the Private Doctors

FOUNDED ON CARE

SAMPLE REPORT

Fictional patient · illustrative results only

Executive Health Assessment

Results Report

Prepared for

Mr John Sample

Date of birth: 1 January 1978

Assessment date: 15 July 2026

PRIVATE & CONFIDENTIAL

Prepared by Dr Inderraj Chaggar · GMC 7020363

15 July 2026

Mr John Sample
Date of birth: 1 January 1978 (age 48)

Dear Mr Sample,

Thank you for attending your recent Executive Health Assessment at The Private Doctors.

Within this letter, you will find:

- A summary of your initial consultation
- A detailed overview of your investigation findings
- Your personalised recommendations and action plan
- A full copy of all investigation results for your records

SUMMARY OF INITIAL CONSULTATION

Personal Medical and Surgical History

You report no significant past medical history and no previous major surgical procedures. No chronic health conditions have been identified or reported.

Medication and Allergy History

You are not currently taking any prescribed or regular medication. You report no known drug allergies and no known allergies to food or environmental triggers.

Family History

Your father was diagnosed with high blood pressure in his early sixties, which is well controlled with medication. There is no family history of early cardiovascular disease, diabetes or cancer to your knowledge, and no known hereditary conditions within your immediate family.

Social History

You are married with two children and work as a finance director, a role you describe as demanding, with a moderate level of work-related stress. You have never smoked. You drink approximately 20 units of alcohol per week, typically wine in the evenings and at weekends. Your diet is generally balanced although meals are often eaten late due to work commitments. You currently exercise once a week and average around six and a half hours of sleep per night.

Current Medical Issues or Concerns

You report no current acute medical concerns or specific symptoms. You have arranged this health assessment as a general health MOT to review your overall wellbeing, assess your current health status and identify any potential health risks. You have not noticed any recent changes in your health and are attending for preventative advice and reassurance.

YOUR INVESTIGATION FINDINGS

Physical Examination

Your blood pressure was 128/82 mmHg, which is within the normal range at the time of review, and your pulse was 62 beats per minute, regular, with no concerning features detected.

Cardiovascular examination demonstrated normal heart sounds with no murmurs detected. Respiratory examination revealed clear breath sounds bilaterally, with no evidence of wheeze or crackles. Abdominal examination was soft and non-tender, with no organomegaly or palpable masses identified. Neurological, ENT and skin assessments were unremarkable.

Your physical examination was reassuring overall, with no clinically significant abnormalities identified during assessment.

Body Composition Analysis

Your body composition assessment showed a weight of 84.6 kg and a body mass index (BMI) of 26.7 kg/m², which is slightly above the healthy reference range for your height.

Body fat percentage was 24.1%, with a visceral fat level of 11, indicating mildly elevated central fat distribution. Skeletal muscle mass was 35.8 kg, which is appropriate for your body frame.

Overall, your body composition suggests good preservation of muscle mass, with scope for improvement through a reduction in visceral fat and optimisation of fat distribution.

Blood Test Results

Your blood test results have been reviewed in full and are reassuring overall, with two areas identified for attention, discussed below and in your action plan.

Your routine blood counts, kidney function, thyroid function, inflammation markers, hormone profile and vitamin levels were all within normal ranges. Your HbA1c (long-term blood sugar) was 39 mmol/mol, which is within the normal range, although towards its upper end.

Your liver function tests showed a mildly raised GGT of 78 U/L (reference range <60 U/L), with all other liver markers normal. This pattern is most commonly related to alcohol intake and is consistent with the consumption we discussed during your consultation.

Your cholesterol profile showed a total cholesterol of 5.6 mmol/L, LDL cholesterol of 3.6 mmol/L, HDL cholesterol of 1.1 mmol/L and triglycerides of 1.9 mmol/L. Your advanced lipid markers, including ApoB and lipoprotein(a), did not reveal any additional inherited risk. Taken together with your other results, your calculated 10-year cardiovascular risk (QRISK3) is 8.2%, which is below the threshold at which medication would be recommended, but is best addressed now through lifestyle measures.

