

Name : Mrs. PIYALI DAS (35 /F)

Date : 05/10/2024

Address : VILL-GOBINDOPUR, PO-PROSADPUR, PS-JANHIPARA, HOOGHLY, HOOGHLY,  
WEST BENGAL, INDIA

Examined by: Dr .SHARMISTHA MALLIK

UHID : AGHL.0001547098

Package : MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS HCK

AHC No : AMHLAH221069



## CHIEF COMPLAINTS

For corporate health checkup

## PRESENT KNOWN ILLNESS

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



## DRUG ALLERGY

NO KNOWN ALLERGY

:04/03/2024



## SYSTEMIC REVIEW

### Cardiovascular system

- Nil Significant

### Respiratory system

- Nil Significant

### Oral and dental

- Nil Significant

### Gastrointestinal system

Rectal bleeding - yes; Piles - yes

### Genitourinary system

- Nil Significant

### Gynaec history

Last menstrual period - 17.9.24; Periods - regular;  
No of Children - 1; Last child birth - 6 yrs; No of  
deliveries - 2; Deliveries - normal vaginal delivery,  
LSCS

### Central nervous system

- Nil Significant

### Eyes

Vision - normal with glasses; Glasses - yes

### ENT

- Nil Significant

### Musculoskeletal system

Spine and joints

- Nil Significant

### Skin

- Nil Significant

### Weight

- stable



## Past medical history

Past medical history - nil significant



## Personal history

Marital status - Married

No. of children - 1

Diet - Non Vegetarian

Alcohol - does not consume alcohol

Smoking - No

Chews tobacco - No

Physical activity - Mild



## Family history

Father - alive

Mother - alive

Hypertension - father,mother

Coronary artery  
disease - none

Cancer - None

## PHYSICAL EXAMINATION



### General

Build - over weight

Height - 153

Weight - 66.6

BMI - 28.45

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Pallor - No  
Oedema - no



### Cardiovascular system

Heart rate (Per minute) - 61  
Rhythm - Regular  
- B.P. Sitting  
Systolic(mm of Hg) - 106  
Diastolic(mm of Hg) - 71  
Heart sounds - S1S2+

### Respiratory system

Breath sounds - Normal vesicular breath sounds



### Abdomen

Appearance - Normal  
Organomegaly - No  
Tenderness - No  
Bowel sounds - Normal

### Ophthalmology consultation

Ophthalmology findings - PGVA:RE:6/6 LE:6/6  
NVA:RE:N6 LE:N6  
OCULAR MOVEMENT:  
WNL ANT.SEG: WNL

ADVICE:\*To continue  
present glass Rx\*Review  
after 1yr/SOS -

Printed By : Benazir Begaum

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**COMPLETE HAEMOGRAM PROFILE**

Test Name	Result	Unit	Level	Range
Hemoglobin	13.9	g/dl	●	12.0-15.0
RBC COUNT	4.52	Million/ ul	●	3.8-4.8
Hematocrit - Hct:	41.7	%	●	36-46
MCV	92.3	fl	●	83-101
MCH	30.8	pg	●	27-32
MCHC	33.4	%	●	31.5-34.5
RDW	14.0	%	●	11.8-14.0
WBC Count	7100	/cu mm	●	4000-10000
Platelet Count	1.56	lacs/cu mm	●	1.5-4.0
Neutrophils	60	%	●	40-80
Lymphocytes	30	%	●	20-40
Monocytes	06	%	●	2-10
Eosinophils	04	%	●	01-06
Basophils	00	%	●	0-0
RBC:	Normocytic Normochromic cells			
Platelets:	Adequate on the smear			
ERYTHROCYTE SEDIMENTATION RATE (ESR)	19	mm/1st hr	●	0-20

