



Ms. ASHWINI GAWALI (33 /F)

UHID : AHIL.0000862047

AHC No : AHILAH206031

Date : 14/04/2023

MEDIWHEEL-FULL BODY CHK-BELOW40-FEMALE



Namaste Ms. ASHWINI GAWALI,

Thank you for choosing Apollo ProHealth, India's first AI-powered health management program, curated to help you make positive health shifts. Being healthy is about making smart choices, and you have taken the first step with this program. We are privileged to be your healthcare partner. Your health is our priority.

We are with you on your path to wellness by:

**Predicting your risk:** Artificial Intelligence-powered predictive risk scores are generated, based on your personal, medical, and family history and detailed multi-organ evaluation of your body through diagnostic and imaging tests.

**Preventing onset or progress of chronic lifestyle diseases:** Your Health Mentor is available to help you understand your physician's recommendations and helping you handle any concerns (complimentary service up to one year)

**Overcoming barriers to your wellbeing:** Your Health Mentor will help you set your health goals and guide you with tips to stay on track. We will also, digitally remind you to proactively prioritize your health.

Through this report, you will be able to understand your overall health status, your health goals and the recommendations for your path to wellness. Your Health Report will include the following:

- Your medical history and physical examination reports
- Results from your diagnostic and imaging tests
- AI powered health risk scores
- Your physician's impression and recommendations regarding your overall health
- Your personalized path to wellness, including your follow-up assessments and vaccinations

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We have reviewed the results of the tests and have identified some areas for you to act on. We believe that with focus and targeted interventions, you can be healthier and happier.



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Stay Healthy and happy! 😊  
Apollo ProHealth Care team

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**Name** : Ms. ASHWINI GAWALI (33 /F)

**Date** : 14/04/2023



**Address** :

**UHID** : AHIL.0000862047

**Examined by** : Dr. SHASHIKANT NIGAM

**AHC No** : AHILAH206031

**MEDIWHEEL-FULL BODY CHK-BELOW40-FEMALE**



### Chief Complaints

For Annual health checkup  
No specific complaints



### 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
- Eyes** : - 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 allergies? - No
- Do you have any drug allergies? - No
- Covid 19 - Yes
- Hospitalization for Covid 19 - No



### Surgical history

- Surgical history - Nil





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### Personal history

- Ethnicity - Indian Asian
- Marital status - Single
- Profession - corporate employed
- Diet - Mixed Diet
- Alcohol - does not consume alcohol
- Smoking - No
- Chews tobacco - No
- Physical activity - Moderate



### Family history

- Father - alive
- Aged - 62
- Mother - alive
- Aged - 55
- Brothers - 2
- Hypertension - mother
- Coronary artery disease - none
- Cancer - None

## Physical Examination



### General

- General appearance - normal
- Build - normal
- Height - 149
- Weight - 65.9
- BMI - 29.68
- Pallor - No
- Oedema - no



### Cardiovascular system

- Heart rate (Per minute) - 79
- Rhythm - Regular



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- B.P. Supine

Systolic(mm of Hg) - 116

Diastolic(mm of Hg) - 80

Heart sounds - S1S2+

**Respiratory system**

Breath sounds - Normal vesicular breath sounds

 **Abdomen**

Organomegaly - No

Tenderness - No

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### 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:	Slightly Turbid			
pH	6			
Protein :	Nil			
Sugar:	Nil			
Blood:	2+			
Ketone	Absent			
Bile Pigments:	Absent			
Urobilinogen	Nil	E.U./dL		
Nitrite	Negative			
Pus Cells	12-14 /h.p.f			0-5
RBC	6-8 /h.p.f	/hpf		0-5/hpf
Epithelial Cells	10-12 /h.p.f			
Casts:	Absent			
Crystals:	Absent			
Others	Bacilli seen.			