Overall, there is no evidence of anaemia, inflammation, metabolic imbalance or concerns relating to organ function beyond the findings described above.

Urine Analysis

Urinalysis was normal, with no evidence of blood, protein, glucose, infection or other abnormalities. These findings are reassuring and do not suggest underlying renal, metabolic or urinary tract concerns at present.

Cardiac and Respiratory Investigations

Your heart and lung investigations were reassuring overall, with one incidental finding on your echocardiogram which was investigated further and resolved, as detailed below.

- **ECG** — A normal heart rhythm, with no concerning electrical changes. Reviewed and reported by our consultant cardiologist.
- **Echocardiogram** — Normal chamber size and function, with an ejection fraction of 60% and no significant valve abnormalities. The ascending aorta measured 4.1 cm, which is mildly dilated, and this was reviewed the same week by our consultant cardiologist (see below).
- **CT Aorta and Coronary Angiogram (arranged in response to a finding)** — Given the echocardiogram finding, our consultant cardiologist arranged an ECG-gated CT scan of the thoracic aorta with coronary angiography as an additional investigation (not part of the standard assessment). This confirmed the ascending aorta to be at the upper limit of normal (3.9 cm), with a normal aortic arch and normal coronary arteries showing no plaque or narrowing.
- **24-Hour Blood Pressure Monitoring** — Your blood pressure pattern over 24 hours was normal, with appropriate night-time dipping and no evidence of masked hypertension.
- **Spirometry** — Normal lung function, with FEV1 and FVC values within the expected range and no evidence of airflow obstruction.
- **Estimated VO2 Max** — Your estimated score is 36 ml/kg/min. This is in the below average category for patients of your age and BMI, and reflects your current activity levels rather than any underlying cardiac or respiratory concern.

Overall, following consultant cardiologist review and definitive CT imaging, there is no evidence of any significant heart or lung disease. No intervention is required; a surveillance echocardiogram in 12 months is recommended as a precaution, and improving your cardiovascular fitness is addressed in your action plan.

Cancer Screening

Your cancer screening results were reassuring overall. The FIT test was negative, meaning no hidden blood was detected in the stool. Your PSA level was 0.8 ng/mL, which is within the normal range, and these findings do not suggest any current concerns based on the screening tests performed.

TruCheck is a blood-based screening test designed to look for circulating tumour-related markers in the bloodstream. Your result did not identify any concerning abnormalities, which is reassuring. As with all screening tests, results should be interpreted alongside your clinical history, symptoms and routine age-appropriate screening.

ADDITIONAL INVESTIGATIONS (OPTIONAL ADD-ONS)

The investigations in this section are optional add-ons, chosen in addition to your Executive Health Assessment. They are not part of the standard assessment and were selected based on your preferences and clinical discussion.

Full Body MRI Summary

Brain — The brain appears normal, with no concerning findings seen on this scan. There are no signs of tumours, bleeding, stroke or aneurysm identified. The brain structures are as expected.

Spine — The spine is well aligned, and the bones and discs appear healthy overall. There are no concerning findings such as significant disc problems, narrowing, or pressure on the nerves or spinal cord seen on this scan.

Chest / Abdomen — The major organs, including the lungs, liver, gallbladder, kidneys, pancreas, spleen and adrenal glands, appear normal. No concerning abnormalities, such as masses or enlarged lymph nodes, are identified on this scan.

Pelvis — The pelvic organs, including the prostate, appear normal. The bones in this area also appear healthy. There are no concerning findings such as masses, fluid collections or enlarged lymph nodes seen on this scan.

Important information: MRI is a highly sensitive imaging tool, but no scan can detect every possible condition. Findings should always be considered alongside your symptoms, medical history and any other tests. If you have ongoing or new concerns, further medical advice is recommended.

