

Name : Mr. PRABHAT KUMAR JHA (46 /M)

Date : 05/11/2024

Address :

Examined by: Dr .SANDIP KUMAR CHANDRA

UHID : AMHL.0002447790

Package : MEDIWHEEL - FULL BODY ANNUAL PLUS WITH TMT MALE HCK

AHC No : AMHLAH225165



## CHIEF COMPLAINTS

For general health checkup  
Bloating, Bowels not regular

## PRESENT KNOWN ILLNESS

Hypertension Medication - stopped  
without medical advice  
Dyslipidaemia Medication - regular



## DRUG ALLERGY

NO KNOWN ALLERGY :05/11/2024



## SYSTEMIC REVIEW

### Cardiovascular system

- Nil Significant

### Respiratory system

- Nil Significant

### Gastrointestinal system

Symptoms - bloating

### Genitourinary system

- Nil Significant

### Central nervous system

- Nil Significant

### Eyes

- Nil Significant

### ENT

- Nil Significant

### Musculoskeletal system

Spine and joints  
- Nil Significant

### Skin

- Nil Significant



## Present medications

- METOSARTAN 25 ROZUCOR F 20



## Past medical history

Past medical history - nil significant



## Surgical history

Haemorrhoidectomy - 2018



## Personal history

Marital status - Married  
No. of children - 2  
Diet - Non Vegetarian  
Alcohol - consumes alcohol  
Frequency - daily  
Smoking - No  
Chews tobacco - Yes  
Physical activity - Mild



## Family history

Father - has expired  
Mother - alive  
Brothers - 4  
Sisters - 2  
Diabetes - brother  
Hypertension - mother, brother  
Coronary artery disease - none  
Cancer - father  
Type - Bone marrow

## PHYSICAL EXAMINATION



## General

Build - obese  
Height - 174  
Weight - 101  
BMI - 33.36  
Pallor - No  
Oedema - no



### Cardiovascular system

Heart rate (Per minute) - 101  
Rhythm - Regular  
- B.P. Sitting  
Systolic(mm of Hg) - 192  
Diastolic(mm of Hg) - 112  
Heart sounds - S1S2+

### Respiratory system

Breath sounds - Normal vesicular breath sounds



### Abdomen

Organomegaly - No  
Tenderness - No

### Ophthalmology consultation

Ophthalmology findings - OCULAR MOVEMENTS:  
(RE):FULL (LE):FULL  
ANTERIOR SEGMENTS:  
(RE):WNL (LE):WNL  
VISUAL ACUITY  
DISTANCE:WITH GLASS  
(RE):6/6P (LE):6/6P VISUAL  
ACUITY NEAR:WITH  
GLASS (RE):N6 (LE)N6  
ADVICE:\*To continue  
present glass\*Detail  
funduscopy\*Review after  
1yr/SOS

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### COMPLETE HAEMOGRAM

Test Name	Result	Unit	Level	Range
Hemoglobin	13.3	g/dl	<span style="color: green;">●</span>	13.0-17.0
RBC COUNT	4.31 *	Million/ ul	<span style="color: red;">●</span>	4.5-5.5
Hematocrit - Hct:	40.0 *	%	<span style="color: red;">●</span>	41-53
MCV	92.9	fl	<span style="color: green;">●</span>	83-101
MCH	31.0	pg	<span style="color: green;">●</span>	27-32
MCHC	33.3	%	<span style="color: green;">●</span>	31.5-34.5
RDW	16.0 *	%	<span style="color: red;">●</span>	11.8-14.0
WBC Count	5700	/cu mm	<span style="color: green;">●</span>	4000-10000
Platelet Count	1.76	lacs/cu mm	<span style="color: green;">●</span>	1.5-4.0
Neutrophils	52	%	<span style="color: green;">●</span>	40-80
Lymphocytes	36	%	<span style="color: green;">●</span>	20-40
Monocytes	07	%	<span style="color: green;">●</span>	2-10
Eosinophils	05	%	<span style="color: green;">●</span>	01-06
Basophils	00	%	<span style="color: green;">●</span>	0-0
RBC:	Normocytic Normochromic cells			
Platelets:	Adequate.			

