MER- MEDICAL EXAMINATION REPORT

Date of Examination	23/12/23
NAME	PRACTE KNARE
AGE	Gender R
HEIGHT(cm)	WEIGHT (kg) LY BMS-
B.P.	110/20
ECG	lmal
X Ray	Norman
Vision Checkup	
Present Ailments	News
Details of Past ailments (If Any)	Na
Comments / Advice : She / He is Physically Fit	MEDIENLY Fire
chair did not get ho. Person remas.	Ing test because of has

Signature with Standard Medical Engineer MBBS, DCP Reg. No.37370



Dear sir

You have been informed that ent opthal ,diet consultation facility is not available at our centre.

If you are ready then your test can be start.







भारत सरकार Government of India

भारतीय विशिष्ट पहचान प्राधिकरण Unique Identification Authority of India

नामांकन क्रमांक / Enrollment No.: 0013/08001/33449

To 知知 或社 Prachi Khare C/O: Sandeep Khare, M-487; Ashiyana, Kanpur Road, VTC: L D A Colony, PO: L D A Colony, Sub District: Lucknow, District: Lucknow, State: Uttar Pradesh,

PIN Code: 226012





आपका आधार क्रमांक / Your Aadhaar No. :

4448 1492 1768

मेरा आधार, मेरी पहचान



प्राची खरे Prachi Khare जन्म तिथि / DOB : 12/11/1992 महिला / Female

4448 1492 1768

मेरा आधार, मेरी पहचान





Idonh exist to undergo TMT tellos ilis Laking too much of a time.

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Dr. R. P. Rastogi M.B.B.S., M.D. (Path & Bact)







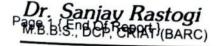
CLINIC:

1/4A, Vineet Khand, (Opp Jaipuria Management)

Gomti Nagar, Lucknow - 226 010

Ph.: 0522-4008184, 4308184 @ 8112323230 Mob.: 7618884441, 9450389932, 8177063877

Date : 23-Dec-2023	3			
Name : Mrs. PRACHI			4.00	. 01 14
Ref.By : APOLLO HE	ALTH		Age Sex	: 31 Yrs. : Female
Haemoglobin	13.3	gm%		· 14
Total Leucocyte Coun	6900	Cells/cumm.		0-11000
Differential Leucocyte	Count	001107 001111111.	400	0-11000
Polymorphs Lymphocytes Eosinophils Monocytes Basophils	57 34 03 06 00	% % % %	45 - 20 - 0 - 0 - 8 0 - 1	45 6 3
Erythrocyte Sedimento	tion Rate (Wintrobe)			
PCV Corrected ESR	14 41.9 04	mm in 1st Hr. cc% mm in 1st Hr.	0 - 1 40 - 0 - 1	52
Platelet Count	2.64	lakh/cumm.	1.5 -	4.0
Red Cells Count	4.59	million/cmm	3.90 to 4.60	
Absolute values				
MCH MCHC	87.5 27.8 31.8	fL pg gm /dl	77 - 1 27 - 1 31 - 1	31







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Date : 23-Dec-2023

: Mrs. PRACHI Name

Ref.By : APOLLO HEALTH Age

: 31 Yrs.

Sex : Female

General Blood Picture

RBCs RBCs are Normocytic & Normochromic.

No Normoblasts are seen.

WBCs TLC is within normal range.

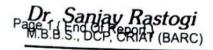
DLC shows normal counts.

No immature cells of WBC seen.

PLATELETS Platelets are adequate in number and morphology.

OTHERS No haemoparasites are seen.