### COMPLETE BLOOD COUNT WITH ESR

Test Name	Result	Unit	Level	Range
Hemoglobin (Photometric Measurement)	11.7 *	gm%	●	12-16
Packed cell volume(Calculated)	35.3 *	%	●	36-46
RBC COUNT (Impedance)	4.09	Million/ul	●	3.8-5.2
MCV (From RBC Histogram)	86.2	fl	●	80-100
MCH(Calculated)	28.61	pg	●	27-32
MCHC(Calculated)	33.2	%	●	31-36
RDW(Calculated)	14.5	%	●	11.5-14.5

● Within Normal Range      ● Borderline High/Low      ● Out of Range



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WBC Count (Impedance)	9240	/cu mm	●	4000-11000
Neutrophils	62	%	●	40-75
Lymphocytes	29	%	●	20-40
Monocytes	04	%	●	2-10
Eosinophils	05	%	●	01-06
Basophils	00	%	●	0-1
Platelet Count (Impedance)	369200	/cu mm	●	150000-450000
MPV (Calculated)	8	fl	●	7-11
ERYTHROCYTE SEDIMENTATION RATE (ESR) (Automated/ optic-electronic)	32 *	mm/1st hr	●	0-20

**URINE GLUCOSE(FASTING)**

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

**BLOOD GROUPING AND TYPING (ABO and Rh)**

Test Name	Result	Unit	Level	Range
BLOOD GROUP:	A Positive			

**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
ALT(SGPT) - SERUM / PLASMA	10	U/L	●	0-35
ALKALINE PHOSPHATASE - SERUM/PLASMA	76	U/L	●	Adult(Female): 35 - 104
AST (SGOT) - SERUM	10	U/L	●	>1 year Female : <32
Total Bilirubin	0.387	mg/dL	●	0.300-1.200
Direct Billirubin	0.147	mg/dL	●	Upto 0.3 mg/dl

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Indirect Bilirubin

0.24

mg/dL



- 1 Day ≤5.1 mg/dL
- 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	0.77	mg/dL	●	Adult Female: 0.5 - 1.2

**LFT (LIVER FUNCTION TEST)**

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Test Name	Result	Unit	Level	Range
GGTP: GAMMA GLUTAMYL TRANSEPTIDASE - SERUM	13	U/L	●	Male : 10 - 71 Female : 6 - 42

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

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

**GLUCOSE - SERUM / PLASMA (POST PRANDIAL) - PPBS**

Test Name	Result	Unit	Level	Range
Glucose - Plasma (Post Prandial)	110	mg/dL	●	70-140

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

Test Name	Result	Unit	Level	Range
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Within Normal Range



Borderline High/Low



Out of Range





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Glycosylated Hemoglobin (HbA1c)

6.0 \*

%

Normal < 5.7

%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

Estimated Average Glucose. 125.50

**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
PROTEIN TOTAL - SERUM / PLASMA	7.87	g/dL	●	6.00-8.00
PROTEIN TOTAL - SERUM / PLASMA	7.87	g/dL	●	6.00-8.00
ALBUMIN - SERUM	4.75	g/dL	●	Adult(18 - 60 Yr): 3.5 - 5.2
ALBUMIN - SERUM	4.75	g/dL	●	Adult(18 - 60 Yr): 3.5 - 5.2
Globulin-Serum/Plasma	3.12		●	2.20-4.20
Globulin-Serum/Plasma	3.12		●	2.20-4.20
A/G ratio	1.52		●	1.00-2.00
A/G ratio	1.52		●	1.00-2.00

**THYROID PROFILE (T3,T4 AND TSH)**

Test Name	Result	Unit	Level	Range
TOTAL T3: TRI IODOTHYRONINE - SERUM	1.9	nmol/L	●	Adults(20-120 Yrs): 1.2 - 3.1 Pregnant Female : First Trimester : 1.61 - 3.53 Second Trimester : 1.98 - 4.02 Third Trimester : 2.07 - 4.02
TOTAL T4: THYROXINE - SERUM	132	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	1.72	µIU/mL	●	14-120 years : 0.27 - 4.20



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### 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.

