

MER- MEDICAL EXAMINATION REPORT

Date of Examination	8/7/2022		
NAME	RAMANRAYA SWAMI YADAV		
AGE	49	Gender	m
HEIGHT(cm)	167	WEIGHT (kg)	83
B.P.	120/80		
ECG	Normal		
X Ray	Normal		
Vision Checkup	Wig. Power. +0.75. C.V.N.		
Present Ailments	NO		
Details of Past ailments (If Any)	NO,		
Comments / Advice : She /He is Physically Fit	MEDICINE FIT		



Dr. Smriti Rastogi
 M.B.B.S. D.C.P.
 Reg. No. 37376
 Signature with Stamp of Medical Examiner

To
The Manager
Modern Pathology and Diagnostic Center
Gumbir Nagar, Lko.

08/07/23

Dear Sir/Madam

I am Ramashraya Singh Yadava, employee of Bank of Baroda, have come for medical health checkup. I am ready for Health checkup with TMT in place of 2DECTD.

Yours faithfully,

रामशरय

Ramashraya Singh Yadava

Head Lab-in

BOB, Tolo.





MODERN PATHOLOGY & DIAGNOSTIC CENTRE

DIAGNOSTIC CENTRE

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



TEST REQUEST ID :012307080029	SAMPLE DATE	:08/Jul/2023 09:27AM
NAME :Mr. RAMASHRAYA SINGH YADAV	SAMPLE REC. DATE	:08/Jul/2023 09:27AM
AGE/SEX :49 YRS/MALE	REPORTED DATE	:08/Jul/2023 12:22PM
REFERRED BY : Apollo Health and Lifestyle Limited,	BARCODE NO	:01080029

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

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

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Date : 08-Jul-2023
Name : **Mr. RAMASHRAYA SINGH YADAVA** Age : 49 Yrs.
Ref.By : APOLLO HEALTH Sex : Male

Haemoglobin **13.1** gm% 14 - 17

Total Leucocyte Count **6500** Cells/cumm. 4000-11000

Differential Leucocyte Count			
Polymorphs	62	%	45 - 70
Lymphocytes	28	%	20 - 45
Eosinophils	05	%	0 - 6
Monocytes	05	%	0 - 8
Basophils	00	%	0 - 1

Erythrocyte Sedimentation Rate (Wintrobe)			
ESR	06	mm in 1st Hr.	0 - 9
PCV	42.0	cc%	40 - 52
Corrected ESR	02	mm in 1st Hr.	0 - 9

Platelet Count **1.44** lakh/cumm. 1.5 - 4.0

Red Cells Count **4.98** million/cmm 3.90 to 5.80

Absolute values			
MCV	84.5	fL	77 - 97
MCH	26.3	pg	27 - 31
MCHC	31.2	gm /dl	31 - 34

Plasma Glucose - F **100** mg/dl 70 - 110
GOD-POD Method

Plasma Glucose - PP **127** mg/dl 110 - 170
GOD POD Method

Blood Group & Rh "B" Positive

Serum Gamma G.T. **36** IU/L 11 - 50

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Date : 08-Jul-2023

Name : **Mr. RAMASHRAYA SINGH YADAVA**

Age : 49 Yrs.

Ref.By : APOLLO HEALTH

Sex : Male

KFT

UREA	24.1	mg %	15 - 50
CREATININE	1.37	mg %	0.5 - 1.5
URIC ACID	5.6	mg %	2 - 7
CALCIUM	9.7	mg %	8.8 - 10.0

LFT T&D

Total Bilirubin	0.61	mg%	0.2 - 1.0
Direct Bilirubin	0.28	mg%	0.0 to 0.40
Indirect Bilirubin	0.33	mg%	0.10 to 0.90
S.G.P.T	53	IU/L	5 - 40
S.G.O.T	46	IU/L	5 - 50
ALP	90	IU/L	40 to 129

Urine Sugar (Fasting) NIL

Urine Sugar (PP) NIL

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

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Contd... (M.B.B.S., DCP)

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Date : 08-Jul-2023

Name : **Mr. RAMASHRAYA SINGH YADAVA**

Age : 49 Yrs.

Ref.By : APOLLO HEALTH

Sex : Male

PSA

PSA 0.96 ng/ml
Electro CLIA

Expected values and Comments

NORMAL :	0.00 to 4.0
Less than 40 years	0.6 to 1.3
41 to 50 Years	0.6 to 2.0
51 to 60 Years	0.8 to 3.0
61 to 70 Years	1.0 to 4.0
Over 70 years	1.6 to 4.5

- * PSA is a reliable Tumor Marker for already diagnosed Prostatic Carcinomas .Though present in many tissues including breast, salivary glands etc.,
- * PSA production is the glandular epithelium of the prostate gland. PSA is,therefore,remarkably specific for the prostate.
- * Baseline levels measured prior to therapeutic intervention and followed later by serial, periodical measurements will predict the outcome of the therapy. It also helps in early discovery of recurrences, relapses and metastases.
- * In general, Tumour Marker levels are directly related to the tumour mass and the stage of the cancer.
- * However, it is the rate of change of the tumour marker level which is more important, rather than its absolute value. A 50 % change may be considered clinically significant.
- * It must be emphasized that PSA may also be elevated in Benign Prostatic Hyperplasia and Inflammatory conditions of the surrounding Genito-Urinary Tract.
- * PSA may be done along with Free PSA that provides additional information

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Date	: 08-Jul-2023	Age	: 49 Yrs.
Name	: Mr. RAMASHRAYA SINGH YADAVA	Sex	: Male
Ref.By	: APOLLO HEALTH		

LIPID PROFILE

Triglycerids	253	mg%	70 - 190
S. Cholestrol S.	178	mg%	130 - 230
S. HDL Cholestrol	44.1	mg%	35 - 75
S. LDL Cholestrol	83.3	mg%	75 - 150
VLDL	50.6	mg%	0 - 34
Chol / HDL factor	4.04	Ratio	
LDL / HDL Factor	1.89		

COMMENTS

- * Triglycerides (TG) are the main dietary lipids. Cholesterol constitutes a small part of the dietary lipids, it is mostly synthesised in the liver. Both TG and Chol. are transported through the plasma by lipoproteins (Chylomicrons, VLDL, LDL, IDL, HDL).
- * LDL is the major cholesterol particle in plasma and high levels are strongly implicated in the formation of atheroma. An increase in the LDL leads to hypercholesterolemia, and therefore a risk factor for IHD. LDL increases with age particularly 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, Diuretic or Betablocker therapy.

TYPES OF HYPERLIPOPROTEINEMIAS

TYPE 1: Normal cholesterol TG greatly raised	TYPE 3: Cholesterol increased TG increased
TYPE 2a: Cholesterol increased LDL increased TG normal	TYPE 4: Cholesterol normal /increased VLDL increased TG increased
TYPE 2b Chol. increased VLDL raised TG increased LDL increased	TYPE 5: Cholesterol increased LDL reduced VLDL increased TG greatly increased

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Name	: Mr. RAMASHRAYA SINGH YADAVA	Sex	: Male
Ref.By	: APOLLO HEALTH		

THYROID TEST

Tri-iodothyronine (T3)	1.60	nmol/L	0.50 to 2.50
Thyroxine (T4)	8.10	mcg/dL	5.0 to 12.5
Thyroid Stimulating Hormone (TSH)	3.57	mIU/ ml	0.3 to 6.0

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 estrogen therapy, while depressed levels maybe encountered in severe illness, malnutrition, renal failure and during therapy with drugs like propranolol and propylthiouracil.
- 5) Elevated TSH levels may also be indicative of TSH secreting Pituitary Tumour.

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Date : 08-Jul-2023

Name : **Mr. RAMASHRAYA SINGH YADAVA**

Age : 49 Yrs.

Ref.By : APOLLO HEALTH

Sex : Male

Urine Examination

PHYSICAL

Colour	Straw
Turbidity	Nil
Deposit	Nil
Reaction	Acidic
*Specific Gravity	1.020

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	

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AGE/SEX :00 YRS/MALE	REPORTED DATE	:08/Jul/2023 12:22PM
REFERRED BY : Apollo Health and Lifestyle Limited,	BARCODE NO	:01080029

USG WHOLE ABDOMEN-MALE

Liver: is normal in size (144 mm). **Parenchymal echogenicity is increased.** 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 (105 mm), shape and echotexture. No focal echovariant lesion is seen. Splenic vein is normal.

