Name : Ms. RIYA GUPTA (24 /F) Date : 23/12/2023

Address : OTHER, HYDERABAD, HYDERABAD, TELANGANA, INDIA

Examined by: Dr. SHARMISTHA MALLIK UHID : AMHL.0002242818

Package: MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS HCK **AHC No: AMHLAH189359**



For corporate health checkup

PRESENT KNOWN ILLNESS

No history of - Diabetes mellitus,

Hypertension,

Dyslipidemia, Thyroid disorder, Heart disease,

Stroke, Asthma



NO KNOWN ALLERGY :23/12/2023



Cardiovascular system

- Nil Significant

Respiratory system

- Nil Significant

Oral and dental

- Nil Significant

Gastrointestinal system

- Nil Significant

Genitourinary system

- Nil Significant

Gynaec history

Last menstrual period - 6.12.23; Periods - regular

Central nervous system

- Nil Significant

Eyes

- Nil Significant

ENT

- Nil Significant

Musculoskeletal system

Spine and joints

- Nil Significant

Skin

- Nil Significant



Past medical history

Past medical history - nil significant



Personal history

Marital status - Married

- Non Vegetarian Diet

Alcohol - does not consume alcohol

Smoking - No Chews tobacco - No Physical activity - Mild



Father - alive Mother - alive - father Diabetes - father Coronary artery

disease

Cancer - None

PHYSICAL EXAMINATION



General

Build - over weight Height - 153 Weight -60.9 BMI - 26.02 Pallor - No Oedema - no



Cardiovascular system

Heart rate (Per minute) - 84 Rhythm - Regular

- B.P. Sitting

Systolic(mm of Hg) - 112 Diastolic(mm of Hg) - 72

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Heart sounds - S1S2+

Respiratory system

Breath sounds - Normal vesicular breath

sounds



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

Opthalmology consultation

Opthalmology findings - UCVA:RE:6/6 LE:6/6

NVA:RE:N6 LE:N6

OCULAR MOVEMENT:WNL

ANT.SEG:WNL

ADVICE:*Review after

1yr/SOS

Printed By: Benazir Begaum

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| COMPLETE HAEMO | OGRAM PI | ROFIL | E | | Epithelial Cells | 4-6 /h.p | .f /hpf | | |
|--|---------------------------|------------------------------|------------|-------------------------------|-------------------------------|-----------|-------------|-------|----------------------|
| Test Name | Result | Unit | Level | Range | Casts: | Not Fou | | | |
| Hemoglobin | 12.4 | g/dl | | 12.0-15.0 | Crystals: | Not Fou | | | |
| RBC COUNT | 3.88 | Millic ul | n/ | 3.8-4.8 | C. ye.a.e. | | | | |
| Hematocrit - Hct: | 38.4 | % | • | 36-46 | URINE SUGAR - POS | T PRAN | DIAL | | |
| MCV | 99.0 | fl | | 83-101 | (QUALITATIVE) Test Name | Result | Unit | Level | Range |
| MCH | 32.0 | n pg | | 27-32 | URINE | Nil | | | |
| MCHC | 32.4 | % | | 31.5-34.5 | GLUCOSE(POST | | | | |
| RDW | 17.3 * | % | | 11.8-14.0 | PRANDIAL) | | | | |
| WBC Count | 6700 | | nm • | 4000-10000 | URINE SUGAR- FAST | ING(QU | ALITA | TIVE) | |
| | | | cu • | | Test Name | Result | Unit | Level | Range |
| Platelet Count | 1.45 * | mm | cu 🛡 | 1.5-4.0 | URINE GLUCOSE(FASTING) | Nil | | | |
| Neutrophils | 53 | % | | 40-80 | GLOCOSE(FASTING) | | | | |
| Lymphocytes | 41 * | % | | 20-40 | BLOOD GROUPING A | | • | | ND RH) |
| Monocytes | 04 | % | | 2-10 | Test Name | Result | Unit | Level | Range |
| Eosinophils | 02 | % | | 01-06 | ABO Group: | Α | | | |
| Basophils | 00 | % | | 0-0 | Rh (D) Type: | POSITI | VE | | |
| RBC: | Anisocy | Anisocytosis+, Predominantly | | LIVER FUNCTION TEST (PACKAGE) | | | | | |
| | Normod | ytic No | rmochro | mic | Test Name | Result | Unit | Level | Range |
| Platelets: | Adequa | te on th | ie smea | r | ALT(SGPT) - SERUM | 27 | U/L | | 0-35 |
| ERYTHROCYTE SEDIMENTATION RATE (ESR) | 30 * | mm/ hr | 1st • | 0-20 | ALBUMIN - SERUM | 4.2 74 | g/dL U/L | • | 3.5-5.1 33-98 |
| URINE ROUTINE AI | ND MICRO | SCOE |) \ | | PHOSPHATASE - | , , | | | 00 00 |
| Test Name | Result | | | Range | SERUM | | | | |
| Volume: | 40 | mL | | | AST (SGOT) - SERUM | 26 | U/L | | 0-35 |
| Colour: | Pale Str | aw | | | (, | | | | |
| Appearance | Slightly | Slightly Turbid | | | BILIRUBIN TOTAL - | 0.5 | mg/d | L • | 0.3-1.2 |
| Specific Gravity | 1.015 | | | | SERUM | | | | |
| pH: | 7.5 | | | | LIPID PROFILE TEST | (PACK | AGE) | | |
| Albumin: | Not Det | ected | | | Test Name | Result | Unit | Level | Range |
| | Not Det | ected | | | CHOLESTEROL - SERUM | 196 | mg/d | L | 0-200 |
| Glucose | | ected | | | SERUIVI | | | | |
| Glucose Ketone: | Not Det | | | | ODEATINING OFFICE | M | | | |
| Ketone: | | | | | CREATININE - SERUI | VI. | | | |
| | Not Det Not Det 1-2 | | | | Test Name CREATININE - SERUM | Result | | Level | Range 0.6-1.1 |

