

Mr. KUNAL KAMAL (34 /M)

UHID

AHIL.0000832574

AHC No

AHILAH185963

Date

10/01/2023

AGOI

MEDIWHEEL-FULL BODY CHK-BELOW40-MALE

Dear Mr. KUNAL KAMAL

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



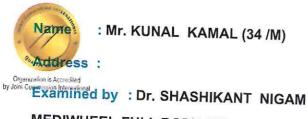
You can also download the Apollo 247 app on

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.

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





: Mr. KUNAL KAMAL (34/M)

MEDIWHEEL-FULL BODY CHK-BELOW40-MALE

:

Date

UHID

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AHC No : AHILAH185963

Chief Complaints

For Annual health checkup **HEADACHE**



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

Eves

- 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

Haemorrhoidectomy

- 2022

Accident history

- 2019

Accidental injury

FACIAL INJURY

Accidental injury due to - road traffic accident

Page 3 of 12



For online appointment: www.askapollo.com Keep the records carefully and bring them along during your next visit to our Hospital

HOSPITALS

Personal history

Ethnicity

- Indian Asian

Marital status

Married

Profession

corporate employed

Diet

Mixed Diet

Alcohol

consumes alcohol occasionally

Frequency

occasional

Consuming alcohol for - 2 YRS

Smoking

Duration of smoking(in - 2 YRS

years) Type

- Cigarette

Frequency

occasional

Chews tobacco

No

Physical activity

- Moderate

Family history

Father

- alive

Aged

65

Mother

alive

Aged

59

Sisters

2

Coronary artery

- none

disease

Cancer

- None

Physical Examination



General

General appearance

- normal

Build

- normal

Height

- 162

Weight

- 80

BMI

- 30.48

Pallor

- No

Oedema

- no

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MEDIWHEEL-FULL BODY CHK-BELOW40-MALE



°Cardiovascular system

Heart rate (Per minute)

- 69

Rhythm

- Regular

- B.P. Supine

Systolic(mm of Hg)

- 130

Diastolic(mm of Hg)

- 74

Heart sounds

- S1S2+

Respiratory system

Breath sounds

- Normal vesicular breath sounds

Abdomen 🖒

Organomegaly

- No

Tenderness

- No

Printed By:

MUKTA S ADALTI

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Organization is According to By Joint Commission in 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	25	mL		
Specific Gravity	1.005			
Colour:	Pale-Yellow			
Transparency:	Clear			
рН	5.5			
Protein :	Nil			
Sugar:	Nil			
Blood:	Negative			
Ketone	Absent			
Bile Pigments:	Absent			
Urobilinogen	Nil .	E.U./dL		
Nitrite	Negative			
Pus Cells	Occassional			0-5
RBC	NiI	/hpf		0-5/hpf
Epithelial Cells	Occassional			0-3/11pi
Casts:	Absent			
Crystals:	Absent			
COMPLETE D				

COMPLETE BLOOD COUNT WITH ESR

Test Name		Result	Unit	Level	Range
Hemoglobin (Photo	ometric Measurement)	12.2 *	gm%		13.0-17.0
Packed cell volume	e(Calculated)	39.3 *	%		40-50
RBC COUNT (Impe	edance)	6.13 *	Million/ul		4.5-5.9
MCV (From RBC H	istogram)	64 *	fl		80-100
MCH(Calculated)		19.88 *	pg		27-32
MCHC(Calculated)		31.1	%		31-36
RDW(Calculated)		16.4 *	%		11.5-14.5
WBC Count (Imped	ance)	7977	/cu mm		
					4000-11000
Within	Normal Range	Borderline	High/Low	Out o	of Range

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UHID : AHIL.0000832574

Date AHC No AHILAH 85963

MEDIWHEEL-FULL BODY CHK-BELOW40-MALE

n de Commidde de					
is a new prophils	54	%		40-75	HOSPITALS
Lymphocytes	35	%		20-40	
Monocytes	6	%			
Eosinophils	5	%		2-10	
Basophils	0	%		01-06	
Platelet Count (Impedance)	249800	/cu mm		0-1	
MPV (Calculated)	8.4	fl		150000-450000	
RBC:	Erythrocytosis			7-11	
RBC::		~Hypochromia (+	NA:		
ERYTHROCYTE SEDIMENTATION		Trypochroffia (+	r)~iviicro	ocytes (+)	
RATE (ESR) (Automated/ optic– electronic)	03	mm/1st hr		0-15	
SUGGEST:	Hb electrophore	esis.			
URINE GLUCOSE(FASTING)					