Epithelial Cells	Occasional/hpf
Casts:	Not Found
Crystals:	Found
Ca-oxalate	10-15

### URINE SUGAR- FASTING(QUALITATIVE)

Test Name	Result	Unit	Level	Range
URINE GLUCOSE(FASTING)	Nil			

### BLOOD GROUPING AND TYPING (ABO AND RH)

Test Name	Result	Unit	Level	Range
ABO Group:	O			
Rh (D) Type:	POSITIVE			

### ALT(SGPT) - SERUM

Test Name	Result	Unit	Level	Range
ALT(SGPT) - SERUM	55 *	U/L	<span style="color: red;">●</span>	0-50

### ALBUMIN - SERUM

Test Name	Result	Unit	Level	Range
ALBUMIN - SERUM	4.5	g/dL	<span style="color: green;">●</span>	3.5-5.1

### ALKALINE PHOSPHATASE - SERUM

Test Name	Result	Unit	Level	Range
ALKALINE PHOSPHATASE - SERUM	136 *	U/L	<span style="color: red;">●</span>	43-115

### AST (SGOT) - SERUM

Test Name	Result	Unit	Level	Range
AST (SGOT) - SERUM	80 *	U/L	<span style="color: red;">●</span>	0-50

### BILIRUBIN, TOTAL - SERUM

Test Name	Result	Unit	Level	Range
BILIRUBIN TOTAL - SERUM	0.6	mg/dL	<span style="color: green;">●</span>	0.3-1.2

### CHOLESTEROL - SERUM

Test Name	Result	Unit	Level	Range
CHOLESTEROL - SERUM	297 *	mg/dL	<span style="color: red;">●</span>	0-200
Non-HDL Cholesterol	237			

### CREATININE - SERUM

### ERYTHROCYTE SEDIMENTATION RATE (ESR)

Test Name	Result	Unit	Level	Range
ERYTHROCYTE SEDIMENTATION RATE (ESR)	16 *	mm/1st hr	<span style="color: red;">●</span>	0-15

### URINE ROUTINE AND MICROSCOPY

Test Name	Result	Unit	Level	Range
Volume:	30	mL		
Colour:	Pale Straw			
Appearance	Slightly Turbid			
Specific Gravity	1.025			
pH:	6.0			
Albumin:	Not Detected			
Glucose	Not Detected			
Ketone:	Not Detected			
Bile Pigments	Not Detected			
RBC	Nil	/hpf		
Pus Cells	Occasional/hpf			

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

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Test Name	Result	Unit	Level	Range
CREATININE - SERUM	1.0	mg/dL	<span style="color: green;">●</span>	0.9-1.3

**GGTP: GAMMA GLUTAMYL TRANSPEPTIDASE - SERUM**

Test Name	Result	Unit	Level	Range
GGTP: GAMMA GLUTAMYL TRANSPEPTIDASE - SERUM	1024 *	U/L	<span style="color: red;">●</span>	0-55

**GLUCOSE - PLASMA (FASTING)**

Test Name	Result	Unit	Level	Range
GLUCOSE - PLASMA (FASTING)	127 *	mg/dL	<span style="color: red;">●</span>	70-99

**GLUCOSE - PLASMA (POST PRANDIAL)**

Test Name	Result	Unit	Level	Range
GLUCOSE - PLASMA (POST PRANDIAL)	171 *	mg/dL	<span style="color: red;">●</span>	70-140

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

Test Name	Result	Unit	Level	Range
HBA1C (GLYCOSYLATED HAEMOGLOBIN)-WHOLE BLOOD	7.0 *	%	<span style="color: red;">●</span>	Nondiabetic : 4 - 5.6 % Prediabetics : 5.7 - 6.4% Diabetes : >= 6.5% ADA Therapeutic goal : <7%

**HDL CHOLESTEROL - SERUM**

Test Name	Result	Unit	Level	Range
TC/HDL-C ratio serum	5.0 *		<span style="color: red;">●</span>	Optimal<3.5
HDL CHOLESTEROL - SERUM	60	mg/dL	<span style="color: green;">●</span>	30-70

**LDL CHOLESTEROL -SERUM**

Test Name	Result	Unit	Level	Range
LDL CHOLESTEROL -SERUM	171 *	mg/dL	<span style="color: red;">●</span>	Optimal: <100
VLDL CHOLESTEROL - SERUM (Calculated)	66 *	mg/dL	<span style="color: red;">●</span>	0-35

**PROTEIN TOTAL - SERUM**

Test Name	Result	Unit	Level	Range
PROTEIN TOTAL - SERUM	7.6	g/dL	<span style="color: green;">●</span>	6.4-8.3
Albumin/Globulin Ratio	1.5		<span style="color: green;">●</span>	1.0-2.0
GLOBULIN: (CALCULATED) - SERUM	3.1	g/dL	<span style="color: green;">●</span>	1.8-3.6