**URINE ROUTINE AND MICROSCOPY**

Test Name	Result	Unit	Level	Range
Volume:	40	mL		
Colour:	Pale Straw			
Appearance	Clear			
Specific Gravity	1.005			
pH:	7.0			
Albumin:	Not Detected			
Glucose	Not Detected			
Ketone:	Not Detected			
Bile Pigments	Not Detected			
RBC	Nil	/hpf		
Pus Cells	Occasional/hpf			
Epithelial Cells	0-2			

Casts: Not Found  
Crystals: Not Found

**URINE SUGAR - POST PRANDIAL (QUALITATIVE)**

Test Name	Result	Unit	Level	Range
URINE GLUCOSE(POST PRANDIAL)	Nil			

**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			

**LIVER FUNCTION TEST (PACKAGE)**

Test Name	Result	Unit	Level	Range
ALT(SGPT) - SERUM	23	U/L	●	0-35
ALBUMIN - SERUM	4.4	g/dL	●	3.5-5.1
ALKALINE PHOSPHATASE - SERUM	55	U/L	●	33-98
AST (SGOT) - SERUM	23	U/L	●	0-35
BILIRUBIN TOTAL - SERUM	1.1	mg/dL	●	0.3-1.2

**LIPID PROFILE TEST (PACKAGE)**

Test Name	Result	Unit	Level	Range
CHOLESTEROL - SERUM	143	mg/dL	●	0-200
Non-HDL Cholesterol	106			

**CREATININE - SERUM**

Test Name	Result	Unit	Level	Range
CREATININE - SERUM	0.8	mg/dL	●	0.6-1.1

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**LIVER FUNCTION TEST (PACKAGE)**

Test Name	Result	Unit	Level	Range
GGTP: GAMMA GLUTAMYL TRANSPEPTIDASE - SERUM	18	U/L	●	0-38

**GLUCOSE - PLASMA (FASTING)**

Test Name	Result	Unit	Level	Range
GLUCOSE - PLASMA (FASTING)	83	mg/dL	●	70-99

**GLUCOSE - PLASMA (POST PRANDIAL)**

Test Name	Result	Unit	Level	Range
GLUCOSE - PLASMA (POST PRANDIAL)	109	mg/dL	●	70-140

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

Test Name	Result	Unit	Level	Range
HBA1C (GLYCOSYLATED HAEMOGLOBIN)-WHOLE BLOOD	5.1	%	●	Nondiabetic : 4 - 5.6 % Prediabetics : 5.7 - 6.4% Diabetes : >= 6.5% ADA Therapeutic goal : <7%

**LIPID PROFILE TEST (PACKAGE)**

Test Name	Result	Unit	Level	Range
TC/HDL-C ratio serum	4 *		●	Optimal<3.5
HDL CHOLESTEROL - SERUM	37	mg/dL	●	30-70
LDL CHOLESTEROL -SERUM	93	mg/dL	●	0-100
VLDL CHOLESTEROL - SERUM (Calculated)	13	mg/dL	●	0-35

**LIVER FUNCTION TEST (PACKAGE)**

Test Name	Result	Unit	Level	Range
PROTEIN TOTAL - SERUM	7.2	g/dL	●	6.4-8.3
Albumin/Globulin Ratio	1.6		●	1.0-2.0

GLOBULIN: (CALCULATED) - SERUM	2.8	g/dL	●	1.8-3.6
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**THYROID PROFILE - I(T3,T4 AND TSH)**

Test Name	Result	Unit	Level	Range
TOTAL T3: TRI IODOTHYRONINE - SERUM	1.03	ng/ml	●	0.87-1.78
TOTAL T4: THYROXINE - SERUM	9.37	µg/dL	●	5.48-14.28

**LIPID PROFILE TEST (PACKAGE)**

Test Name	Result	Unit	Level	Range
TRIGLYCERIDES - SERUM	66	mg/dL	●	0-150

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

Test Name	Result	Unit	Level	Range
TSH: THYROID STIMULATING HORMONE - SERUM	1.71	µIU/mL	●	0.38-5.33