IMPRESSION Normal GBP



M.B.B.S., DCP



Dr. R. P. Rastogi M.B.B.S., M.D. (Path & Bact)







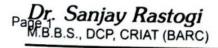
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Date : 23-Dec-2023				
Name : Mrs. PRACHI				
Ref.By : APOLLO HEALTH			Age	: 31 Yrs.
Urine Sugar (Fasting)	NIL		Sex	: Female
	INIL			
Urine Sugar (PP)	NIL			
KFT				
UREA CREATININE URIC ACID CALCIUM	16.2 1.19 4.8 9.5	mg % mg % mg % mg %	0.5 2 -	- 50 - 1.5 6 - 10.0
Plasma Glucose - F GOD-POD Method	98	mg/dl	70 -	110
Plasma Glucose - PP GOD POD Method	110	mg/dl	110	- 170
Blood Group & Rh	"B" Positive			
FT T&D				
Total Bilirubin Direct Bilirubin ndirect Bilirubin S.G.P.T S.G.O.T ALP	0.57 0.18 0.39 19 12 88	mg% mg% mg% IU/L IU/L	0.10 5 - 4 5 - 5	to 0.40 to 0.90
Serum Gamma G.T.	20	IU/L	11 -	







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Mob.: 7618884441, 9450389932, 8177063877







Date : 23-Dec-2023

Name : Mrs. PRACHI

Ref.By : APOLLO HEALTH

Age

: 31 Yrs.

Sex : Female

Urine Examination

PHYSICAL Colour Straw Turbidity Nil Deposit Nil Reaction Acidic *Specific Gravity 1.025 CHEMICAL Protein Nil Sugar Nil *Bile Salts Nil *Bile Pigments Nil Phosphate Nil MICROSCOPIC **Pus Cells** Nil /hpf **Epithelial Cells** 1-2 /hpf **Red Blood Cells** Nil /hpf Casts Nil Crystals Nil Others Nil

Page Sanjay Rastogi M.B.B.S., DCP, CRIAT (BARC) Dr. Smita Rastogi Contd... M.B.B.S., DCP



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Date : 23-Dec-2023

Name : Mrs. PRACHI

Ref.By : APOLLO HEALTH Age

: 31 Yrs

Sex

: Female

LIPID	PRO	ILE

COMMENTS

T-1-1 -- - 1 1

Triglycerides (TG) are the main diatery lipids. Cholestrol contitutes a small part of the dietary lipids, it is mostly synthesised in the liver. Both TG and Chol. are transported through the plasma by lipoprotiens (Chylomicrons, VLDL, LDL, IDL, HDL).

LDL is the major cholestrol particle in plasma and high levels are strongly implicated in the formation of atheroma.An increase in the LDL leads to hypercholestrolemia, and there fore a risk factor for IHD. LDL increases with age perticularly in females. Oestrogen lower LDL and raise HDL. Raised chol. in females is mostly due to disturbed thyroid function.

Increase in VLDL leads to hyperglyceridaemia. Raised TGs are associated with increased risk of CHD. Very high TGs increase the risk of Pancreatitis. Cholesterol is often raised due to Diabetes ,Renal disease, Diauretic or Betablocker therapy.

TYPES OF HYPERLIPOPROTEINEMIAS

TYPE 1: Normal choesterol

TYPE 3: Cholestrol increased

TG greatly raised

TG increased

TYPE 2a: Cholesterol increased

LDL increased

TYPE 4: Cholesterol normal /increased

VLDL increased

TG normal

TG increased

TYPE 2b Chol. increased

TYPE 5: Cholesterol increased

VLDL raised

LDL reduced

TG increased

VLDL increased

LDL increased

TG freatly incraesed

Sanjay Rastogi

B.B.S., DCP, CRIAT (BARC)

Contd...

Results, adhereing to W.H.O. and International Federation of Clinical Chemists Quality Control Standards. SAMPLE COLLECTION FACILITY AVAILABLE



Dr. R. P. Rastogi M.B.B.S., M.D. (Path & Bact)





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Ph.: 0522-4008184, 4308184 @ 8112323230

Mob.: 7618884441, 9450389932, 8177063877

Date : 23-Dec-2023

Name : Mrs. PRACHI

Ref.By : APOLLO HEALTH Age

: 31 Yrs.