**TOTAL T3: TRI IODOTHYRONINE - SERUM**

Test Name	Result	Unit	Level	Range
TOTAL T3: TRI IODOTHYRONINE - SERUM (Chemiluminescence)	1.04	ng/ml	<span style="color: green;">●</span>	0.87-1.78

**TOTAL T4: THYROXINE - SERUM**

Test Name	Result	Unit	Level	Range
TOTAL T4: THYROXINE - SERUM (Chemiluminescence)	10.51	µg/dL	<span style="color: green;">●</span>	5.48-14.28

**TRIGLYCERIDES - SERUM**

Test Name	Result	Unit	Level	Range
TRIGLYCERIDES - SERUM	1066 *	mg/dL	<span style="color: red;">●</span>	0-150

**TSH: THYROID STIMULATING HORMONE - SERUM**

Test Name	Result	Unit	Level	Range
TSH: THYROID STIMULATING HORMONE - SERUM (Chemiluminescence)	3.53	µIU/mL	<span style="color: green;">●</span>	0.38-5.33

**URIC ACID - SERUM**

Test Name	Result	Unit	Level	Range
URIC ACID - SERUM	6.8	mg/dL	<span style="color: green;">●</span>	2.6-7.2

**BILIRUBIN CONJUGATED (DIRECT) - SERUM**

Test Name	Result	Unit	Level	Range
BILIRUBIN CONJUGATED (DIRECT) - SERUM	0.1	mg/dL	<span style="color: green;">●</span>	0.0-0.2

**PROSTATIC SPECIFIC ANTIGEN (PSA TOTAL) - SERUM**

Test Name	Result	Unit	Level	Range

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


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PROSTATIC SPECIFIC ANTIGEN (PSA TOTAL) - SERUM (Chemiluminescence) 0.43 ng/mL  0.00-6.50



\* Grade I fatty changes in liver.  
\* Prostatomegaly.

### BUN (BLOOD UREA NITROGEN)

Test Name	Result	Unit	Level	Range
BUN (BLOOD UREA NITROGEN)	7.9	mg/dL		7.0-18.0

[NOTE: At times pelvic structures are not well visualized due to inadequate patient preparation / excess bowel gas shadow. However suggested clinical correlation and other investigations if clinically indicated.]

### BUN/CREATININE RATIO

Test Name	Result	Unit	Level	Range
BUN/CREATININE RATIO	7.9			
BUN (BLOOD UREA NITROGEN)	7.9	mg/dL		7.0-18.0
CREATININE - SERUM	1.0	mg/dL		0.9-1.3

Dr. SANJIB MAJUMDAR  
MD (RADIODIAGNOSIS)  
CONSULTANT RADIOLOGIST  
Reg. No. 56991 (WBMC)

### X-RAY CHEST PA

\* Chest skiagram does not reveal any significant abnormality.

### ECG

SINUS RHYTHM.  
INCOMPLETE RIGHT BUNDLE BRANCH BLOCK.  
T WAVE ABNORMALITY, CONSIDER LATERAL ISCHEMIA.  
PLEASE CORRELATE CLINICALLY.

[INVESTIGATIONS NOT DONE / NOT YET REPORTED / NOT PART OF PACKAGE\(LAB,RADIOLOGY & CARDIOLOGY\)](#)

Dr. KOUSHIKI SEN  
DNB RESIDENT  
In consultation with

### Biochemistry

A/G - RATIO

### Haematology

URINE SUGAR - POST PRANDIAL (QUALITATIVE)

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MD (RADIODIAGNOSIS)  
CONSULTANT RADIOLOGIST  
Reg. No. 56991 (WBMC)

### CARDIOLOGY

TREADMILL TEST / STRESS TEST

### ULTRASOUND SCREENING WHOLE ABDOMEN



Within Normal Range



Borderline High/Low



Out of Range

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## Executive Summary

 HYPERTENSION - POORLY CONTROLLED, ON IRREGULAR MEDICINE  
TRANSAMINITIS  
DYSLIPIDEMIA  
TYPE 2 DM - HBA1C - 7.0  
PRROTATOMEGALY