Genetic Cancer Screening

Genetic cancer screening analysed a panel of genes associated with inherited cancer risk, including the BRCA genes and those linked to Lynch syndrome. No pathogenic variants were identified. This means no inherited genetic changes associated with an increased cancer risk were found on the panel tested. It does not eliminate all future cancer risk, and routine age-appropriate screening remains important, but it provides valuable reassurance regarding hereditary predisposition.

PERSONAL RECOMMENDATIONS AND ACTION PLAN

1. **Mildly dilated ascending aorta on echocardiogram** — your CT scan, arranged promptly by our consultant cardiologist, confirmed the aorta is at the upper limit of normal with entirely normal coronary arteries. No treatment or restriction is required. As a precaution, we will repeat a surveillance echocardiogram in 12 months, which can be incorporated into your annual reassessment. Maintaining good blood pressure control supports aortic health, and your 24-hour monitoring was reassuring in this regard.
2. **Mildly raised GGT (liver marker)** — this is most likely related to your alcohol consumption, which we discussed in detail. We have agreed a plan to reduce your intake to within 14 units per week, and I would recommend repeating your liver function tests in approximately 8 weeks to confirm this has normalised.

3. **Borderline cholesterol profile** — your 10-year cardiovascular risk of 8.2% does not warrant medication at present. We have agreed dietary changes focusing on reducing saturated fat and increasing oily fish, nuts and fibre. I would recommend repeating your cholesterol profile at your 3-month follow-up consultation.
4. **Mildly elevated visceral fat and below-average cardiovascular fitness** — we have agreed a structured exercise plan of at least 150 minutes of moderate aerobic activity per week alongside two resistance sessions. We will repeat your body composition scan at your 3-month follow-up to track progress against today's baseline.
5. **Sleep and stress** — we discussed strategies to protect your sleep towards 7–8 hours per night, including an earlier evening meal and reduced late-evening screen use. No formal intervention is required at this stage.

YOUR CONTINUED CARE

Your assessment is the beginning of an ongoing relationship rather than a single appointment. The following outlines how we will continue to support your health over the year ahead.

Three-Month Follow-Up

As part of your Executive Assessment, you will return in three months for a dedicated follow-up consultation. This allows us to review the changes we have agreed today, repeat your cholesterol profile and body composition scan to measure progress against your baseline, and refine your plan as needed.

Annual Reassessment

I would recommend a full reassessment in approximately 12 months. Repeating your assessment against today's detailed baseline is where much of its long-term value lies, allowing us to track subtle changes over time and act early. Not every investigation needs to be repeated annually: your genetic cancer screening is a one-off test that does not need repeating, and imaging such as your full body MRI and CT coronary angiogram is typically only repeated when clinically indicated rather than routinely. Your surveillance echocardiogram can be incorporated into this visit.

Continuity of Care

Should anything require further attention, your care remains with us rather than being handed elsewhere. I will coordinate any onward referrals to trusted specialists directly and remain your point of continuity throughout, ensuring nothing is lost between appointments.

Year-Round Access

Between assessments, you are welcome to discuss ongoing private GP access, which provides same-day appointments and direct continuity of care for you and, if you wish, your family. This is entirely optional, and we are happy to talk it through whenever suits you.

It is important to recognise that no health assessment can provide absolute certainty regarding future health, nor can any screening package detect every condition or predict all future illness.

Despite comprehensive clinical review and investigation, certain conditions may arise or evolve between assessments. It is therefore important that any new, persistent or concerning symptoms are reviewed promptly, either through your GP or directly with us at The Private Doctors.

Long-term health is best supported through ongoing attention to lifestyle, appropriate preventive care and periodic medical review. In view of this, I would recommend considering a repeat health assessment in approximately 12 months' time.

Should you have any further questions, concerns or require further advice following your assessment, please do not hesitate to contact us on 0113 388 6399 or via admin@theprivatedoctors.co.uk.

Kind regards,

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