RINE GLUCOSE(FASTING)

Test Name	Result	Unit	Level	Range	
Urine Glucose (Post Prandial)	Nil				

URINE GLUCOSE(POST PRANDIAL)

Test Name	Result	Unit	Level	Range	ã
Urine Glucose (Post Prandial)	Nil				

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

Within Normal Range	Borderline	High/Low	Out o	of Range
Direct Dilliubili	0.236	mg/dL		Upto 0.3 mg/dl
Direct Bilirubin	0.73	mg/dL		0.300-1.200
Total Bilirubin				year Male . C40
AST (SGOT) - SERUM	21	U/L		> 1 year Male : <40
ALKALINE PHOSPHATASE - SERUM/PLASMA	78	U/L		Adult(Male): 40 - 129
ALT(SGPT) - SERUM / PLASMA	20	U/L		0-50
Test Name	Result	Unit	Level	Range
or known liver damage, and to	llow the response	to treatment.		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

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UHID : AHIL.0000832574

Date 01/2023 AHC No

Organization is Acce**lind**irect Bilirubin

mg/dL

1 Day ≤5.1 mg/dL

HOSPITALS

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	Result	Unit	Level	Range
CREATININE - SERUM / PLASMA	0.81	mg/dL		Adult Male: 0.6 - 1.3

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
GGTP: GAMMA GLUTAMYL TRANSPEPTIDASE - SERUM	12	U/L	•	Male: 10 - 71
GLUCOSE SERVINA DI ASSA				Female : 6 - 42

GLUCOSE - SERUM / PLASMA (FASTING)

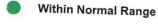
Test Name	Result	Unit	Level	Range
Glucose - Plasma (Fasting)	106 *	mg/dL		70 - 100 : Normal
01110000				100 - 125 : Impaired Glucose Tolerance >= 126 : Diabetes Mellitus

GLUCOSE - SERUM / PLASMA (POST PRANDIAL) - PPBS

Test Name	Result	Unit	Level	Range
Glucose - Plasma (Post Prandial)	126	mg/dL		70-140
GLYCOSYLATED HEMOCLOPIN	/IID # 4 0\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			10 140

GLYCOSYLATED HEMOGLOBIN (HBA1C) - WHOLE BLOOD

Test Name	D!			
e e e e e e e e e e e e e e e e e e e	Result	Unit	Level	Range







Out of Range

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UHID : AHIL.0000832574 MEDIWHEEL-FULL BODY CHK-BELOW40-MALE



Organization is Accessive Convergence of the Accessive Commission International

%

Normal < 5.7

HOSPITALS

%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

Range

Level

Estimated Average Glucose.

105.41

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

PROTEIN TOTAL - SERUM / PLASMA	7.58	g/dL		6.00-8.00
PROTEIN TOTAL - SERUM / PLASMA	7.58	g/dL		
ALBUMIN - SERUM	4.46	g/dL		6.00-8.00
ALBUMIN - SERUM	4.46	g/dL		Adult(18 - 60 Yr): 3.5 - 5.2
Globulin-Serum/Plasma	3.12	9,42		Adult(18 - 60 Yr): 3.5 - 5.2
Globulin-Serum/Plasma	3.12			2.20-4.20
A/G ratio	1.43			2.20-4.20
A/G ratio	1.43			1.00-2.00
THYROID PROFILE (T3,T4 AND TS				1.00-2.00
Test Name	ш			
rest Name	Result	Unit	Level	Range
TOTAL T3: TRI IODOTHYRONINE - SERUM	1.7	nmol/L	•	Adults(20-120 Yrs): 1.2 - 3.1 Pregnant Female : First Trimester : 1.61 - 3.53
TOTAL TALTING COMME				Second Trimester: 1.98 - 4.02 Third Trimester: 2.07 - 4.02
TOTAL T4: THYROXINE - SERUM	94	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	3.58	μIU/mL	•	14-120 years : 0.27 - 4.20
Within Normal Range Outline 9 of 12	Borderlin	e High/Low	Out o	f Range

Pag

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Organization is Accordingly by Joint Commission In 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.

