

Mr. BALU BHUJBAL (40 /M)

UHID

AHIL.0000806335

AHC No

AHILAH168216

Date

08/10/2022

MEDIWHEEL-FULL BODY CHK-BELOW40-MALE

Dear Mr. BALU BHUJBAL

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





Date



Examined by : Dr. SHASHIKANT NIGAM

MEDIWHEEL-FULL BODY CHK-BELOW40-MALE

UHID

: AHIL.0000806335

AHC No : AHILAH168216



Chief Complaints

For Annual health checkup No specific complaints

Present Known illness

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

Others: - KNOWN CASE OF OCD



Drug Allergy

NO KNOWN ALLERGY

:08/10/2022



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

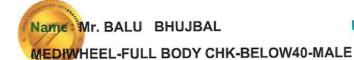
- Nil Significant

Eyes

- Nil Significant

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- Nil Significant **ENT**

Musculoskeletal system

Spine and joints

- Nil Significant

- Nil Significant Skin •

- Nil Significant **General symptoms** :

Past medical history

Do you have any

allergies?

- No

Allergies

Nil

Past medical history

- nil significant

Covid 19

- Yes

2022

Post detection (3

Weeks)

Hospitalization for

- No - No

Covid 19

Surgical history

Surgical history Nil

Personal history

Ethnicity - Indian Asian

Marital status Married

No. of children - 1

Male

Profession - corporate employed

Diet - Vegetarian

Alcohol - does not consume alcohol

Smoking - No

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MEDIWHEEL-FULL BODY CHK-BELOW40-MALE



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Organization is the ws tobacco

- No

70

Sedentary

Physical activity -



Aged

Family history

Father - alive

Mother - alive

Aged - 60

Brothers - 1

Sisters - 3

Diabetes - father,uncle

Hypertension - father

Coronary artery - father

disease

Cancer - None

Physical Examination



General

General appearance - normal
Build - normal
Height - 167
Weight - 81.7
BMI - 29.29
Pallor - No
Oedema - no



Cardiovascular system

Heart rate (Per minute) - 100

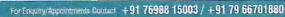
Rhythm - Regular
Systolic(mm of Hg) - 149
Diastolic(mm of Hg) - 100

- B.P. Sitting

Heart sounds - S1S2+

Respiratory system

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MEDIWHEEL-FULL BODY CHK-BELOW40-MALE



Breath sounds

- Normal vesicular breath sounds

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Organomegaly

- No

Tenderness

- No

Printed By:

MUKTA S ADALTI

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URINE FOR ROUTINE EXAMINATION

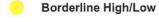
Urinalysis, is the physical, chemical and microscopic examination of the urine and is one of the most common methods of medical diagnosis. It is used to detect markers of diabetes, kidney disease, infection etc.

Test Name	Result	Unit	Level	Range
Volume	30	mL		
Specific Gravity	1.030			
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	1-2 /h.p.f			0-5
RBC	Nil	/hpf		0-5/hpf
Epithelial Cells	Occassional			
Casts:	Absent			
Crystals:	Absent			

COMPLETE BLOOD COUNT WITH ESR

Within Normal Range

Test Name	Result	Unit	Level	Range
Hemoglobin (Photometric Measurement)	14.3	gm%	•	13.0-17.0
Packed cell volume(Calculated)	43.6	%		40-50
RBC COUNT (Impedance)	5.09	Million/ul	•	4.5-5.9
MCV (From RBC Histogram)	85.6	fl		80-100
MCH(Calculated)	28.16	pg		27-32
MCHC(Calculated)	32.9	%		31-36
RDW(Calculated)	14.9 *	%	•	11.5-14.5
WBC Count (Impedance)	5832	/cu mm		4000-11000





Out of Range





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Date	: 08/1	0/2022
AHC No	: A	DAP168216

The state of the s					_
on is Accessed Neutrophils	59	%	•	40-75	
Lymphocytes	29	%		20-40	
Monocytes	06	%		2-10	
Eosinophils	06	%		01-06	
Basophils	00	%		0-1	
Platelet Count (Impedance)	235200	/cu mm		150000-450000	
MPV (Calculated)	8.6	fl		7-11	
ERYTHROCYTE SEDIMENTATION RATE (ESR) (Automated/ optic– electronic)	04	mm/1st hr	•	0-15	

URINE GLUCOSE(FASTING)

Test Name	Result	Unit	Level	Range

Urine Glucose (Post Prandial) Nil

URINE GLUCOSE(POST PRANDIAL)

Test Name	Result	Unit	Level	Range

Urine Glucose (Post Prandial) Nil

BLOOD GROUPING AND TYPING (ABO and Rh)

Test Name Result Unit Level Range

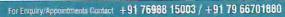
BLOOD GROUP: AB Positive

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	94 *	U/L		0-50
ALKALINE PHOSPHATASE - SERUM/PLASMA	105	U/L		Adult(Male): 40 - 129
AST (SGOT) - SERUM	67 *	U/L	•	> 1 year Male : <40
Total Bilirubin	0.374	mg/dL	•	0.300-1.200
Direct Bilirubin	0.181	mg/dL		Upto 0.3 mg/dl
Within Normal Range	Borderline H	igh/Low	Out	of Range