Sex

: Female

THYROID TEST

Tri indathuranina (TO)	THE STATE OF THE S		
Tri-iodothyronine (T3)	1.38	nmol/L	0.50 to 2.50
Thyroxine (T4)	5.80	mcg/dL	5.0 to 12.5
Thyroid Stimulating Hormone (TSH)	3.52	mIU/ mI	0.3 to 6.0
			0.0 10 0.0

------COMMENTS

- 1) Primary hyperthyroidism is accompanied by elevated Serum T3 and T4 values along with depressed TSH levels.
- 2) Primary Hypothyroidism is accompanied by depressed serum T3 and T4 values and elevated serum TSH levels.
- 3) Normal T4 levels accompanied by high T3 levels are seen in patients with T3 thyrotoxicosis.
- 4) Slightly elevated T3 levels may be found in pregnancy and esterogen therapy, while depressed levels maybe encountered in severe illness, malnutrition, renal failure and during therapy with drugs like propanlol and propylthiouracil.
- 5) Elevated TSH levels may also be indicative of TSH secreting Pituitary Tumour.

Sanjay Rastogi B.S., DCP, CRIAT (BARC) M.B.B.S., DCF



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1/4A, Vineet Khand, (Opp Jaipuria Management)

Gomti Nagar, Lucknow - 226 010

Ph.: 0522-4008184, 4308184 @ 8112323230 Mob.: 7618884441, 9450389932, 8177063877







Date

: 23-Dec-2023

Name

: Mrs. PRACHI

Ref.By

: APOLLO HEALTH

Age

: 31 Yrs.

Sex

: Female

Glycocylated Haemoglobin

Glycosylated Haemoglobin -----

5.8

4.5 TO 6.0

INTERPRETATION AND COMMENTS

NON DIABETIC:

4.5 to 6.0 %

GOOD CONTROL .

6.0 to 7.0

FAIR CONTROLLED 7.0 AND 8.0

UNCONTROLLED

8.0 AND ABOVE

Glycosylated heamoglobin is the adducted glucose in the heamoglobin of the red blood cells, this adduction is stable for the life time of the RBC (i.e 120 days). There fore the measure of glycosylated haemoglobin reflects the average blood glucose concentration over the preseding several weeks. The sudden change in blood glucose level would not effect the glycosylated haemoglobin level ,which serves as a better marker of long term metabolic control and the efficacy of therapy.

Page 5 Sanjake Rastogi M.B.B.S., DCP, CRIAT (BARC) Dr. Smita



Dr. R. P. Rastogi M.B.B.S., M.D. (Path & Bact)









1/4A, Vineet Khand, (Opp Jaipuria Management)

Gomti Nagar, Lucknow - 226 010

Ph.: 0522-4008184, 4308184 98112323230

Mob.: 7618884441, 9450389932, 817706387

TEST REQUEST ID: 012312230031

:Mrs. PRACHI NAME

AGE/SEX

REFERRED BY

:31 YRS/FEMALE

: Apollo Health and Lifestyle Limited, BARCODE NO

SAMPLE DATE

SAMPLE REC. DATE

REPORTED DATE

:23/Dec/2023 10:20AM

:23/Dec/2023 10:20AM

:23/Dec/2023 12:34PM

:01230031

XRAY CHEST PA

Trachea is central in position.

Bilateral lung fields are normally aerated.

Both hilar shadows are normal.

Both C.P. angles are clear.

Cardiac shadow is within normal limits.

Bony cage appears normal.

OPINION: NORMAL STUDY.

Please correlate clinically.