UHID : AHIL.0000832574

Test Name	Result	Unit	Level	Range
URIC ACID - SERUM	7.2 *	mg/dL	•	Male : 3.4-7.0
BUN (BLOOD UREA NITROGEN)				Female : 2.4-5.7
Test Name	Result	Unit	Level	Range
BUN (BLOOD UREA NITROGEN)	8	mg/dL		6-20
UREA - SERUM / PLASMA	17	mg/dL		15 - 50
LIPID PROFILE - SERUM				10 00
Test Name	Result	Unit	Level	Range
Total Cholesterol	210 *	mg/dl		0 - 200 : Desirable 200 - 240 : Borderline High 240 - 280 : High > 280 : Very High
Triglycerides - Serum	135	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)	178 *	mg/dL		100 : Optimal 100-129 : Near Optimal 130-159 : Borderline High 160-189 : High
VLDL CHOLESTEROL	27			>=190 : Very High < 40 mg/dl
C/H RATIO	6 *		•	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.

Within Normal Range

Borderline High/Low



Out of Range

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MEDIWHEEL-FULL BODY CHK-BELOW40-MALE

Organization is Accreditely estigations Not Done / Not Yet Reported by Joint Commission International

Haematology

STOOL ROUTINE

Blood Bank - 2 Services

BLOOD GROUPING AND TYPING (ABO and Rh)

CARDIOLOGY

ECHO/TMT

ECG

Within Normal Range

Borderline High/Low



Out of Range





Executive Summary



.BODY WEIGHT 80 KG, DEAL BODY WEIGHT 49-60 KG IMPAIRED GLUCOSETOLERANCE

DYSLIPIDEMIA

.ECG - NORMAL SINUS RHYTHM

.TMT — TEST 3 NEGATIVE, EXERCISE TIME 8:02 , WORKLOAD 10.1 METS

.USG ABDOMEN - NORMAL STUDY

.CHEST X-RAY - NORMAL

.EYE - NORMAL

.DENTAL - AS PER DOCTOR ADVICE

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 49-60 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



in AskApollo App to book your follow-up appointments and investigations

Consulty Purdy

Printed By: MUKTA S ADALTI

SHIKANT AHC Physician word by Gandhinggar,

Gujarat-382428, INDIA 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. KUNAL KAMAL | Male | 34Yr 10Mth 18Days

UHID : AHIL.0000832574

Patient Location: AHC

Patient Identifier:

AHILAH185963

DRN

223001501

Completed on:

10-JAN-2023 09:36

Ref Doctor

DR. SHASHIKANT NIGAM

USG WHOLE ABDOMEN

FINDINGS:

Liver appears normal in size and shows uniform normal echotexture. No evidence of focal or diffuse 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 10.2 cms 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.

Prostate (volume 20 cc) is normal in size and echopattern.

IMPRESSION:-

Normal study.

Printed on:

10-Jan-2023 13:46

Printed By: 10

1075754

Reported By:

717876

Page 1 of 2









Mr. KUNAL KAMAL

AHIL.0000832574

AHILAH185963

USG WHOLE ABDOMEN

END OF THE REPORT -

T.V. Pari

TIRTH VINAYKUMAR PARIKH

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10-Jan-2023 13:46

Printed By:

1075754

Reported By: 717876

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DEPARTMENT OF RADIOLOGY AND IMAGING SCIENCES

Mr. KUNAL KAMAL | Male | 34Yr 10Mth 18Days **Patient Details**

AHIL.0000832574

Patient Location:

Patient Identifier:

AHILAH185963

DRN

UHID

123004116

Completed on:

10-JAN-2023 09:01

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



DR. VAIBHAVI PATEL

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10-Jan-2023 13:46

Printed By:

1075754

Reported By: 717876

Page 1 of 1





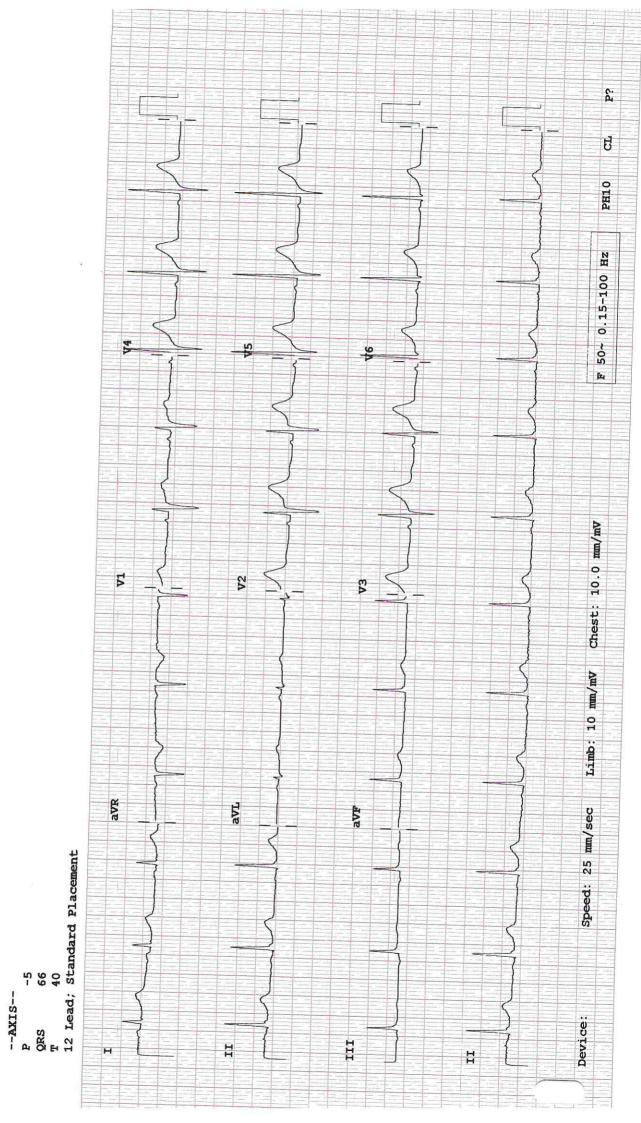
AHIL.0000832574 Mr. KUNAL KAMAL

34 Year(s) / Male

UHID, ian

DENTISTRY

DENTISTRY				
Name : Occupation : Age :	Ref. Physicia	n :	Unit No. :	
	DENTAL	RECORD		
PAIN : Score (0-10) DENTAL CLEANING HABIT	7 -	vice [Chara	acter :ionally
DO THE GUMS BLEED WHEN YO	Tooth Paste Po	nger [Stick Any otl	Any other
ARE YOUR TEETH SENSITIVE TO			Yes Yes Good	
ORAL TISSUE EXAMINATION	PERIODONTA	L EXAMINATIO	N	OCCLUSION
NORMAL FINDINGS IN DISEASE Lips : Cheeks : Tongue : Floor of the mouth : Palate : Tonsilar Area :	Gingivitis Calculus Recession Periodontal Pockets Attrition	MILD MOD	SEV C	CLASS I II III CROSSBITE Sypoplasia Inpaction
RESENT COMPLAINT:	Erosion Mobility		Mi Su	ssing Teeth pernumerary hers
RE-MEDICAL HISTORY. DI	M ☐ HTN ☐ Thyroid ticoagulant ☐ Under D	☐ Acidity ☐	Pregnand	His original Smoki



89

Rate

125 89 408 434

PR QRSD QT QTC





AHIL.0000832574

FION RECORDS

Name :

Mr. KUNAL KAMAL

UHID:

34 Year(s) / Male

Date:

0/1/23

Distance Vision:

Right Eye - 6

'.eft Eye -

(un ai ded)

(BE)6/6

Near Vision:

Right Eye: N6

Left Eye: N 6

una; led,

Gentoal lowh

0

APLN.TN - Right Eye

Left Eye- 6 mmHg

Both Eye - Colour Vision

Noval

Both Eye - Anterior Segment Examinations -

WN

Both Eye Posterior Segment Examinations -

wM

Dr. Jagrili Sinha
Dr. Jagrili Sinha
Dr. Jagrili Sinha
MS (Cprinshan)
MS (Cprinsha

Doctor's Signature

AHMROP028V1

Ophthalmologist Name