

#### Mr. SANDEEP KUMAR KATIYAR (45 /M)

UHID : ASHB.0000034024

AHC No : BPLAH7795 Date : 07/04/2024

MEDIWHEEL FULL BODY ANNUAL PLUS ABOVE 50

MALE

#### Dear Mr. SANDEEP KUMAR KATIYAR

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 <a href="https://www.apollo247.com/specialties">https://www.apollo247.com/specialties</a> 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

Name: Mr. SANDEEP KUMAR KATIYAR (45 /M)

Date: 07/04/2024

Address: LALGHATI AREA, BHOPAL, BHOPAL, MADHYA PRADESH, INDIA

Examined by: Dr. PROMISE JAIN UHID: ASHB.0000034024

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# **Chief Complaints**

For corporate health checkup

No specific complaints

# Present Known illness

No history of - Diabetes mellitus, Dyslipidemia, Thyroid disorder, Heart disease, Stroke,

Asthma, COPD, Cancer, Impaired Glycemia

Hypertension Since - 2-2.5 YEARS; Medication - regular; - T. BENDIPINE 4MG OD



### **Drug Allergy**

NO KNOWN ALLERGY :07/04/2024



# **Systemic Review**

Cardiovascular system : - Nil Significant

Respiratory system : - Nil Significant

Gastrointestinal system : - Nil Significant

Genitourinary system : - Nil Significant

Central nervous system : - Nil Significant

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

Musculoskeletal system :

Spine and joints

- LEFT ANKLE PAIN ON AND OFF SINCE 5-6 MONTHS. H/O LEFT ANKLE SPRAIN 6 MONTHS BACK.

Weight: - stable; Number of kgs - 93.4

Present medications: - T. BENDIPINE 4MG OD; Compliance - regular



#### Past medical history

Do you have any - No

allergies?

Covid 19 - Yes

Hospitalization for - No

Covid 19



# Surgical history

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Surgical history - Nil

#### Immunization history

- Covid Dose1, Covid Dose2



# **Personal history**

Indian Asian Ethnicity

Marital status - Married

- 2 No. of children

Diet - Vegetarian

does not consume alcohol Alcohol

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

- level ground walking



# Lamily history

- has expired Father

- 74 Aged Cause - stroke Mother - alive - 72 Aged **Brothers** - 1 - 3 Sisters

Diabetes - mother Coronary artery - none

disease

Cancer - None **CVA** - father

# **Physical Examination**



# General

Height - 170 - 93.4 Weight BMI - 32.32 Pallor - No

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Oedema - no



# Cardiovascular system

Heart rate (Per minute) - 67

Rhythm - Regular

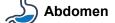
Systolic(mm of Hg) - 134

Diastolic(mm of Hg) - 84

Heart sounds - S1S2+

#### Respiratory system

Breath sounds - Normal vesicular breath sounds



Organomegaly - No Tenderness - No

#### **Cardiac consultation**

Cardiac consultation done

by

- Dr Gaurav Khandelwal

Cardiac findings - TMT mildly positive

No CArdiac symptoms

Adviced

CT Coronary Angiography

Advised Tab Ecosprin AV 75/10 once daily 9 pm

#### **Opthalmology consultation**

Opthalmology consultation

done by

Opthalmology findings

- Dr.SANGEETA BHADRA

- routine check up

A/S WNL adv

e/d refresh tear

glassess

Printed By: SANGEETA BHADRA

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# **COMPLETE BLOOD COUNT(CBC) WITH ESR**

| Test Name                            | Result | Unit       | Level | Range     |
|--------------------------------------|--------|------------|-------|-----------|
| HAEMOGLOBIN                          | 14.5   | g/dL       | •     | 13.0-17.0 |
| Packed cell volume (Calculated)      | 40.8   | %          | •     | 38.3-48.6 |
| RBC Count                            | 4.61   | Million/ul | •     | 4.50-5.90 |
| MCV-                                 | 88.6   | fl         | •     | 80-100    |
| MCH-                                 | 31.4   | pg         | •     | 27-32     |
| MCHC-                                | 35.5   | g/dL       | •     | 32-36     |
| RDW                                  | 14.4   | %          | •     | 11.8-14.5 |
| TLC COUNT                            | 6.81   | 10³/mm³    | •     | 4.0-11.0  |
| Neutrophils                          | 68     | %          | •     | 40-80     |
| Lymphocytes                          | 23     | %          | •     | 20-40     |
| Monocytes                            | 5      | %          | •     | 2-10      |
| Eosinophils                          | 4      | %          | •     | 1-6       |
| Basophils                            | 0      | %          | •     | 0-2       |
| Platelet Count                       | 167.8  | 10³/mm³    | •     | 150-450   |
| Mean Platelet Volume                 | 10.2   | fl         | •     | 6.5-12.0  |
| ERYTHROCYTE SEDIMENTATION RATE (ESR) | 13     | mm/1st hr  | •     | 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 Gravity                      | 1.030 *        | •          | 1.005 - 1.025 |
| Colour:                               | Pale-Yellow    |            |               |
| Transparency:                         | Clear          |            |               |
| рН                                    | Acidic         |            |               |
| Protein :                             | Nil            |            |               |
| Sugar:                                | Nil            |            |               |
| Ketone                                | Nil            |            |               |
| Bilirubin:                            | Nil            |            |               |
|                                       |                |            |               |
| <ul><li>Within Normal Range</li></ul> | Borderline Hig | h/Low 🛑 Oເ | ıt of Range   |