Both Kidneys: are normal in size (RK- 95 x 46 mm & LK – 102 x 45 mm), shape, position and excursion. Parenchymal echogenicity and echotexture is normal with maintained corticomedullary differentiation. No mass, calculi is seen. **A cortical cyst of 22 x 13 mm in size is seen in left kidney at lower pole.** 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.

Prostate: is enlarged in size (35 x 37 x 38 mms, wt = 26.5 gms), shape and

DR. PANKAJ UPADHYAYA
Consultant Radiologist

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

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echotexture. No focal echovariant lesion is seen. Prostatic capsule appears to be intact. Median lobe is not projecting in UB lumen. Both seminal vesicles appear normal.

Both iliac fossae are clear. No obvious bowel pathology is noted.
There is no free fluid in peritoneal cavity.

OPINION:

- GRADE-I FATTY LIVER
- LEFT RENAL CORTICAL CYST
- GRADE-1 BPH

*** End Of Report ***

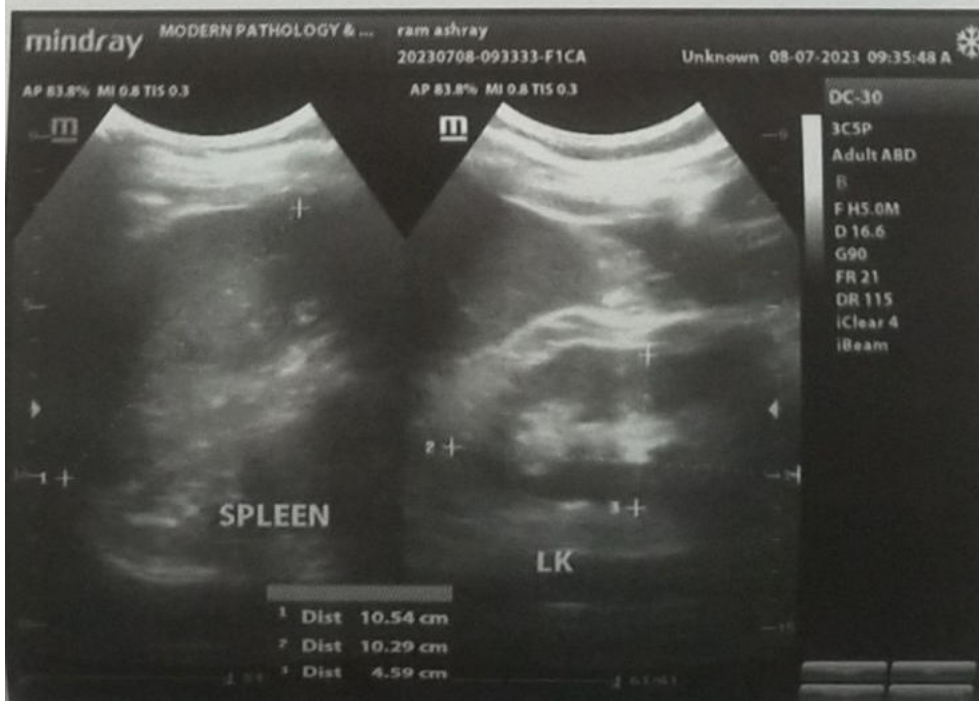
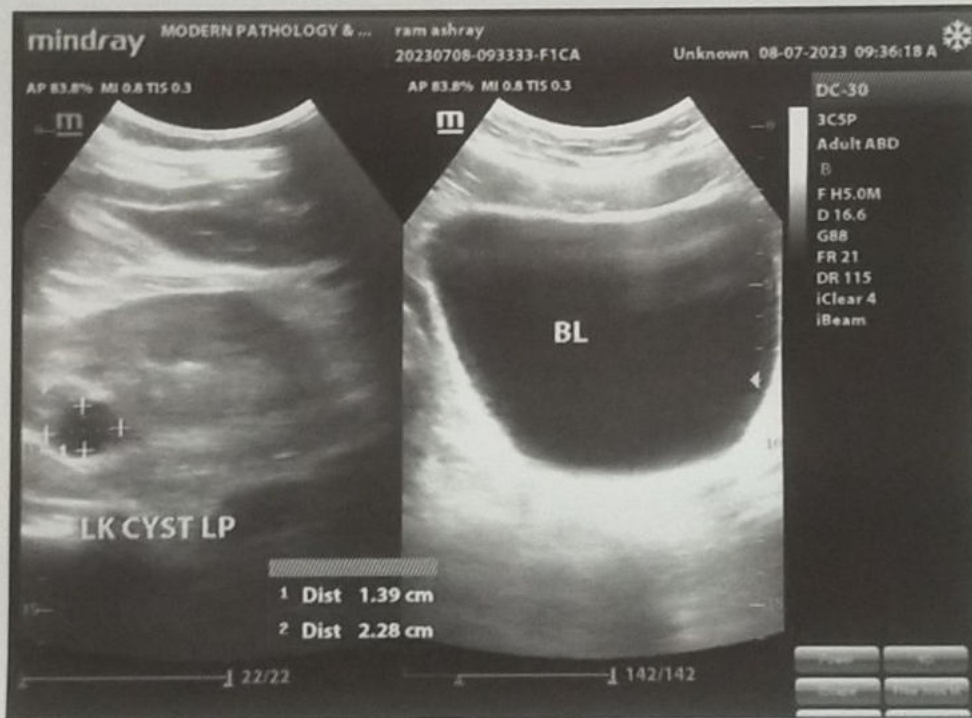
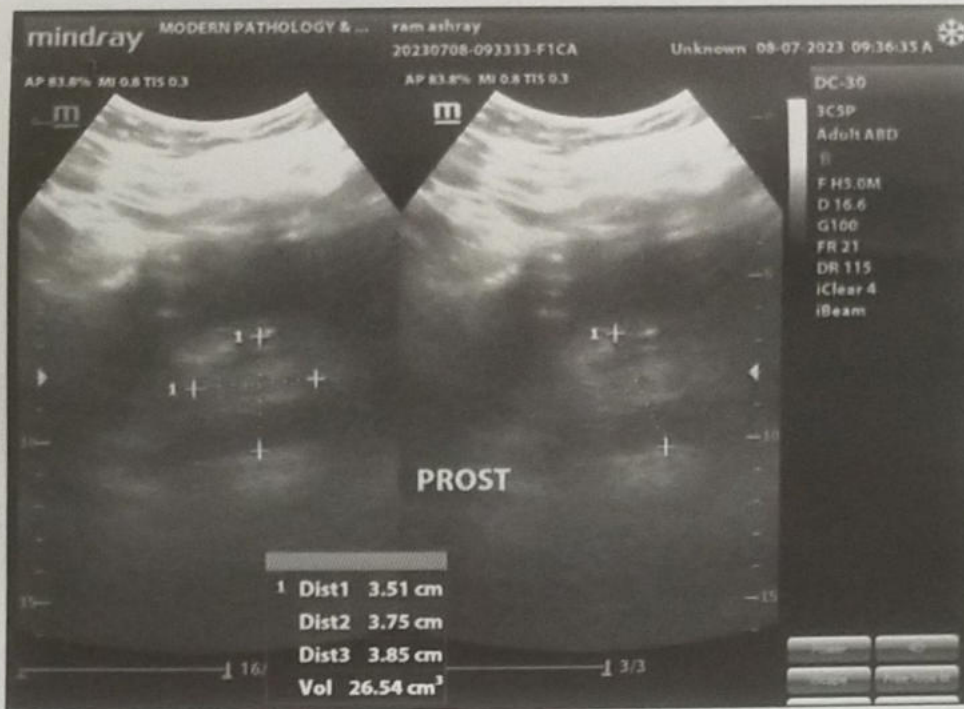
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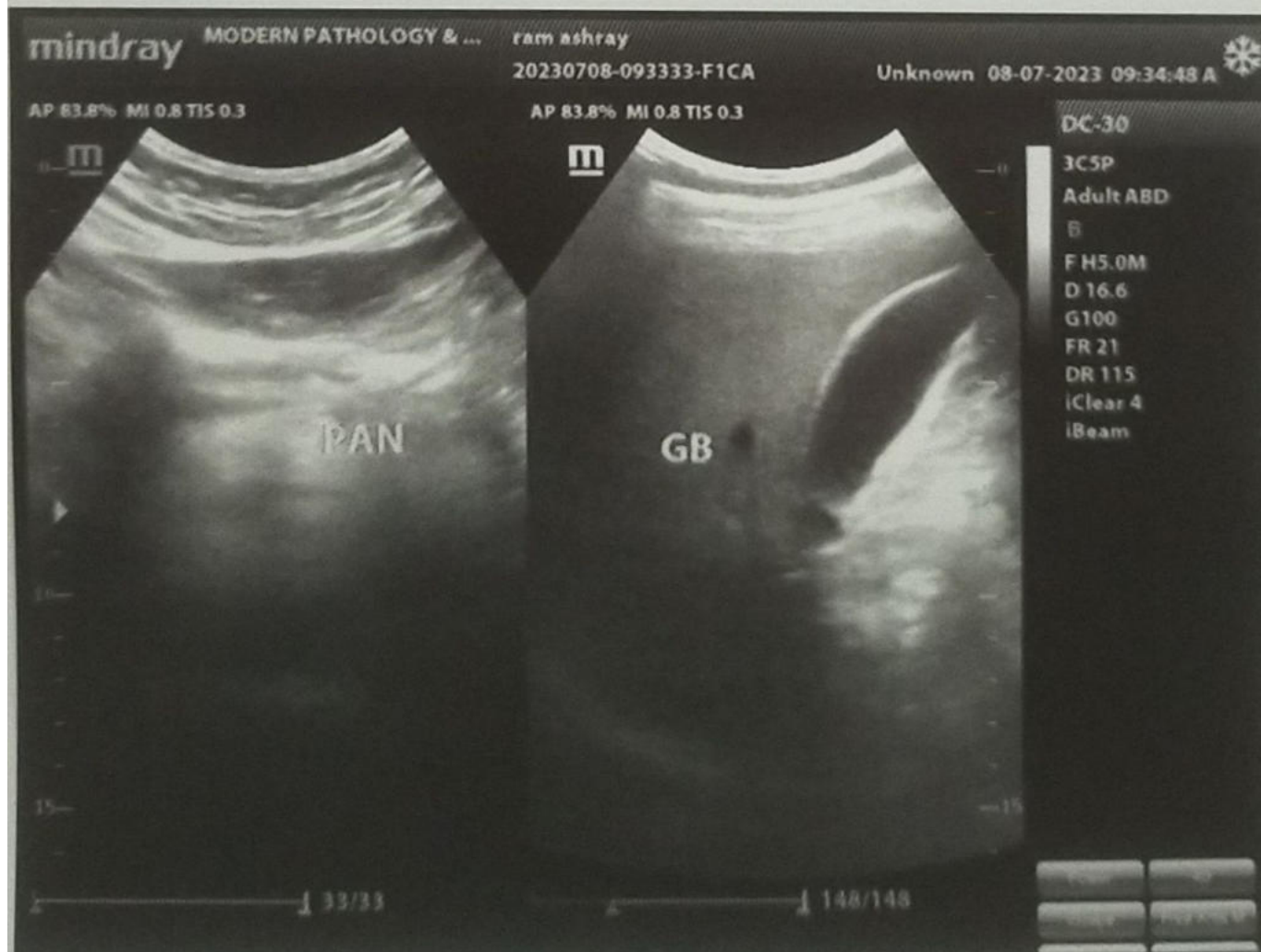
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Print Date Time: 08/07/2023 12:22 PM
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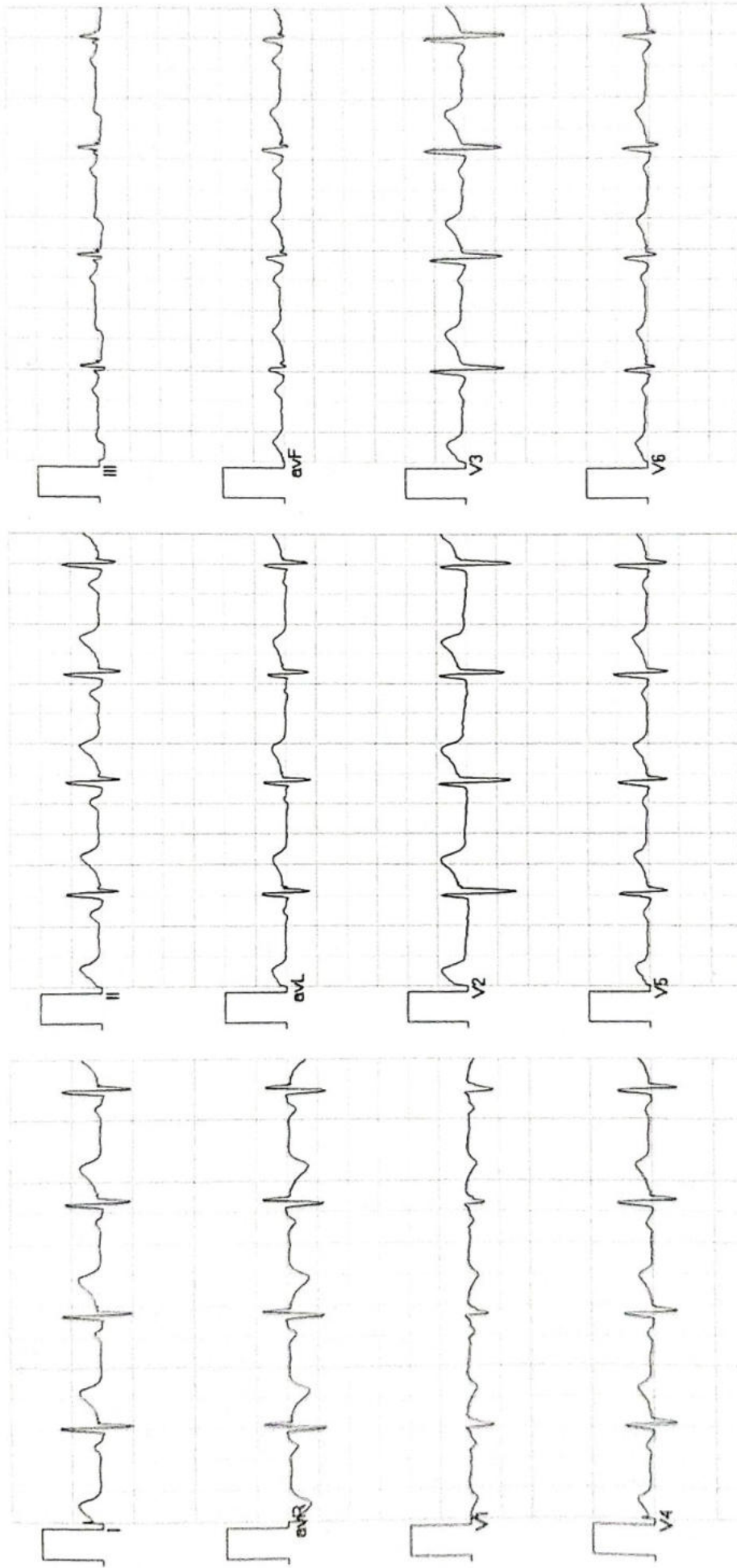
Modern Pathology And Diagnostic Centre

80 / ramashraya singh yadava / 49 Yrs / M / Non Smoker

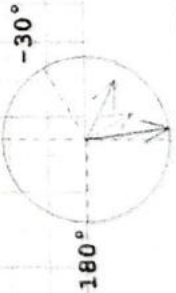
Heart Rate : 82 bpm / Tested On : 08-Jul-23 10:55:43 / HF 0.05 Hz - LF 100 Hz / Notch 50 Hz / Sn 1.00 Cm/mV / Sw 25 mm/s

/ Refd By : APOLLO HEALTH

ECG



Neeraj
 NEERAJ MOHAN MD
 REG. NO. 44559



Axis
 90° R 82° T 26° P 60°

Vent Rate : 82 bpm
 PR Interval : 152 ms
 QRS Duration: 74 ms
 QT/QTc Int : 360/399 ms
 P-QRS-T axis: 60.00 • 62.00 • 26.00 •

