

Mr. DEVI LAL NIMJE (57 /M)

UHID : ASHB.0000029183

AHC No : BPLAH6379

Date : 10/02/2024

MEDIWHEEL FULL BODY ANNUAL PLUS ABOVE 50

MALE

Dear Mr. DEVI LAL NIMJE

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.

Name : Mr. DEVI LAL NIMJE (57 /M) Date : 10/02/2024

Address: MIG 07, DUPLEX, SECTOR C, AYODHYA NAGAR, BHOPAL, BHOPAL, MADHYA

PRADESH, INDIA

Examined by: Dr. PROMISE JAIN UHID: ASHB.0000029183

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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 - 3-4month; Medication - nil

*

Drug Allergy

NO KNOWN ALLERGY :10/02/2024

Systemic Review

Cardiovascular system : Chest pain - no; Breathing difficulty - yes; Exacerbated by - moderate

exertion; Relieved by - rest

Respiratory system : - Nil Significant

Oral and dental : - Nil Significant

Gastrointestinal system : Appetite - normal; Bowel habits - regular

Genitourinary system : Frequency - increased; Dysuria/burning micturition - no; Urgency - no,

intermittent; - Hydrocele Rt side

Central nervous system : Head ache - on and off

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

ENT : - Nil Significant

Musculoskeletal system :

Spine and joints

Ankle (left) - pain

Skin : - papules

Weight : - stable

General symptoms : - Nil Significant

Present medications: - Nil

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Past medical history

Past medical history - nil significant

Covid 19 - No



Surgical history

Accidental injury - 2009 Left ankle

Immunization history

- Covid Dose1, Covid Dose2



Personal history

Ethnicity - Indian Asian

- Married Marital status

- 2 No. of children

Profession - government employee

Diet - Mixed Diet

Alcohol - does not consume alcohol

Smoking - No - No Chews tobacco Physical activity - Mild



Family history

Father - has expired

Aged - 70+ Cause - cancer

- Throat

Mother - has expired

- 78 Aged

- Covid

Brothers Sisters

Diabetes - brother Coronary artery - none

disease

- father Cancer - Throat Type

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Physical Examination



General

General appearance - normal
Build - normal
Height - 163
Weight - 80.1
BMI - 30.15
Pallor - No
Oedema - no



Head and ENT

- No significant finding



Oral and Dental

- No significant finding



Cardiovascular system

Heart rate (Per minute) - 86

Rhythm - Regular Systolic(mm of Hg) - 188 Diastolic(mm of Hg) - 100

- B.P. Sitting

Heart sounds - S1S2+

Respiratory system

Breath sounds - Normal vesicular breath sounds



Abdomen

Appearance - Normal
Organomegaly - No
Tenderness - No



Central nervous system

- No neurological deficit

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- No significant finding



Musculo Skeletal System

- No significant finding

Psychological Assessment

Psychological assessment - Normal

ENT consultation

ENT consultation done by - Dr Ankit Mishra

Printed By: NEELAM JAIN

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COMPLETE BLOOD COUNT(CBC) WITH ESR

| Test Name | Result | Unit | Level | Range |
|--------------------------------------|---------|------------|-------|-----------|
| HAEMOGLOBIN | 16.2 | g/dL | • | 13.0-17.0 |
| Packed cell volume (Calculated) | 46.7 | % | • | 38.3-48.6 |
| RBC Count | 5.23 | Million/ul | • | 4.50-5.90 |
| MCV- | 89.2 | fl | • | 80-100 |
| MCH- | 30.9 | pg | • | 27-32 |
| MCHC- | 34.6 | g/dL | • | 32-36 |
| RDW | 14.8 * | % | • | 11.8-14.5 |
| TLC COUNT | 11.51 * | 10³/mm³ | • | 4.0-11.0 |
| Neutrophils | 74 | % | • | 40-80 |
| Lymphocytes | 16 * | % | • | 20-40 |
| Monocytes | 5 | % | • | 2-10 |
| Eosinophils | 5 | % | • | 1-6 |
| Basophils | 0 | % | • | 0-2 |
| Platelet Count | 261.6 | 10³/mm³ | • | 150-450 |
| Mean Platelet Volume | 7.8 | fl | • | 6.5-12.0 |
| ERYTHROCYTE SEDIMENTATION RATE (ESR) | 12 | 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 | 1.010 | | • | 1.005 - 1.025 |
| Colour: | Pale-Yellow | | | |
| Transparency: | Clear | | | |
| рН | Acidic | | | |
| Protein : | Nil | | | |
| Sugar: | Nil | | | |
| Ketone | Nil | | | |
| Bilirubin: | Nil | | | |
| | | | | |
| Within Normal Range | Borderline H | ligh/Low | Out | of Range |

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RBC Nil

Pus Cells 1-2 /hpf 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: O

Rh (D) Type: Positive

GLUCOSE - SERUM / PLASMA (FASTING)

Test Name Result Unit Level Range

Glucose - Plasma (Fasting) 115 * mg/dL 70-100

GLUCOSE - SERUM / PLASMA (POST PRANDIAL)