Borderline High/Low

Out of Range

Within Normal Range

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| LIVER FUNCTION TES | THYROID PROFILE - I(T3,T4 AND TSH) | | | | | | | | |
|--|------------------------------------|-------|----------|---------------------------|---|-----------|-------|-------|------------|
| Test Name | Result | Unit | Level | Range | Test Name | Result | Unit | Level | Range |
| GGTP: GAMMA GLUTAMYL TRANSPEPTIDASE - SERUM | 20 | U/L | • | 0-38 | TOTAL T3: TRI IODOTHYRONINE - SERUM | 1.58 | ng/ml | • | 0.87-1.78 |
| GLUCOSE - PLASMA | (FASTIN | NG) | | | TOTAL T4: THYROXINE - SERUM | 12.9 | μg/dL | | 5.48-14.28 |
| Test Name | Result | Unit | Level | Range | | | | | |
| GLUCOSE - PLASMA | 91 | mg/dL | • | 70-99 | LIPID PROFILE TEST | (PACKA | AGE) | | |
| (FASTING) | | | | | Test Name | Result | Unit | Level | Range |
| GLUCOSE - PLASMA | (POST I | DRANI | ΝΑΙ \ | | TRIGLYCERIDES - | 127 | mg/dl | _ | 0-150 |
| Test Name | • | | • | Range | SERUM | | | | |
| GLUCOSE - PLASMA | 113 | mg/dL | | 70-140 | THYROID PROFILE - | I(T3,T4 / | AND T | SH) | |
| (POST PRANDIAL) | | | | . 5 . 76 | Test Name | • | | • | Range |
| HBA1C (GLYCOSYLATED | | | | | TSH: THYROID STIMULATING | 2.00 | μIU/m | nL • | 0.38-5.33 |
| HAEMOGLOBIN)-WHO | DLE BL | OOD | | | HORMONE - SERUM | | | | |
| Test Name | Result | Unit | Level | Range | | | | | |
| HBA1C | 4.4 | % | | Nondiadetic: 4 | URIC ACID - SERUM | | | _ | _ |
| (GLYCOSYLATED HAEMOGLOBIN)-WHO | | | | - 5.6 % Prediabetics : | Test Name | Result | | | Range |
| LE BLOOD | | | | 5.7 - 6.4% Diabetes : | URIC ACID - SERUM | 4.7 | mg/dl | | 2.4-5.7 |
| | | | >/= 6.5% | LIVER FUNCTION TE | ST (PAC | KAGE |) | | |
| | | | | ADA | Test Name | Result | Unit | Level | Range |
| | | | | Theraputic goal : <7% | BILIRUBIN CONJUGATED | 0.1 | mg/dl | _ | 0.0-0.2 |
| LIPID PROFILE TEST | (PACKA | AGE) | | | (DIRECT) - SERUM | | | | |
| Test Name | Result | - | Level | Range | BUN (BLOOD UREA | NITROG | EN) | | |
| HDL CHOLESTEROL - | 49 | mg/dL | | 30-70 | Test Name | Result | Unit | Level | Range |
| SERUM | | | | | BUN (BLOOD UREA NITROGEN) | 12.9 | mg/dl | • | 7.0-18.0 |
| LDL CHOLESTEROL | 129 * | mg/dL | | 0-100 | LIVED FUNCTION TE | CT (DAC | WACE | | |
| -SERUM | | | | | LIVER FUNCTION TE | • | | • | Donas |
| VLDL CHOLESTEROL - | 18 | mg/dL | | 0-35 | Test Name | | Unit | Level | Range |
| SERUM (Calculated) | | | | | A/G - RATIO | 1.3 | | | 1.0-2.0 |
| LIVER FUNCTION TES | ST (PAC | KAGE |) | | BUN/CREATININE RA | TIO | | | |
| Test Name | Result | Unit | Level | Range | Test Name | Result | Unit | Level | Range |
| PROTEIN TOTAL - SERUM | 7.5 | g/dL | • | 6.4-8.3 | BUN/CREATININE RATIO | 21.8 | | | |
| GLOBULIN: | 3.3 | g/dL | | 1.8-3.6 | | | | | |
| (CALCULATED) - SERUM | | | | | PAP SMEAR /CERVICA Ref No: | L SMEAF | ₹ | | |

Borderline High/Low

Out of Range

Within Normal Range

Package : MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS HCK AHC No : AMHLAH189359

SPECIMEN TYPE:

Conventional cervical smear (Papanicolaou stain) x 1

SPECIMEN ADEQUACY:

Satisfactory for evaluation with endocervical cells.

INTERPRETATION/RESULT:

Negative for intraepithelial lesion or malignancy, with no organism

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.]

X-RAY CHEST PA

*Chest skiagram does not reveal any significant abnormality.

CARDIOLOGY

ECG

TREADMILL TEST / STRESS TEST

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AHC No: AMHLAH189359

Dr.SHARMISTHA MALLIK

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.

Printed By:

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AHC No: AMHLAH189359

AICVD RISK SCORE REPORT

| RISK STATUS | YOUR SCORE | ACCEPTABLE SCORE | | | |
|-------------|------------|------------------|--|--|--|
| Low Risk | 2 | 2 | | | |

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.

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