Allengers ECG (Pisces)(PIS215191030)



ramashraya singh yadava / 49 Yrs / M / 0 Cms / 0 Kg
 Date: 08 - 07 - 2023 Refd By : APOLLO HEALTH Examined By:

Stage	Time	Duration	Speed(Kmph)	Elevation	METs	Rate	% THR	BP	RPP	PVC	Comments
Supine	00:04	0:04	00.0	00.0	01.0	081	47 %	126/80	102	00	
Standing	00:08	0:04	00.0	00.0	01.0	081	47 %	126/80	102	00	
HV	00:13	0:05	00.0	00.0	01.0	081	47 %	126/80	102	00	
ExStart	00:18	0:05	02.7	10.0	01.1	082	48 %	126/80	103	00	
BRUCE Stage 1	03:18	3:00	02.7	10.0	04.7	126	74 %	132/86	166	00	
BRUCE Stage 2	06:18	3:00	04.0	12.0	07.1	151	88 %	138/90	208	00	
PeakEx	06:29	0:11	05.5	14.0	07.3	153	89 %	140/92	214	00	
Recovery	07:29	1:00	00.0	00.0	01.2	129	75 %	136/90	175	00	
Recovery	08:29	2:00	00.0	00.0	01.0	113	66 %	130/86	146	00	
Recovery	09:29	3:00	00.0	00.0	01.0	103	60 %	128/84	131	00	
Recovery	09:46	3:17	00.0	00.0	01.0	104	61 %	128/84	133	00	

FINDINGS :

Exercise Time : 06:11
 Max HR Attained : 153 bpm 89% of Target 171
 Max BP Attained : 140/92 (mm/Hg)
 Max WorkLoad Attained : 7.3 Fair response to induced stress
 Test End Reasons : Test Complete

REPORT :

CONCLUSIONS:

1. STRESS TEST IS NEGATIVE FOR EXERCISE INDUCED ISCHAEMIC HEART DISEASE.

(Signature)
 Dr. A. K. JAIN
 Reg. No. 44545G
 D.M.D. (N)

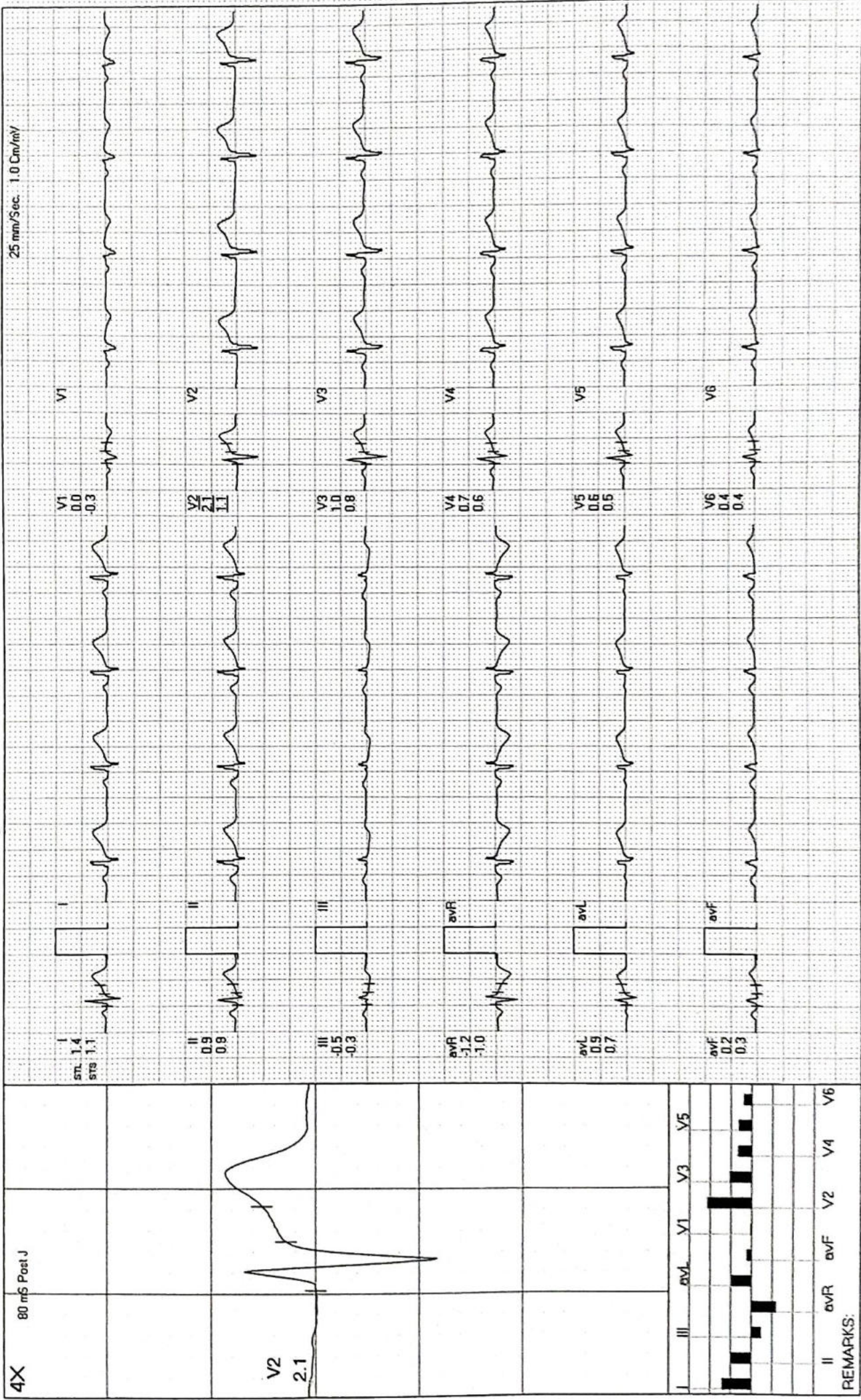
MODERN PATHOLOGY AND DIAGNOSTIC

ramashraya singh yadava / 49 Yrs / M / 0 Cms / 0 Kg / HR : 82

ExStart



Date: 08 - 07 - 2023 METS: 1.1/82 bpm 48% of THR BP: 126/80 mmHg Combined Medians/BLC On/ Natch On/ HF 0.05 Hz/LF 35 Hz ExTime: 00:00 2.7 Kmph, 10.0%



REMARKS:

