

Test Patient (Test
Jia En)
1234

Date: 16 August
2023

HEALTH SCREENING REPORT



KEY RECOMMENDATIONS

Recommendations



Systolic Blood Pressure

High: 140 [100 - 129 mmHg]

Follow-up

- Your blood pressure is elevated. You are advised to consult with our doctors for further evaluation of your blood pressure. Persistent high blood pressure requires long-term drug treatment to prevent end-organ damage to the arteries, kidneys, eyes, heart and brain. Reduce salt intake, adopt lifestyle and dietary modifications. You may contact our clinic for dietetics services. Treatment with anti-hypertension drug is advised if the repeated blood pressures remain elevated.

DOCTOR'S COMMENTS

This is the end of your health report.

Examining Doctor	Dr Petty Chen
Reporting Doctor	Dr Petty Chen
Date	16 August 2023

EXECUTIVE SUMMARY



BLOOD PRESSURE
140 / 60 mmHg



PULSE
100 bpm



CORONARY ARTERY DISEASE RISK IN 10 YEARS IS
<1% LOW

MEDICAL AND FAMILIAL HISTORY

Your health report takes into account the following information you provided during your health screening:

Your Demographics

Age: 30

Gender: Female

Ethnicity: Chinese

Drug Allergies

NKDA

Medical History

NIL

Family History

Father: Stroke



GENERAL APPEARANCE



General Health: Alert and well
Skin: Normal
Face: Normal

HEAD & NECK



Eyes: Normal. Pupils equal and reactive to light. Extraocular movement normal
Ears: Normal. External auditory canals clear. Tympanic membranes intact
Oral Cavity: Normal
Thyroid Gland: Normal
LNS: Normal

CHEST, HEART & LUNGS



Breasts: Normal
Respiratory System: Normal
Cardiovascular System: Normal. S1S2 no murmurs

BONE & NERVOUS SYSTEM



Neural System: Normal
Musculoskeletal System: Normal

ABDOMEN & PELVIS



Abdomen: Normal
Female Genitalia: Normal

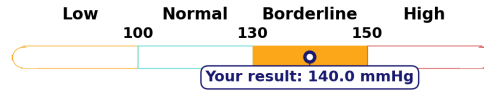
PANEL

CLINICAL & LABORATORY FINDINGS



BP and Biometrics

Systolic Blood Pressure



APPENDIX

CARDIAC-ASSOCIATED RISK ASSESSMENT

Your estimated prognosis of coronary artery disease risk in 10 years is close to the national average. The national average risk for females in your age group is **1%**.

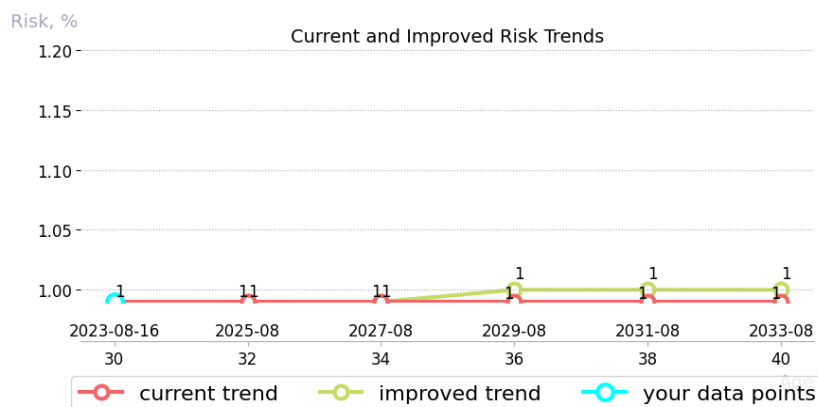
SUGGESTED LIFESTYLE ADJUSTMENTS

Currently, your **Coronary Artery Disease Risk in 10 Years** prognosis is comparable to or better than the population average. This suggests that your current life style is sufficient to maintain this risk at relatively low levels. However, the following changes are suggested according to clinical practice guidelines.

Risk Contributor	Current reading	Target value	Units
Systolic Blood Pressure	140	<130	mmHg
Coronary Artery Disease Risk in 10 Years	<1 %	<1 %	

ALTERNATIVE RISK SCENARIOS

Below we present the estimated dynamics of the risk, based on extrapolation of the observed trends in the parameters in the next 10 years. Following the doctor’s recommendations may reverse the negative trend and decrease future risks.



Coronary Artery Disease Risk Assessment ⁴ technical information:

Coronary Artery Disease (CAD) describe events affecting the blood vessels and the heart. Some common examples of such events include coronary heart disease, cerebrovascular disease, peripheral vascular disease and stroke. The risk of CAD is predicted using an algorithm adapted to Singaporean population from the Framingham Heart Study that takes into account age, total and high-density lipoprotein cholesterol, systolic blood pressure, treatment for hypertension, smoking, and diabetes status to predict the risk of developing any CAD in the next 10 years.

DISCLAIMER AND ADVISORIES

1. Regular comprehensive health screening will enable early detection of chronic diseases in particular- diabetes, hypertension, cardiovascular diseases, cancers, liver, kidney, thyroid diseases and enable early treatment to prevent complications.
2. Health screening may have both false positive and false negative results and may not pick up all occult diseases. Any abnormal finding may need further investigations or a referral to a Specialist.
3. Tumour markers are of limited value and are not advised to be used for the diagnosis of cancer on their own. Tumour markers are produced by cancer or by other cells of the body in response to cancer or certain benign (non-cancerous) conditions. Further investigations may be necessary if the tumour markers are elevated.
4. The treadmill stress test is only 60-70% accurate in detecting coronary artery disease. False positive results may occur and may need further evaluation.
5. A Screening Colonoscopy is advised once you reach the age of 50 or earlier if there is family history of colo-rectal cancer.
6. Please consult our doctors with regards to skin cancer screening.
7. Regular breast examination is advised with age-appropriate screening tests or if advised by your doctor.
8. Please note that the current MOH recommendations state: All women who have ever had sexual intercourse are advised to undergo screening for cervical cancer from the age of 25. Women aged 25 to 29 years are advised to be screened with the Pap smear, at least once every 3 years. Women aged 30 years and above are advised to be screened with HPV testing. This are advised to be performed at least once every 5 years.

REFERENCES

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4. Tai ES, Chia BL, Bastian AC, et al. Ministry of Health Clinical Practice Guidelines: Lipids. Singapore Med J. 2017 Mar;58(3):155-166.
5. Goh SY, Ang SB, Bee YM, et al. Ministry of Health Clinical Practice Guidelines: Diabetes Mellitus. Singapore Med J. 2014 Jun;55(6):334-47.
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7. Cervical Screen Singapore Advisory Committee, Health Promotion Board. Management Guidelines for Cervical Screening & Preinvasive Disease of the Cervix. Singapore 2019. https://www.sccps.org/wp-content/uploads/2019/03/CSS-Clinical-Mgt-Guidelines-2019_March-Release.pdf

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