*** End Of Report ***

Dr. Sanjay Rastogi M.B.B.S., DCP, CRIAT (BARC)

DR. PANKAJ UPADHYAYA

Dr. Smita Rastogi M.B.B.S., DCP

oternational Federation of Clinical Chemists Quality Control Standards. Results, adhereing to W.H.O. and **<u>ne</u>ratio osis**tity available

Report needs clinicopathological correlation ◆ Not for Medico Legal Purpose

Print DateTime: 23/12/2023 5:26 mmail: mpdcgn@gmail.com.absyrk.snline reports - www.modernpath.in ♦ Please ask for your computerized bill ♦ Pay only the printed collection charges



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Gomti Nagar, Lucknow - 226 010

Ph.: 0522-4008184, 4308184 9 8112323230

Mob.: 7618884441, 9450389932, 8177063877





TEST REQUEST ID: 012312230031

NAME AGE/SEX

REFERRED BY

:Mrs. PRACHI

:31 YRS/FEMALE

SAMPLE DATE SAMPLE REC. DATE

REPORTED DATE

: Apollo Health and Lifestyle Limited, BARCODE NO

:23/Dec/2023 10:20AM

:23/Dec/2023 10:20AM :23/Dec/2023 01:18PM

:01230031

USG WHOLE ABDOMEN-FEMALE

Liver: is normal in size (137 mm). Parenchymal echogenicity is normal. No focal echovariant lesion is seen. Intrahepatic biliary radicles are not dilated.

Gall Bladder: is well distended. Lumen is anechoic. Wall is of normal thickness.

CBD: is normal in diameter. Portal vein is normal in diameter.

Pancreas: is normal in size, shape and echotexture. No focal echovariant lesion is seen. Pancreatic duct is not dilated.

Spleen: is normal in size (114 mm), shape and echotexture. No focal echovariant lesion is seen. Splenic vein is normal.

Both Kidneys: are normal in size (RK-93 x 38 mm & LK - 96 x 42 mm), shape. position and excursion. Parenchymal echogenicity and echotexture is normal with maintained corticomedullary differentiation. No mass, cyst, or calculi is seen. Pelvicalyceal systems are not dilated. Ureters are not dilated.

Urinary bladder: is well distended. Lumen is anechoic. Wall is of normal thickness. No mass or calculus is seen.

Uterus is normal in size (64 x 42 x 33 mms), shape and echotexture. It is anteverted. Myometrium is homogenous. No focal mass is seen. Endometrial thickness is normal.

Dr. Sanjay Rastogi M.B.B.S., DCP, CRIAT (BARC)

DR. PANKAJ UPADHYAYA

Dr. Smita Rastogi





Dr. R. P. Rastogi M.B.B.S., M.D. (Path & Bact)







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Gomti Nagar, Lucknow - 226 010

Ph.: 0522-4008184, 4308184 • 8112323230 Mob.: 7618884441, 9450389932, 8177063877

SAMPLE DATE

: 24/12/2023

NAME

:Mrs Prachi Khare

AGE/SEX

31/YRS/FEMALE

REFERRED BY

:Apollo Health

Test Name

Result

Bio. Ref. Range

Unit

CLINICAL PATHOLOGY TEST REPORT

PAP

GROSS:

Smears collected from the ecto and the endo cervix. Slides prepared and stained with PAP stain.

MICROSCOPIC:

Smears studied show adequte representing material, comprising mainly of squamous epithelial cells. These cells have abundant pale pink eosinophilic cytoplasm and normal appearing round to oval nuclei. Smears from the endocervix show fair number of "stripped nuclei" of the ednometrial cells. Occasional small cluster of the endometrial cells are seen. These cells have indistinct cellular borders, scanty basophilic cytoplasm and oval nuclei with clumped chromatin. Smears from both the sites are mildly infiltrated with inflammatory cells, mostly polymorphs

IMPRESSION:

SMEARS SUGGESTIVE OF NORMAL PAP SMEAR

WITH MODERATE INFLAMMATION

*** End Of Report ***

Dr. Sanjay Rastogi M.B.B.S., DCP, CRIAT (BARC) Dr. Smita Rastogi M/B.B.S., DCP



Dr. R. P. Rastogi M.B.B.S., M.D. (Path & Bact)