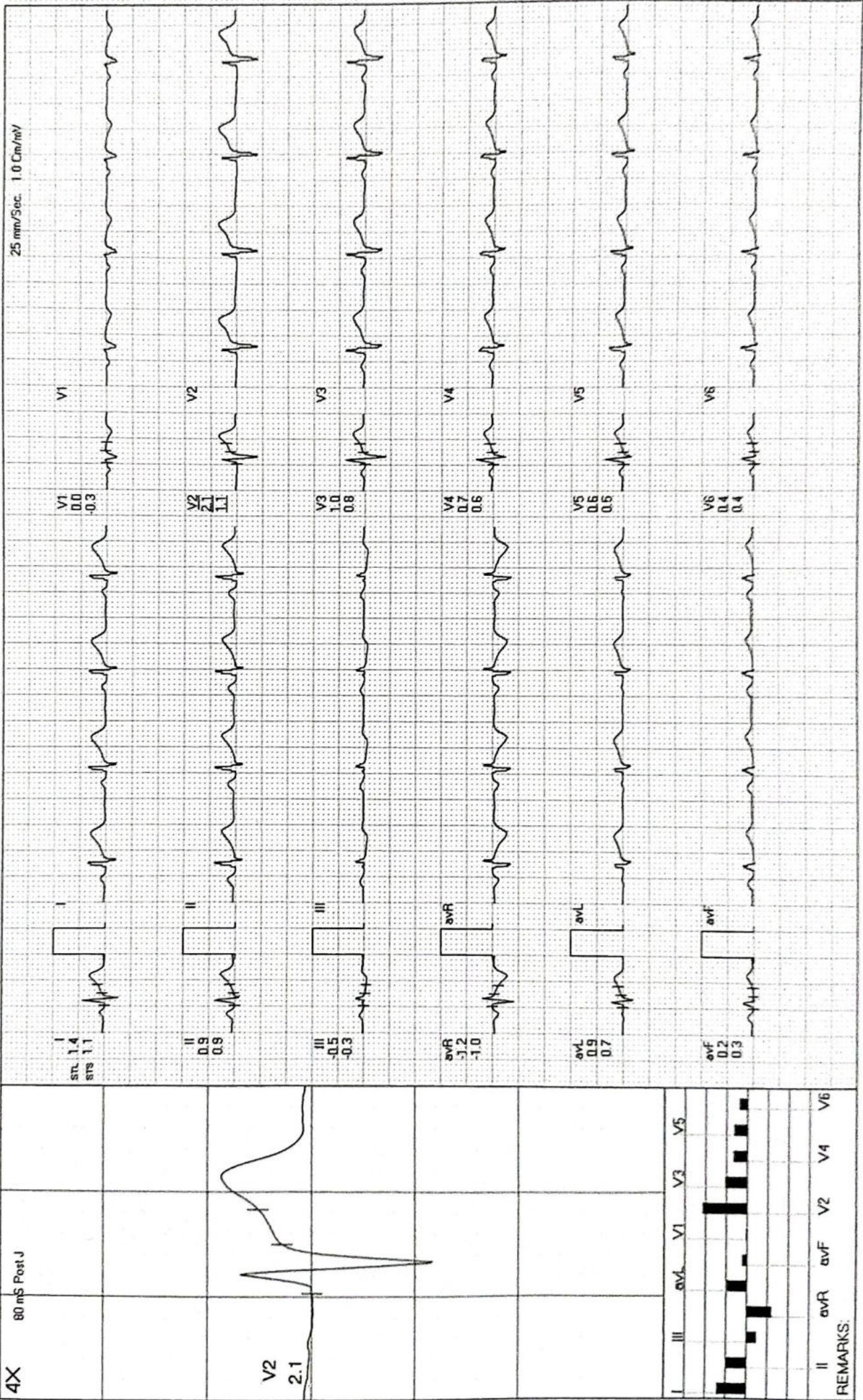
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ramashraya singh yadava / 49 Yrs / M / 0 Cms / 0 Kg / HR : 81

BRUCE:HV(0:05)



Date: 08-07-2023 METS: 1.0/81 bpm 47% of THR BP: 126/80 mmHg Combined Medians/BLC On/ HF 0.05 Hz/LF 35 Hz ExTime: 00:00 0.0 Kmph 0.0%



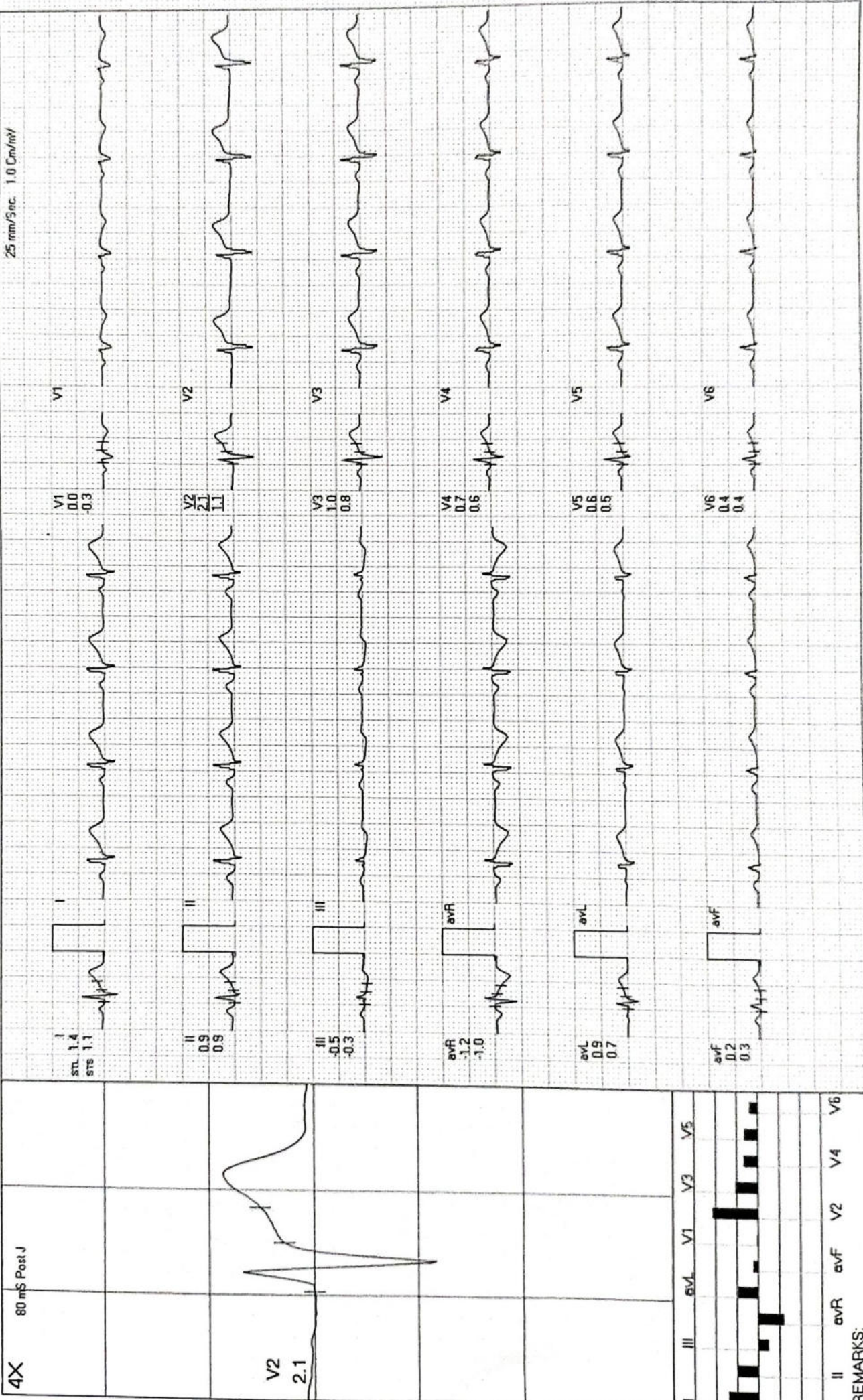
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ramashraya singh yadava / 49 Yrs / M / 0 Cms / 0 Kg / HR : 81

BRUCE:Supine(0:05)

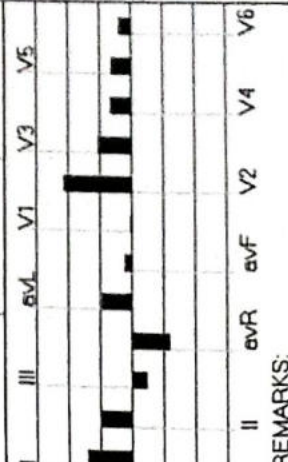


Date: 08-07-2023 METS: 1.0/81 bpm 47% of THR BP: 126/80 mmHg Combined Medians/BLC On/ HF 0.05 Hz/LF 35 Hz ExTime: 00:00 0.0 Kmph, 0.0%



4X 80 mS Post J

V2 2.1



REMARKS:

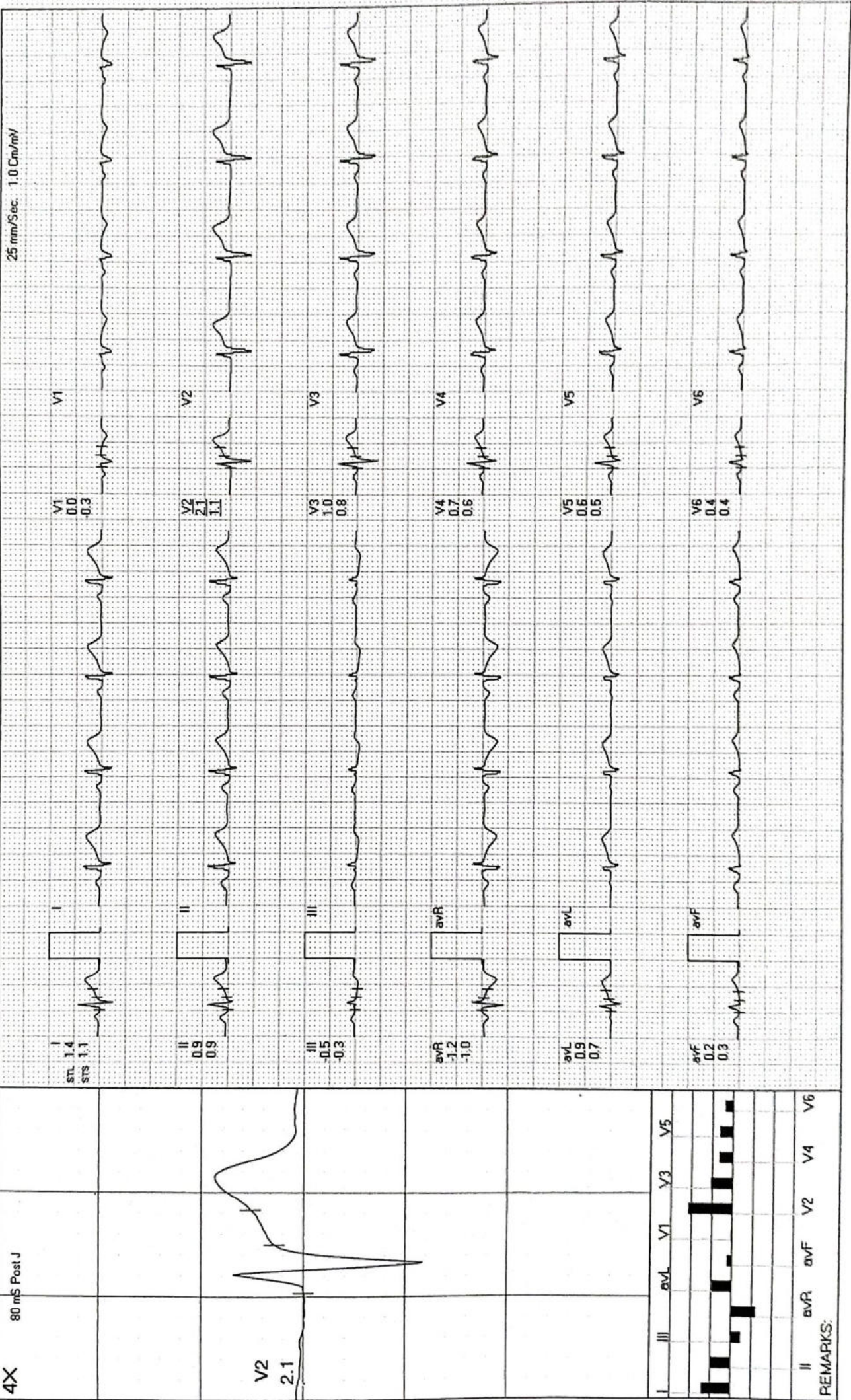
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ramashraya singh yadava / 49 Yrs / M / 0 Cms / 0 Kg / HR : 81

BRUCE:Standing(0:05)



Date: 08 - 07 - 2023 METS: 1.0/81 bpm 47% of THR BP: 126/80 mmHg Combined Medians/BLC On/ HF 0.05 Hz/LF 35 Hz ExTime: 00:00 0.0 Kmph, 0.0%



REMARKS:
II avR avF V2 V4 V6

MODERN PATHOLOGY AND DIAGNOSTIC

ramashraya singh yadava / 49 Yrs / M / 0 Cms / 0 Kg / HR : 126

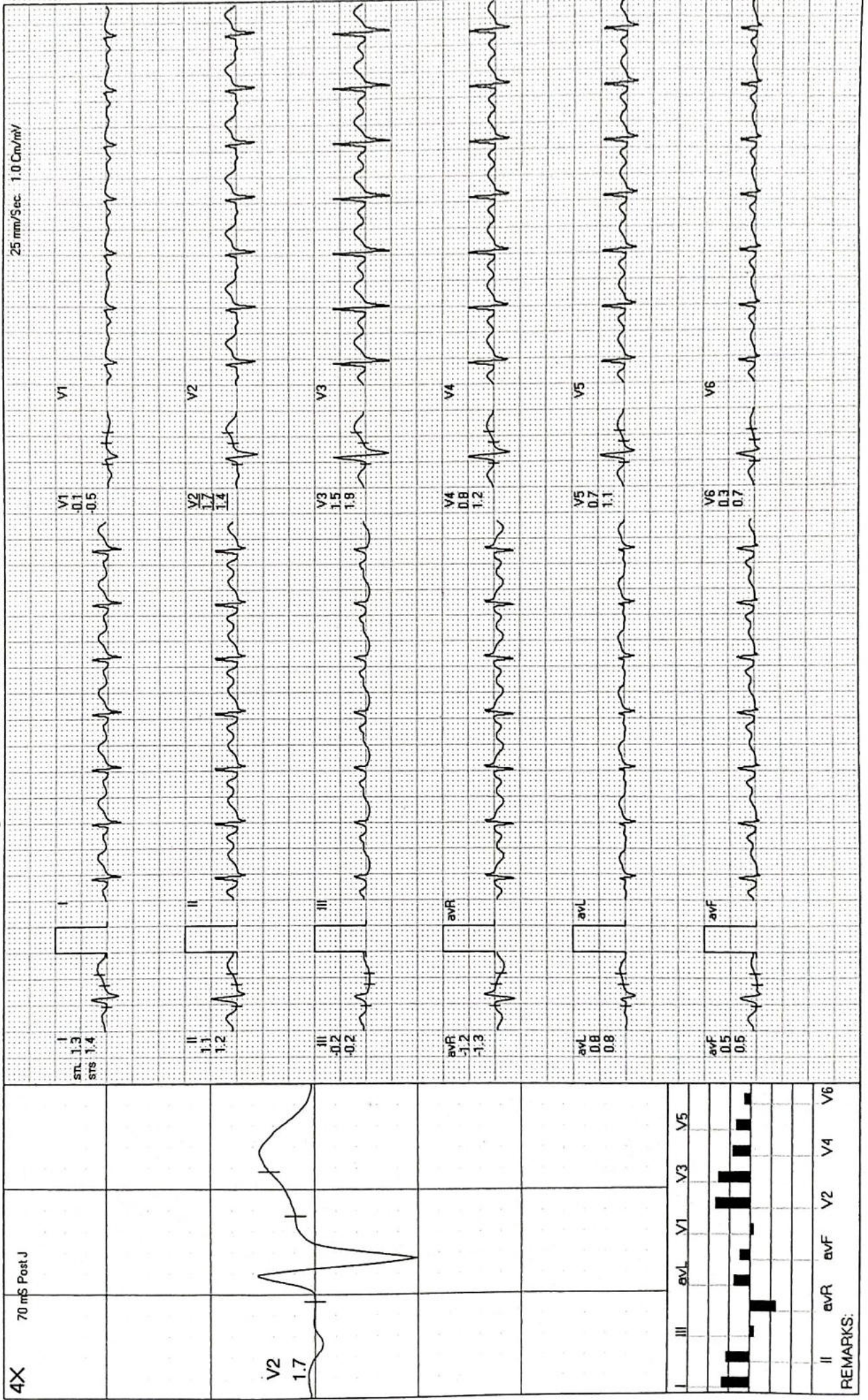
BRUCE: Stage 1(3:00)



Date: 08 - 07 - 2023

METS: 4.7 / 126 bpm 74% of THR BP: 132/86 mmHg Combined Medians/ BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