**URIC ACID - SERUM**

Test Name	Result	Unit	Level	Range
URIC ACID - SERUM	5.0	mg/dL	●	2.4-5.7

**LIVER FUNCTION TEST (PACKAGE)**

Test Name	Result	Unit	Level	Range
BILIRUBIN CONJUGATED (DIRECT) - SERUM	0.2	mg/dL	●	0.0-0.2

**BUN (BLOOD UREA NITROGEN)**

Test Name	Result	Unit	Level	Range
BUN (BLOOD UREA NITROGEN)	8.9	mg/dL	●	7.0-18.0

**BUN/CREATININE RATIO**

Test Name	Result	Unit	Level	Range
BUN/CREATININE RATIO	11.1			

**PAP SMEAR /CERVICAL SMEAR**

Ref No:  
AG01.C2408119

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**SPECIMEN TYPE:**

Conventional cervical smear (Papanicolaou stain) x 1

**SPECIMEN ADEQUACY:**

Satisfactory for evaluation without endocervical cells.

**INTERPRETATION/RESULT:**

Negative for intraepithelial lesion or malignancy with  
Bacterial vaginosis

**ECG**

SINUS BRADYCARDIA WITH SINUS ARRHYTHMIA.

**TREADMILL TEST / STRESS TEST**

STRESS TEST IS NEGATIVE FOR PROVOCABLE  
MYOCARDIAL ISCHAEMIA.

**ULTRASOUND SCREENING WHOLE ABDOMEN**

\* Grade I fatty liver.

[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.]

Dr. MOURUSI MANDAL

DNB RESIDENT

In consultation with

DR. DEBASISH DATTA

DMRD (RADIOLOGICAL) CONSULTANT

RADIOLOGIST Reg. No. 42727 (WBMC)

**X-RAY CHEST PA**

\* Chest skiagram does not reveal any significant  
abnormality.

**INVESTIGATIONS NOT DONE / NOT YET REPORTED / NOT  
PART OF PACKAGE(LAB,RADIOLOGY & CARDIOLOGY)**

**Biochemistry**

A/G - RATIO



Within Normal Range




Borderline High/Low




Out of Range

## Executive Summary


- 
1. Overweight (BMI - 28.45).
  2. PAP Smear - Negative for intraepithelial lesion or malignancy with Bacterial vaginosis
  3. USG W/A - Grade I fatty liver.

## Wellness Prescription

### Advice On Diet :-

- 
- \* Low calorie healthy balanced diet.
  - \* Drink plenty of fluids.

### Advice On Physical Activity :-

- 
- \* Regular exercise and maintain ideal weight.

### Other Lifestyle Changes & Recommendations :-


- \* Weight reduction advised.

## Medications

METROGYL 400MG TAB(METRONIDAZOLE 400MG) 1 tablet thrice daily Oral after food for 5 Day(s)

\* Cap. BIFILAC HP (LACTOBACILLUS) 1 capsule once daily for 10 days.

## Follow-up and Review Plan

- 
- \* Annual health check-up.



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

**Dr.SHARMISTHA MALLIK**

AHC Physician / Consultant Internal Medicine

Printed By : AVIJIT DAS

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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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## Medications

Drug Name	Strength	Dosage	Frequency	Route of Admin	Relationship with Meal	Duration	Indication
METROGYL 400MG TAB(METRONIDAZOLE 400MG)		1 tablet	thrice daily	Oral	after food	for 5 Day(s)	

\* Cap. BIFILAC HP (LACTOBACILLUS) 1 capsule once daily for 10 days.

**Dr.SHARMISTHA MALLIK**

AHC Physician / Consultant Internal Medicine



### AICVD RISK SCORE REPORT

RISK STATUS

YOUR SCORE

ACCEPTABLE SCORE

Low Risk

2

3

**Your cardiovascular disease risk in the next 10 years is within the Normal limits for 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**

**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**