## Wellness Prescription

### Advice On Diet :-

 SALT RESTRICTED, FAT RESTRICTED, DIABETIC DIET

### Other Lifestyle Changes & Recommendations :-


MONITOR BP AND CBG AT HOME  
REDUCE WEIGHT  
DAILY 45 MINUTES BRISK WALKING  
FOLLOW MEDICINE STRICTLY

## Medications

URSOKEM 300MG TAB 10'S(URSODEOXYCHOLIC ACID) 1 TAB BID Oral After Breakfast and After Dinner 2 Month(s)  
LIPAGLYN 4 MG TAB(SAROGLITAZAR 4 MG) 1 TAB OD Oral after breakfast To Continue  
DIAMICRON XR 60MG TAB 14'S(GLICLAZIDE 60MG) 1 TAB OD Oral before breakfast To Continue  
FENOLIP 145MG TAB(FENOFIBRATE 145MG) 1 TAB OD Oral after dinner 2 Month(s)  
URIMAX 0.4MG MR CAP 15'S(TAMSULOSIN 0.4MG) 1 TAB OD Oral after dinner 2 Month(s)  
STAMLO T TAB(TELMISARTAN 40 MG+AMLODIPINE 5 MG) 1 TAB BID Oral After Breakfast and After Dinner To Continue  
MINIPRESS XL 5MG 30S(PRAZOSIN 5MG) 1 TAB BID Oral After Breakfast and After Dinner To Continue  
ECOSPRIN -75MG TAB 14'S(ASPIRIN 75MG) 1 TAB OD Oral after food To Continue AFTER LUNCH  
YEES 40MG TAB(ESOMEPRAZOLE 40MG) 1 TAB OD Oral before breakfast To Continue  
TAB RAZEL EZ ( 10-10) - 1 TAB AFTER DINNER X CONTINUE

TAB STAMLO 5 MG - 1 TAB STAT FOR HIGH BP

## Follow-up and Review Plan

 REVIEW AFTER 2 MONTHS WITH REPORTS OF CBC, LFT, CREATININE, FBS, PPBS, URINE RE/ME, URIC ACID, CALCIUM, .

VISIT EMERGENCY SOS



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

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Printed By : Sandip Kumar Chandra

**Dr.SANDIP KUMAR CHANDRA**  
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

Drug Name	Strength	Dosage	Frequency	Route of Admin	Relationship with Meal	Duration	Indication
URSOKEM 300MG TAB 10'S(URSODEOXYCHOLIC ACID)		1 TAB	BID	Oral	After Breakfast and After Dinner	2 Month(s)	
LIPAGLYN 4 MG TAB(SAROGLITAZAR 4 MG)		1 TAB	OD	Oral	after breakfast	To Continue	
DIAMICRON XR 60MG TAB 14'S(GLICLAZIDE 60MG)		1 TAB	OD	Oral	before breakfast	To Continue	
FENOLIP 145MG TAB(FENOFIBRATE 145MG)		1 TAB	OD	Oral	after dinner	2 Month(s)	
URIMAX 0.4MG MR CAP 15'S(TAMSULOSIN 0.4MG)		1 TAB	OD	Oral	after dinner	2 Month(s)	
STAMLO T TAB(TELMISARTAN 40 MG+AMLODIPINE 5 MG)		1 TAB	BID	Oral	After Breakfast and After Dinner	To Continue	
MINIPRESS XL 5MG 30S(PRAZOSIN 5MG)		1 TAB	BID	Oral	After Breakfast and After Dinner	To Continue	
ECOSPRIN -75MG TAB 14'S(ASPIRIN 75MG)		1 TAB	OD	Oral	after food	To Continue	AFTER LUNCH
YEEES 40MG TAB(ESOMEPRAZOLE 40MG)		1 TAB	OD	Oral	before breakfast	To Continue	

TAB RAZEL EZ ( 10-10) - 1 TAB AFTER DINNER X CONTINUE

TAB STAMLO 5 MG - 1 TAB STAT FOR HIGH BP

**Dr.SANDIP KUMAR CHANDRA**

AHC Physician / Consultant Internal Medicine



### AICVD RISK SCORE REPORT

**RISK STATUS**

**YOUR SCORE**

**ACCEPTABLE SCORE**

Moderate Risk

7

6

Your likelihood of developing cardiovascular disease in the next ten years is 1.3 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 6 months** if you have:
  - o Uncontrolled high blood pressure, Diabetes, Dyslipidemia, Coronary heart disease

**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 AI Models and APIs used at Apollo Hospitals are certified by ISO 13485 : 2016 vide certificate no. MD 763515**