ExTime: 03:00 2.7 Kmph, 10.0%



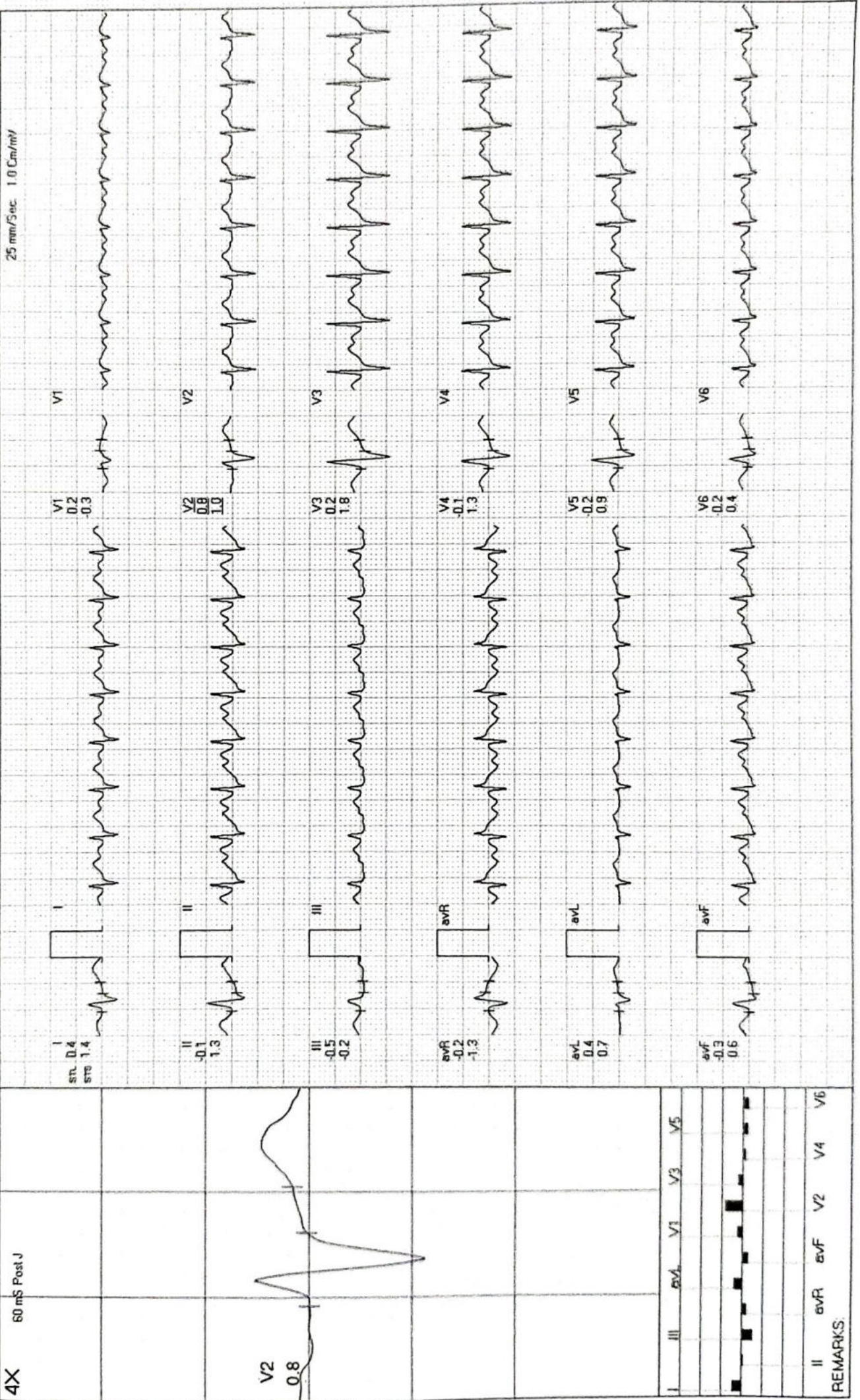
MODERN PATHOLOGY AND DIAGNOSTIC

BRUCE: Stage 2(3:00)



ramashraya singh yadava / 49 Yrs / M / 0 Cms / 0 Kg / HR : 151

Date: 08-07-2023 METS: 7.1/151 bpm 88% of THR BP: 138/90 mmHg Combined Medians/BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz ExTime: 06:00 4.0 Kmph, 12.0%



REMARKS:

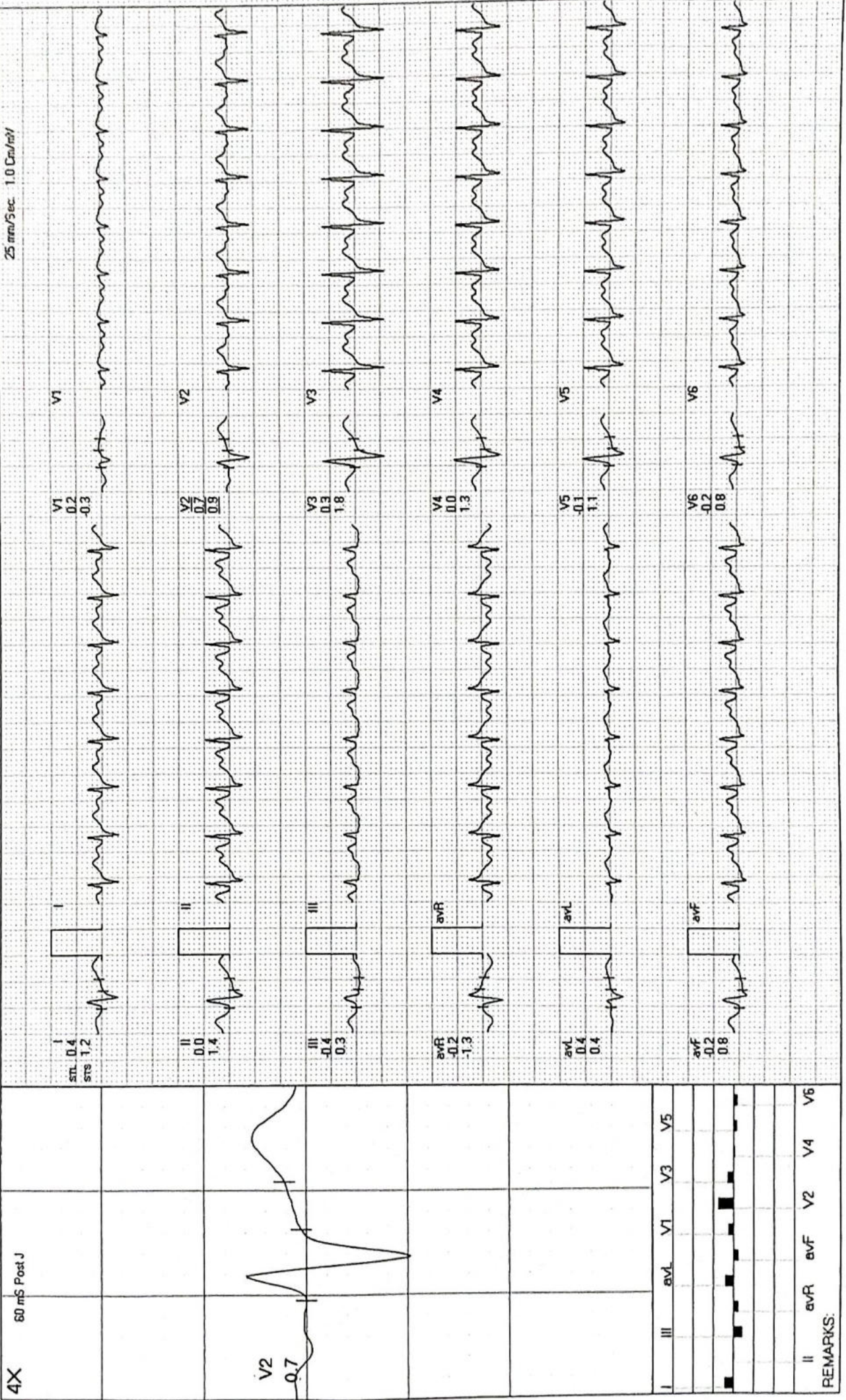
MODERN PATHOLOGY AND DIAGNOSTIC

ramashraya singh yadava / 49 Yrs / M / 0 Cms / 0 Kg / HR : 153

PeakEx



Date: 08 - 07 - 2023 METS: 7.3/ 153 bpm 89% of THR BP: 140/92 mmHg Combined Medians/BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz ExTime: 06:11 5.5 Kmph, 14.0%