Test Name	Result	Unit	Level	Range
URIC ACID - SERUM	4.7	mg/dL	●	Male : 3.4-7.0 Female : 2.4-5.7

### BUN (BLOOD UREA NITROGEN)

Test Name	Result	Unit	Level	Range
BUN (BLOOD UREA NITROGEN)	13	mg/dL	●	6-20
UREA - SERUM / PLASMA	27	mg/dL	●	15 - 50

### LIPID PROFILE - SERUM

Test Name	Result	Unit	Level	Range
Total Cholesterol	185	mg/dl	●	0 - 200 : Desirable 200 - 240 : Borderline High 240 - 280 : High > 280 : Very High
Triglycerides - Serum	118	mg/dL	●	0-150
HDL CHOLESTEROL - SERUM / PLASMA (Direct Enzymatic Colorimetric)	42 *	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)	139 *	mg/dL	●	100 : Optimal 100-129 : Near Optimal 130-159 : Borderline High 160-189 : High ≥190 : Very High
VLDL CHOLESTEROL	24		●	< 40 mg/dl
C/H RATIO	4		●	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.



Within Normal Range



Borderline High/Low



Out of Range



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Plate like atelectasis is seen in the left lower zone.

Lung fields are otherwise clear.

Cardio thoracic ratio is normal.

Both costophrenic angles are clear.

Domes of diaphragm are well delineated.

Bony thorax shows no significant abnormality.

**Investigations Not Done / Not Yet Reported**

**Haematology**

STOOL ROUTINE

URINE GLUCOSE(POST PRANDIAL)

**Histopathology**

CONVENTIONAL PAP SMEAR /CERVICAL SMEAR

**CARDIOLOGY**

ECHO/TMT

ECG



Within Normal Range



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Out of Range





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### Executive Summary



- .BODY WEIGHT 65.9 KG,DEAL BODY WEIGHT 42-51 KG
- .PRE-DIABETIC
- .ECG - NORMAL SINUS RHYTHM
- .TMT — TEST IS NEGATIVE,EXERCISE TIME 7:26 ,WORKLOAD 9.2 METS
- .USG ABDOMEN - A WELL DEFINED HETEROGENEOUSLY HYPOECHOIC LESION OF APPROXIMATELY SIZE 2 X 2.5 CM SEEN IN FUNDO - ANTERIOR WALL OF UTERUS POSSIBILITY OF UTERINE FIBROID LIKELY
- .CHEST X-RAY - PLATE LIKE ATELECTASIS SEEN IN LEFT LOWER ZONE
- .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 42-51 KG

### Follow-up and Review Plan



- FBS and PPBS ONCE IN 30 DAYS
- HBA1C (GLYCOSYLATED HAEMOGLOBIN) NOW AND ONCE IN 3 MONTHS



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

Printed By : MUKTA S ADALTI

*Dr. Shashikant Nigam*  
15/4/2023  
Dr. SHASHIKANT NIGAM  
AHC Physician / Consultant Internal Medicine

Dr. Shashikant Nigam  
MBBS, MD (Gen. Med.)  
Consultant Internal Medicine  
Apollo Hospitals International Ltd., Gandhinagar,  
Gujarat-382428, INDIA. Regd. No.: G-21961



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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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## RADIOLOGY

**Patient Details** : Ms. ASHWINI GAWALI | Female | 33Yr 5Mth 1Days  
**UHID** : AHIL.0000862047 **Patient Location:** AHC  
**Patient Identifier:** AHILAH206031   
**DRN** : 123049643 **Completed on :** 14-APR-2023 10:20  
**Ref Doctor** : DR. SHASHIKANT NIGAM

## X-RAY CHEST PA

### IMPRESSION

Plate like atelectasis is seen in the left lower zone.

Lung fields are otherwise clear.

Cardio thoracic ratio is normal.

Both costophrenic angles are clear.

Domes of diaphragm are well delineated.

Bony thorax shows no significant abnormality.

— END OF THE REPORT —

AKSHAY SHARMA

Medical Officer

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Reported By : 717876

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## RADIOLOGY

**Patient Details** : Ms. ASHWINI GAWALI | Female | 33Yr 5Mth 1Days  
**UHID** : AHIL.0000862047 **Patient Location:** AHC  
**Patient Identifier:** AHILAH206031   
**DRN** : 223020804 **Completed on :** 14-APR-2023 11:30  
**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.

