)	0.3	mg/dL	•	0.1-1.2
BILIRUBIN CONJUGATED (DIRECT)	0.1	mg/dL	•	<0.2
BILIRUBIN TOTAL	0.4	mg/dL	•	0.3–1.2
ALT(SGPT) - SERUM	18	U/L	•	<35
AST (SGOT)	18	U/L	•	< 35
ALBUMIN AND GLOBULIN RATIO	1.2		•	0.9-2.0
GLOBULIN	3.1	g/dL	•	2.6-4.6
Albumin - Serum	3.9	g/dL	•	3.5-5.2
Protein Total - Serum	7.0	g/dL	•	6.6-8.3
Test Name	Result	Unit	Level	Range
LIVER FUNCTION TEST (PACKAGE)			
Total Cholesterol / HDL Cholesterol Ratio (Calculated)	4.0		•	3.5-5.0
VLDL CHOLESTEROL - SERUM	28		•	15-30
Triglycerides - Serum	138	mg/dL	•	Normal<150 Borderline high 150–199 High 200–499 Very high: ≥ 500
LDL Cholesterol (Direct LDL)	162 *	mg/dL	•	Optimal: <100 Above optimal: 100-129 Borderline high: 130-159 High: 160-189 Very high: >190

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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	5.2	mg/dL	•	2.6-6.0
BUN (BLOOD UREA NITROGEN)				
Test Name	Result	Unit	Level	Range
BUN (BLOOD UREA NITROGEN)	12.8	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	1.03	ng/ml	•	0.60-1.81
TOTAL T4: THYROXINE - SERUM	12.35	μg/dL	•	5.01 - 12.45
TSH: Thyroid Stimulating Hormone PAP SMEAR /CERVICAL SMEAR Histopathology	1.91	μIU/mL	•	0.35-5.50

Lab Ref No:

ASP/338/24

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 with few neutrophils in background. Endocervical cell clusters appear normal.

INTERPRETATION/RESULT:

Negative for intraepithelial lesion or malignancy (NILM)

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ECG

-WNL

TMT/2D ECHO

-No RWMA at Rest

-Normal LV Systolic Function (LVFE: 60%)

ULTRASOUND - WHOLE ABDOMEN

IMPRESSION:- Sonography Study Reveals:-

- · Retroverted uterus showing homogeneous echopattern and appears in its normal position at the time of study.
- No 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

X Ray

MAMMOGRAPHY

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Executive Summary



Wellness Prescription

Advice On Diet :-



LOW FAT DIET

Advice On Physical Activity:-



REGULAR 30-45 MIN OF BRISK WALK

Medications

TAB CREVAST 10 MG 1 DAILY

Printed By: Akhil Kumar Tiwari

Dr.AKHIL KUMAR TIWARI

AHC Physician / Consultant Internal Medicine

AHC No: BPLAH7606

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

TAB CREVAST 10 MG 1 DAILY

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	9	5

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