Test Name Result Unit Level Range

Glucose - Plasma (Post prandial) 270 * mg/dL • 70-140

GLYCOSYLATED HEMOGLOBIN (HBA1C) - WHOLE BLOOD

Test Name Result Unit Level Range

GLYCOSYLATED HEMOGLOBIN 7.0 * % 4.0-5.6 (HBA1C) - WHOLE BLOOD

LIPID PROFILE TEST (PACKAGE)

Test Name Result Unit Level Range

Total Cholesterol 191 mg/dL Desirable: <200

Borderline High: 200-239

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High >240

HDL Cholesterol 37 * mg/dL ● >40

Within Normal Range

Borderline High/Low

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| | 5 / LD G T L G G II | .,, \ | | 7 (110 110 1 E) E/ (1100 10 |
|--|---------------------|-------|-------|---|
| LDL Cholesterol (Direct LDL) | 139 * | mg/dL | • | Optimal: <100 Above optimal: 100-129 Borderline high: 130-159 High: 160-189 Very high: >190 |
| Triglycerides - Serum | 147 | mg/dL | • | Normal<150 Borderline high 150–199 High 200–499 Very high: ≥ 500 |
| VLDL CHOLESTEROL - SERUM | 30 | | • | 15-30 |
| Total Cholesterol / HDL Cholesterol Ratio (Calculated) | 5.1 * | | • | 3.5-5.0 |
| LIVER FUNCTION TEST (PACKAGE |) | | | |
| Test Name | Result | Unit | Level | Range |
| Protein Total - Serum | 7.5 | g/dL | • | 6.6-8.3 |
| Albumin - Serum | 4.5 | g/dL | • | 3.5-5.2 |
| GLOBULIN | 3.0 | g/dL | • | 2.6-4.6 |
| ALBUMIN AND GLOBULIN RATIO | 1.5 | | • | 0.9-2.0 |
| AST (SGOT) | 19 | U/L | • | < 50 |
| ALT(SGPT) - SERUM | 17 | U/L | • | <50 |
| BILIRUBIN TOTAL | 1.4 * | mg/dL | • | 0.3–1.2 |
| BILIRUBIN CONJUGATED (DIRECT) | 0.3 * | mg/dL | • | <0.2 |
| BILIRUBIN UNCONJUGATED (INDIRECT) | 1.1 | mg/dL | • | 0.1-1.2 |
| Alkaline Phosphatase - Serum | 91 | U/L | • | 30-120 |
| GAMMA GLUTAMYL TRANSPEPTIDASE - SERUM | 33 | U/L | • | 0 - 55 |
| CREATININE - SERUM / PLASMA | | | | |
| Test Name | Result | Unit | Level | Range |
| CREATININE - SERUM / PLASMA | 0.69 * | 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 | 6.3 | mg/dL | • | 3.5-7.2 |
| BUN (BLOOD UREA NITROGEN) | | | | |
| Test Name | Result | Unit | Level | Range |
| BUN (BLOOD UREA NITROGEN) | 11.6 | mg/dL | | Male: <50yrs 8.87-20.5 mg/dl Male:>50yrs 8.41-25.7 mg/dl |
| THYROID PACKAGE | | | | |
| Test Name | Result | Unit | Level | Range |
| TOTAL T3: TRI IODOTHYRONINE - SERUM | 1.54 | ng/ml | • | 0.60-1.81 |
| TOTAL T4: THYROXINE - SERUM | 14.14 * | μg/dL | • | 5.01 - 12.45 |
| TSH: Thyroid Stimulating Hormone | 1.03 | 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) | 2.5 | ng/mL | • | < 4 |

ECG

-Abnormal

X-RAY CHEST PA

IMP:- RADIOGRAPHIC IMAGE REVEALS:-Normal findings are seen.

Thanks for Ref



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CARDIOLOGY

TMT/2D ECHO

Ultrasound Radiology

ULTRASOUND - WHOLE ABDOMEN

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Executive Summary



Obesity
HYPERTENSION
TYPE 2 DIABETES?

Wellness Prescription

Advice On Diet :-



Low calorie, low sugar, low fat diet

Advice On Physical Activity:-



30 minutes brisk walk 5 days a week

Other Lifestyle Changes & Recommendations :-

DIET CONTROL FOR 1 MONTH GLUCOMETER SMBG AT HOME

Medications

TAB. MOHITEL 40 MG OD 8AM Tab Celbone XT OD for 1month

Follow-up and Review Plan



Weight reduction

Printed By: NEELAM JAIN



AHC No: BPLAH6379

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

TAB. MOHITEL 40 MG OD 8AM Tab Celbone XT OD for 1month

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AICVD RISK SCORE REPORT

| RISK STATUS | YOUR SCORE | ACCEPTABLE SCORE |
|-------------|------------|------------------|
| High Risk | 18 | 9 |

Your likelihood of developing cardiovascular disease in the next ten years is 1.6 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 3 months if you have:
 - o Uncontrolled high blood pressure
 - o Diabetes
 - o Dyslipidemia
 - o Coronary heart disease
- You will be referred to a cardiologist.

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