Visualized Head and body of pancreas appear normal in size and echotexture. No focal lesions identified. Pancreatic duct appears normal in caliber.

Spleen measures 8.3 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.

Uterus is anteverted and appears normal in size and echotexture. Myometrial and endometrial echopattern appear normal. Endometrial thickness is 5 mm.

A well defined heterogeneously hypoechoic lesion of approximate size 2 x 2.5 cm is seen in fundo-anterior wall of uterus possibility of uterine fibroid likely.

Both ovaries are normal in size and echopattern.

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**USG WHOLE ABDOMEN**

No free fluid is seen in Pouch Of Douglas.

No definite evidence of adnexal/pelvic mass is seen.

**IMPRESSION :**

A well defined heterogeneously hypoechoic lesion of approximate size 2 x 2.5 cm seen in fundo-anterior wall of uterus possibility of uterine fibroid likely.

— END OF THE REPORT —

*S.S. Parmar*

SIDDHARTH S PARMAR

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Page 2 of 2

For Enquiry/Appointments Contact +91 76988 15003 / +91 79 66701880

**Apollo Hospitals International Limited**  
Plot No.-1A, Bhat, GIDC, Gandhinagar, Gujarat - 382428, India.  
Phone : +91 79 66701800 | Fax No. : +91 79 66701843  
E-mail : info@apolloahd.com | www.ahmedabad.apollohospitals.com

**Apollo Hospitals - City Centre (NON-NASH-ICD)**  
1, TulsiBaag Society, Nr. Parimal Garden, Ahmedabad.  
Phone : +91 79 66305800 / 01 or +91 76988 15148  
E-mail : infoahcc@apolloahd.com

For online appointment : [www.askapollo.com](http://www.askapollo.com)

Keep the records carefully and bring them along during your next visit to our Hospital

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CIN No. : U85110TN1997PLC039016 | GSTin : 24AARCA4150H225  
For online appointment : [www.askapollo.com](http://www.askapollo.com)