CLINIC:

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Gomti Nagar, Lucknow - 226 010

Ph.: 0522-4008184, 4308184 • 8112323230 Mob.: 7618884441, 9450389932, 8177063877

> Patient name: Mrs Prachi Ref By. Apollo Health

Age/Sex 31/F 23/12/2023

E.C.G. REPORT

1. Rhythm

Sinus, Regular

2. Atrial Rate

:

78/mt

3. Ventricular Rate

:

78/mt

4. P - Wave

:

Normal

5. P R Interval

:

Normal

6. QRS

:

Normal

R/S Ratio

Axis

•

Normal

Configuration

:

Normal

7. Q T c Interval

:

Normal

8. S-T Segment

:

Normal

9. T-Wave

:

Normal

FINAL IMPRESSION

E.C.G. is within normal limits.

Signature of Doctor 44559

Dr. Sanjay Rastogi
M.B.B.S., DCP, CRIAT (BARC)

Dr. Smita Rastogi

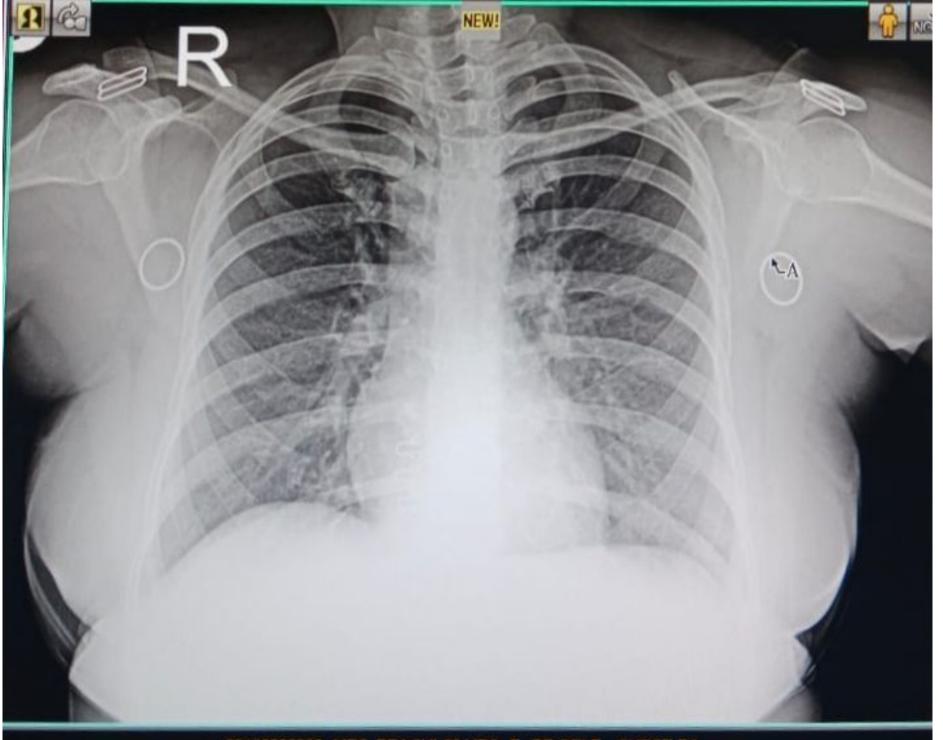
M.B.B.S., DCP

Results, adhereing to W.H.O. and International Federation of Clinical Chemists Quality Control Standards.

SAMPLE COLLECTION FACILITY AVAILABLE

Report needs clinicopathological correlation → Not for Medico Legal Purpose

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23122302932 MRS PRACHI 00 YRS F DR SELF CHEST PA 12/23/2023 MODERN PATHOLOGY & DIAGNOSTIC CENTRE GOMTI NAGAR LUCKNOW