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Date : 08/10/2022

AHC No : AHDAT 682 6

Organization a According by John Commission Indirect Billirubin

0.193

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	0.9	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	79 *	U/L	•	Male : 10 - 71 Female : 6 - 42
GLUCOSE - SERUM / PLASMA (FASTING)				

Test Name	Result	Unit

Glucose - Plasma (Fasting)	106 *	mg/dL	•	70 - 100 : Normal
				100 - 125 : Impaired Glucose Tolerance

100 - 125 : Impaired Glucose Tolera >= 126 : Diabetes Mellitus

GLUCOSE - SERUM / PLASMA (POST PRANDIAL) - PPBS

Test Name	Result	Unit	Level	Range
Glucose - Plasma (Post Prandial)	135	mg/dL	•	70-140

GLYCOSYLATED HEMOGLOBIN (HBA1C) - WHOLE BLOOD

Test Name	Result	Unit	Level	Range

Within Normal Range

Borderline High/Low

Level

Range

Out of Range

Page 9 of 14







Organication Glycosylated Hemoglobin (HbA1c)

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

Range

6.00-8.00

Level

Estimated Average Glucose.

Test Name

142.72

Result

7.74

LFT (LIVER FUNCTION TEST)

PROTEIN TOTAL - SERUM / PLASMA

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.

g/dL

PROTEIN TOTAL - SERUM / PLASMA	7.74	g/dL		6.00-8.00
ALBUMIN - SERUM	5.07	g/dL		Adult(18 - 60 Yr): 3.5 - 5.2
ALBUMIN - SERUM	5.07	g/dL		Adult(18 - 60 Yr): 3.5 - 5.2
Globulin-Serum/Plasma	2.67			2.20-4.20
Globulin-Serum/Plasma	2.67			2.20-4.20
A/G ratio	1.9			1.00-2.00
A/G ratio	1.9			1.00-2.00
THYROID PROFILE (T3,T4 AND T	SH)			
Test Name	Result	Unit	Level	Range
TOTAL T3: TRI IODOTHYRONINE - SERUM	2.4	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	121	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	0.9	μIU/mL	•	14-120 years : 0.27 - 4.20
Within Normal Range	Borderline	High/Low	Out	of Range
Page 10 of 14				

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Organization is Accordized

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	5.2	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)	7	mg/dL		6-20
UREA - SERUM / PLASMA	15	mg/dL		15 - 50
LIPID PROFILE - SERUM				
Test Name	Result	Unit	Level	Range
Total Cholesterol	150	mg/dl	•	0 - 200 : Desirable 200 - 240 : Borderline High 240 - 280 : High > 280 : Very High
Triglycerides - Serum	129	mg/dL		0-150
HDL CHOLESTEROL - SERUM / PLASMA (Direct Enzymatic Colorimetric)	29 *	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)	103	mg/dL	•	100 : Optimal 100-129 : Near Optimal 130-159 : Borderline High 160-189 : High >=190 : Very High
VLDL CHOLESTEROL	26			< 40 mg/dl
C/H RATIO	5 *			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





Out of Range

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ECHO/TMT

Investigations Not Done / Not Yet Reported

Haematology

STOOL ROUTINE

CARDIOLOGY

ECG

Within Normal Range

Borderline High/Low



Out of Range





MEDIWHEEL-FULL BODY CHK-BELOW40-MALE

AHC No:

by Joint Community Executive Summary



BODY WEIGHT 81.7 KG, IDEAL BODY 52-63 KG NEWLY DETECTED DIABETES MELLITUS .BP- 149/100

.ABNORMAL LFT

ECG - PREMATURE VENTRICULAR COMPLEXES

- NORMAL LV SYSTOLIC FUNCTION, LVEF 60%

- REDUCED LV COMPLIANCE

- NO PAH,

USG ABDOMEN - Grade I fatty liver.

Few small calculi of size 3.5 to 4 mm noted in both kidneys. No evidence of hydronephrosis or hydroureter at present.

X-RAY - NORMAL

VISION - NORMAL

DENTAL - AS PER DOCTOR ADVICE

Wellness Prescription

Advice On Diet :-



BALANCED DIET LOW CARBOHYDRATE DIET

Advice On Physical Activity :-



REGULAR 30 MINUTES WALK FOR HEALTH AND 60 MINUTES FOR WEIGHT REDUCTION PRACTICE YOGA AND MEDITATION MAINTAIN WEIGHT BETWEEN 52-63 KG

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Recommended Follow-up Consultations

Speciality Name	Doctor Name	Schedule WithIn	Remarks
ENDOCRINOLOGY	RAMESH GOYAL	1 Week(s)	

Follow-up and Review Plan

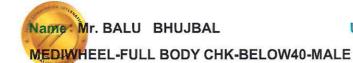


PERIODIC BP MONITORING

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

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Date : 08 10 2022

AHC No : AHD (168216)

HOSPITALS

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Printed By: MUKTA S ADALTI

Dr.SHASHIKANT NIGAM

UHID : AHIL.0000806335

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

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. BALU BHUJBAL | Male | 40Yr 4Mth 27Days

UHID AHIL.0000806335 Patient Location:

Patient Identifier: AHILAH168216

DRN 222051284 Completed on: 08-OCT-2022 14:23

Ref Doctor DR. SHASHIKANT NIGAM

USG WHOLE ABDOMEN

FINDINGS:

Liver appears normal in size and shows grade I fatty changes. No evidence of focal 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 cms and shows uniform echotexture.