65 bpm

Ms Ashwani, Gawali  
ID: 862047

14.04.2023 9:29:01  
Apollo Hospital  
Bhat Gandhinagar

mmHg

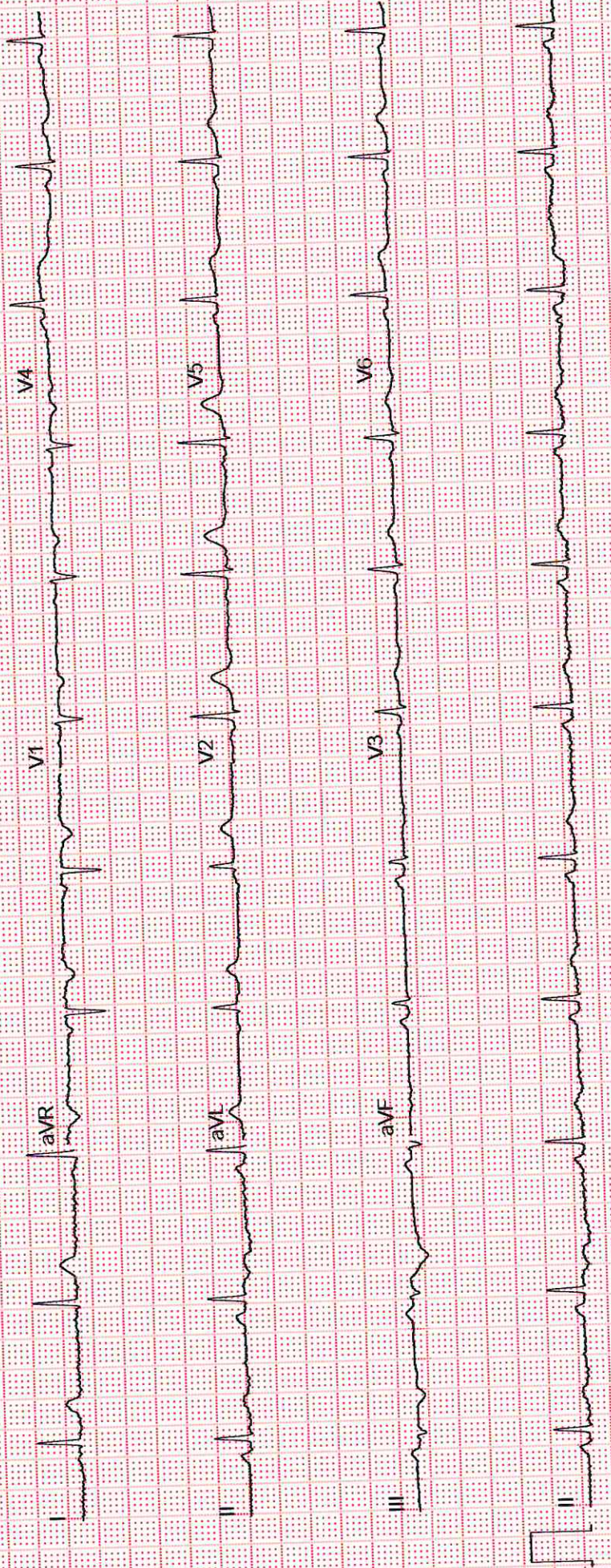
33 Years

Female

Normal sinus rhythm  
Normal ECG

QRS: 80 ms  
QT/QTc/Baz: 380/395 ms  
PR: 140 ms  
P: 96 ms  
RR/PP: 928/923 ms  
P/QRS/T: 71/72/71 degrees

Technician:  
Ordering Ph:  
Referring Ph:  
Attending Ph:





**OPHTHA**

AHIL.0000862047

**ION RECORDS**

Ms. ASHWINI  
GAWALI

Date : 11/11/20

Name : 33 Year(s) / Female

UHID : 

Distance Vision :

Right Eye - 6/6

Left Eye - 6/6

Near Vision :

Right Eye : NG

Left Eye : NG

APLN.TN - Right Eye 12      Left Eye - 13      mmHg      Normal

Both Eye - Colour Vision      Normal

Both Eye - Anterior Segment Examinations -      Normal

Both Eye Posterior Segment Examinations -      Normal

Pt is fit and can do her duty

Doctor's Signature  
Dr. Zahed Babu Shaikh  
MBBS, DNB - Ophthalmology  
Junior Consultant - Ophthalmology  
Apollo Hospitals International Limited,  
Block 'G', East of Gateway, Gandhinagar  
Mumbai - 400 097  
Ophthalmologist Name



AHIL.0000862047

Ms. ASHWINI  
GAWALI

33 Year(s) / Female

To/UHID,  
sician



**DENTISTRY**

Name : ..... Date : 14/11/23 Unit No. : .....  
 Occupation : ..... Ref. Physician : .....  
 Age : ..... Sex :  Male  Female Copies to : .....

**DENTAL RECORD**

ALLERGIES : N/A

PAIN : Score (0-10) 0 Location : ..... Character : .....

DENTAL CLEANING HABIT  Once  Twice  Occasionally  
 Brush  Finger  Stick  Any other  
 Tooth Paste  Powder  Any other

DO THE GUMS BLEED WHEN YOU BRUSH YOUR TEETH?  Yes  No

ARE YOUR TEETH SENSITIVE TO HEAT / COLD?  Yes  No

ORAL HYGIENE  Good  Fair  Poor

ORAL TISSUE EXAMINATION	PERIODONTAL EXAMINATION	OCCLUSION
NORMAL FINDINGS IN DISEASE	MILD MOD SEV	CLASS I II III CROSSBITE
Lips : Cheeks : Tongue : Floor of the mouth : Palate : Tonsillar Area : Any other :	Gingivitis <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Calculus <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Recession <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Periodontal Pockets <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Attrition <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Erosion <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Mobility <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Hypoplasia Impaction Non-vital Fracture Abscess Ulcers Caries Missing Teeth Supernumerary Others

PRESENT COMPLAINT :

Route clearing

PRE-MEDICAL HISTORY:  DM  HTN  Thyroid  Acidity  Pregnancy  
 Anticoagulant  Under Drug Therapy

NAD