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**RBC** Nil

/hpf Pus Cells 1-2 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: В

Rh (D) Type: Positive

**GLUCOSE - SERUM / PLASMA (FASTING)** 

**Test Name** Result Unit Level Range

mg/dL Glucose - Plasma (Fasting) 98 70-100

GLUCOSE - SERUM / PLASMA (POST PRANDIAL)

**Test Name** Result Unit Level Range

Glucose - Plasma (Post prandial) 112 mg/dL 70-140

**GLYCOSYLATED HEMOGLOBIN (HBA1C) - WHOLE BLOOD** 

**Test Name** Result Unit Level Range 5.5 % GLYCOSYLATED HEMOGLOBIN 4.0-5.6

(HBA1C) - WHOLE BLOOD

**LIPID PROFILE TEST (PACKAGE)** 

**Test Name** Result Unit Level Range

183 **Total Cholesterol** mg/dL Desirable: <200

Borderline High: 200-239

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High >240

**HDL Cholesterol** 46 mg/dL >40

Within Normal Range

**Borderline High/Low** 

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| DIWITELET OLL BODT ANNOAL FLOC                         | ADOVE 30 N | IALL  |       | AIIC NO. DE LAITE 193   |
|--|------------|-------|-------|---|
| LDL Cholesterol (Direct LDL)                           | 121 *      | mg/dL | •     | Optimal: <100<br>Above optimal: 100-129<br>Borderline high: 130-159<br>High: 160-189<br>Very high: >190 |
| Triglycerides - Serum                                  | 166 *      | mg/dL | •     | Normal<150<br>Borderline high 150–199<br>High 200–499<br>Very high: ≥ 500                               |
| VLDL CHOLESTEROL - SERUM                               | 33 *       |       | •     | 15-30   |
| Total Cholesterol / HDL Cholesterol Ratio (Calculated) | 4.0        |       | •     | 3.5-5.0   |
| LIVER FUNCTION TEST (PACKAGE                           | )          |       |       |   |
| Test Name  | Result     | Unit  | Level | Range   |
| Protein Total - Serum                                  | 6.9        | g/dL  | •     | 6.6-8.3   |
| Albumin - Serum  | 4.1        | g/dL  | •     | 3.5-5.2   |
| GLOBULIN   | 2.8        | g/dL  | •     | 2.6-4.6   |
| ALBUMIN AND GLOBULIN RATIO                             | 1.5        |       | •     | 0.9-2.0   |
| AST (SGOT)   | 34         | U/L   | •     | < 50  |
| ALT(SGPT) - SERUM                                      | 45         | U/L   | •     | <50   |
| BILIRUBIN TOTAL  | 0.6        | mg/dL | •     | 0.3–1.2   |
| BILIRUBIN CONJUGATED (DIRECT)                          | 0.1        | mg/dL | •     | <0.2  |
| BILIRUBIN UNCONJUGATED (INDIRECT)                      | 0.5        | mg/dL | •     | 0.1-1.2   |
| Alkaline Phosphatase - Serum                           | 81         | U/L   | •     | 30-120  |
| GAMMA GLUTAMYL<br>TRANSPEPTIDASE - SERUM               | 24         | U/L   | •     | 0 - 55  |
| CREATININE - SERUM / PLASMA                            |            |       |       |   |
| Test Name  | Result     | Unit  | Level | Range   |
| CREATININE - SERUM / PLASMA                            | 0.83       | mg/dL | •     | 0.72 - 1.18   |
|  |            |       |       |   |

Borderline High/Low

Out of Range

Within Normal Range

#### **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                      | 7.9 *  | mg/dL  | •     | 3.5-7.2   |
| BUN (BLOOD UREA NITROGEN)              |        |        |       |   |
| Test Name                              | Result | Unit   | Level | Range   |
| BUN (BLOOD UREA NITROGEN)              | 10.8   | mg/dL  |       | Male: <50yrs 8.87-20.5 mg/dl<br>Male:>50yrs 8.41-25.7 mg/dl |
| THYROID PACKAGE                        |        |        |       |   |
| Test Name                              | Result | Unit   | Level | Range   |
| TOTAL T3: TRI IODOTHYRONINE -<br>SERUM | 1.14   | ng/ml  | •     | 0.60-1.81   |
| TOTAL T4: THYROXINE - SERUM            | 11.21  | μg/dL  | •     | 5.01 - 12.45  |
| TSH: Thyroid Stimulating Hormone       | 1.76   | μIU/mL | •     | 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.

| Test Name                              | Result | Unit  | Level | Range |
|--|--------|-------|-------|-------|
| Prostatic Specific Antigen (PSA Total) | 0.8    | ng/mL | •     | < 4   |

#### **CARDIOLOGY**

TMT/2D ECHO

#### **Ultrasound Radiology**

**ULTRASOUND - WHOLE ABDOMEN** 

**CARDIOLOGY** 

**ECG** 

X Ray

X-RAY CHEST PA



#### MEDIWHEEL FULL BODY ANNUAL PLUS ABOVE 50 MALE

### **Executive Summary**



Systemic Hypertension MILD TMT POSITIVE FATTY LIVER

#### **Wellness Prescription**

#### Advice On Diet :-



Low salt diet

#### **Advice On Physical Activity:-**



30 minutes brisk walk 5 days a week

# **Medications**

Printed By: Promise Jain

CARDIOLOGIST OPINION
CAP. ENSULE PLUS 1 OD 1 MONTH

### Follow-up and Review Plan



Periodic blood pressure monitoring

Scan the QR code in AskApollo App to book your follow-up appointments and investigations

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#### Dr.PROMISE JAIN

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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# **Medications**

CARDIOLOGIST OPINION
CAP. ENSULE PLUS 1 OD 1 MONTH

#### Dr.PROMISE JAIN

AHC Physician / Consultant Internal Medicine