Few small calculi of size 3.5 to 4 mm noted in both kidneys. No evidence of hydronephrosis or hydroureter at present.

Both kidneys are normal in size and show normal echopattern with good corticomedullary differentiation. Cortical outlines appear smooth.

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 21 cc) is normal in size and echopattern.

IMPRESSION:

Grade I fatty liver.

Few small calculi of size 3.5 to 4 mm noted in both kidneys. No evidence of hydronephrosis or hydroureter at present.

Printed on:

10-Oct-2022 9:41

Printed By: 153182

Reported By: 717876

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Mr. BALU BHUJBAL

AHIL.0000806335

AHILAH168216

USG WHOLE ABDOMEN

--- END OF THE REPORT ---



TIRTH VINAYKUMAR PARIKH

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CARDIOLOGY

Mr. BALU BHUJBAL | Male | 40Yr 4Mth 27Days Patient Details:

AHIL.0000806335 **Patient Location:** UHID

AHILAH168216 Patient Identifier:

5622074000 08-OCT-2022 12:51 Completed on: DRN

DR. SHASHIKANT NIGAM Ref Doctor

ECHO/TMT

FINDINGS:

Normal cardiac chamber dimensions.

Normal LV systolic function, LVEF: 60%

No Regional wall motion abnormalities at rest.

Reduced LV compliance.

All cardiac valves are structurally normal.

IAS/ IVS intact.

No MR, No AR, No PR, No TR.

No PAH.

No clots/ vegetation/ effusion.

MEASUREMENTS (mm) ::

	LVID diastol	
Measurements (mm)	16	

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DEPARTMENT OF RADIOLOGY AND IMAGING SCIENCES

Mr. BALU BHUJBAL | Male | 40Yr 4Mth 27Days Patient Details:

UHID AHIL.0000806335 Patient Location:

Patient Identifier: AHILAH168216 DRN

122113648

Completed on:

08-OCT-2022 13:33

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 ---

T.V. Pail

TIRTH VINAYKUMAR PARIKH

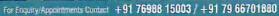
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Mr. BALU BHUJBAL AHIL.0000806335

AHILAH168216

ECHO/TMT

IMPRESSION

--- END OF THE REPORT ---

DR SUBIR GHOSH MD.DM

Interventional Cardiologist

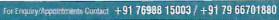
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AHIL.0000806335

Mr. BALU BHUJBAL

TION RECORDS

40 Year(s) / Male

Name:

UHID:

806335

Date:

8/10/22

Distance Vision:

Right Eye -

Left Eye -

Near Vision:

Right Eye:

Left Eye:

APLN.TN - Right Eye

Left Eye-

mmHg

Both Eye - Colour Vision

Mormal

Both Eye - Anterior Segment Examinations -

Both Eye Posterior Segment Examinations -

Doctor's Signature

AHMROP028V1

Ophthalmologist Name



AHIL.0000806335 Mr. BALU BHUJEAL

40 Year(s) / Male



DENTISTRY

**************************************			HILL - LANGUAGE - CHEMING		
Name : Occupation :				Unit No. :	
Age:Sex:Male	emale	Copies	to :		
	DENTAL	RECOF	RD		
ALLERGIES: -NA					
PAIN : Score (0-10) Loc	ation :		Cha	racter :	7.1
DENTAL CLEANING HABIT On	sh F	wice inger	Stick		Any other
DO THE GUMS BLEED WHEN YOU E ARE YOUR TEETH SENSITIVE TO HI ORAL HYGIENE	BRUSH YOUR TEET	owder H?	Yes Good	No No	Poor
ORAL TISSUE EXAMINATION	PERIODONT	AL EXAM	INATION	OCCLUS	SION
NORMAL FINDINGS IN DISEASE Lips : Cheeks : Tongue : Floor of the mouth : Palate : Tonsilar Area : Any other :	Gingivitis Calculus Recession Periodontal Pocket Attrition Erosion Mobility	MILD	MOD SEV	CLASS I CROSSBITE Hypoplasia Impaction Non-vital Fracture Abcess Ulcers Caries Missing Teeth Supernumerary Others	
PRE-MEDICAL HISTORY: DM	HTN Thyricoagulant Under	oid 🗌 Ad		1.50	

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40 Years Male	<u>_\</u>	<u> </u>)	<u> </u>	