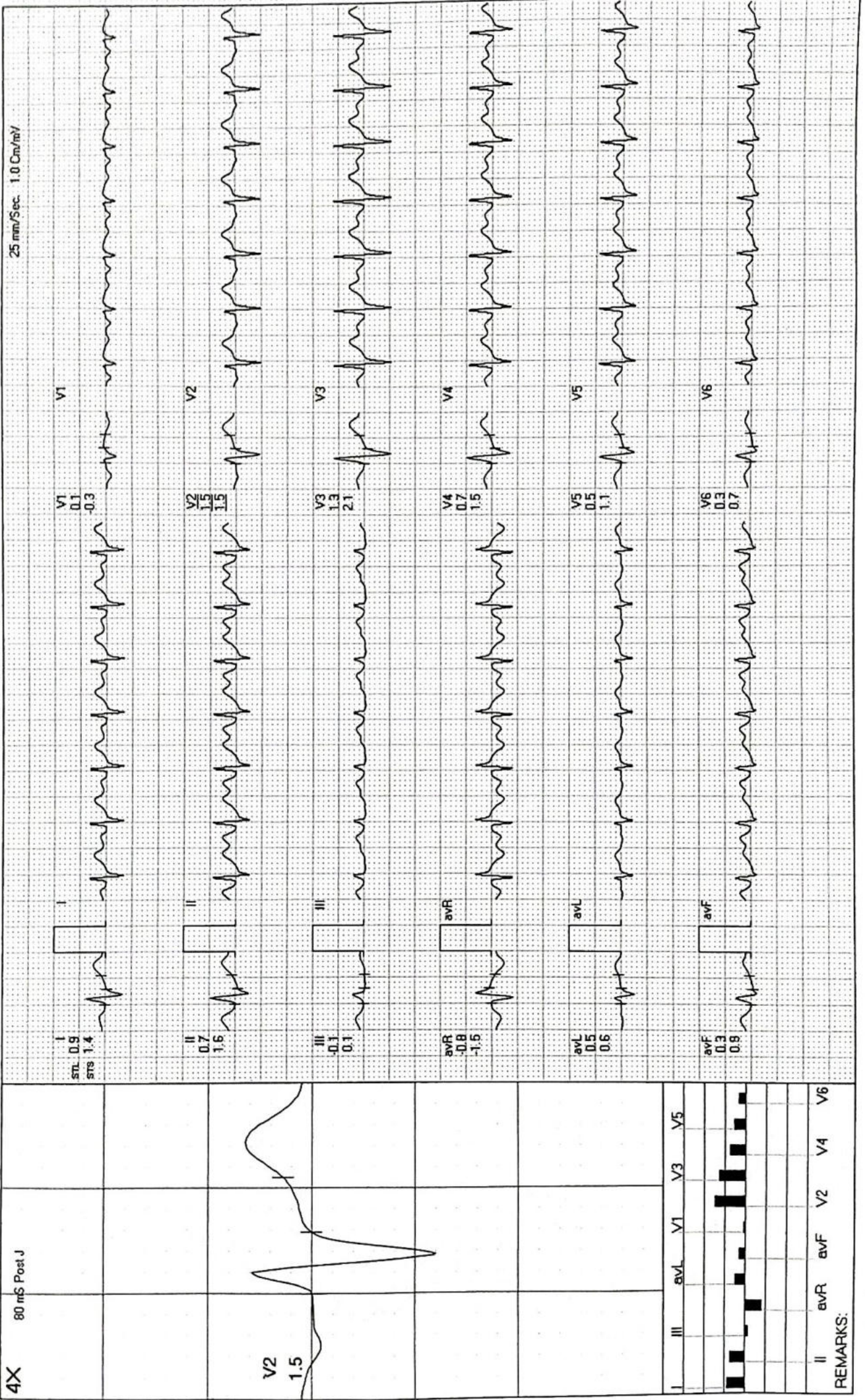
MODERN PATHOLOGY AND DIAGNOSTIC

ramashraya singh yadava / 49 Yrs / M / 0 Cms / 0 Kg / HR : 129

Recovery(1:00)



Date: 08-07-2023 METS: 1.2/129 bpm 75% of THR BP: 136/90 mmHg Combined Medians/BLC Or/ Natch Or/ HF 0.05 Hz/LF 35 Hz ExtTime: 06:11 0.0 Kmph, 0.0%



MODERN PATHOLOGY AND DIAGNOSTIC

ramashraya singh yadava / 49 Yrs / M / 0 Cms / 0 Kg / HR : 113

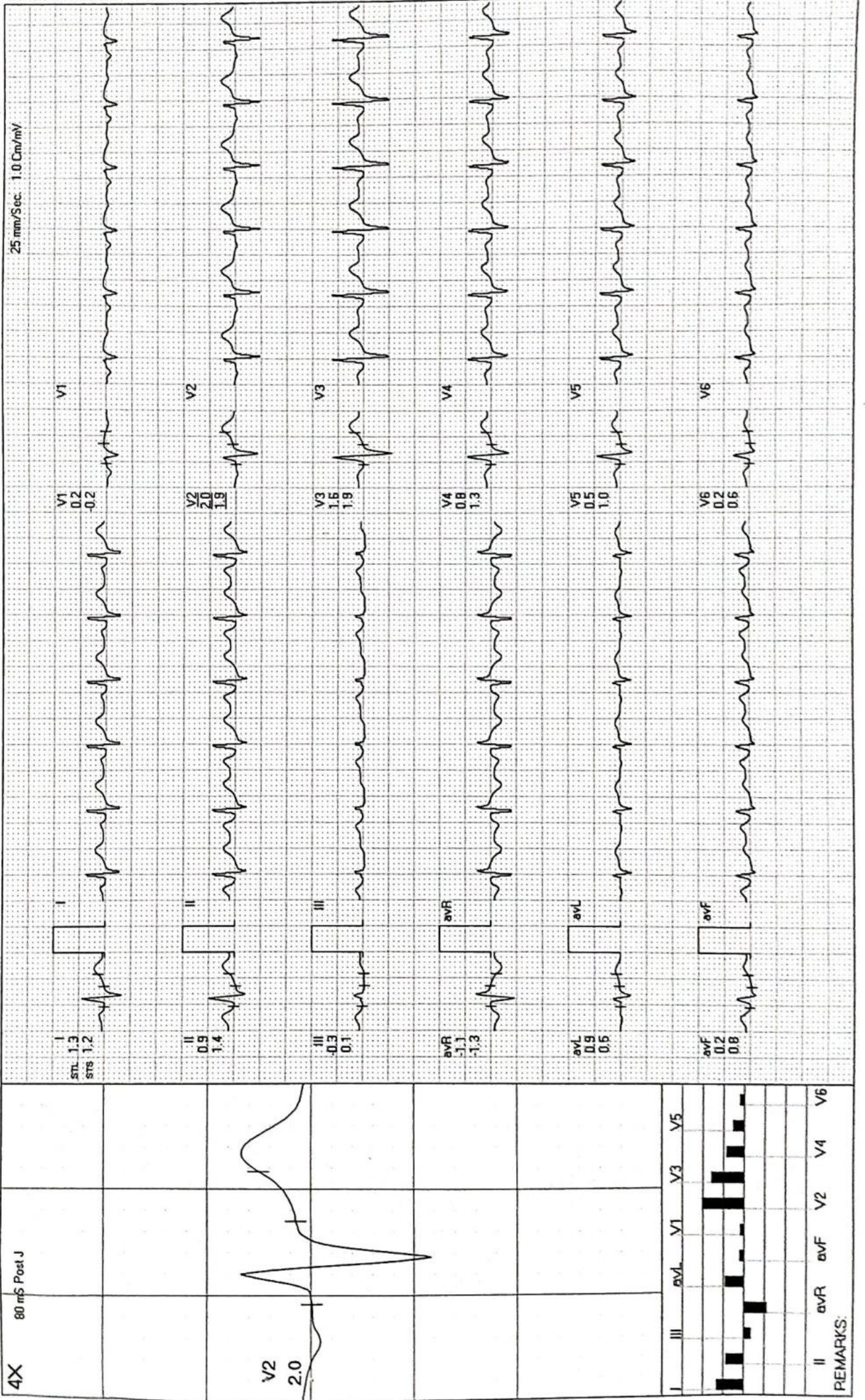
Recovery(2:00)



Date: 08 - 07 - 2023

METS: 1.0 / 113 bpm 66% of THR BP: 130/86 mmHg Combined Medians/ BLC-On/ HF 0.05 Hz/ LF 35 Hz

ExTime: 06:11 0.0 Kmph 0.0%



REMARKS:

MODERN PATHOLOGY AND DIAGNOSTIC

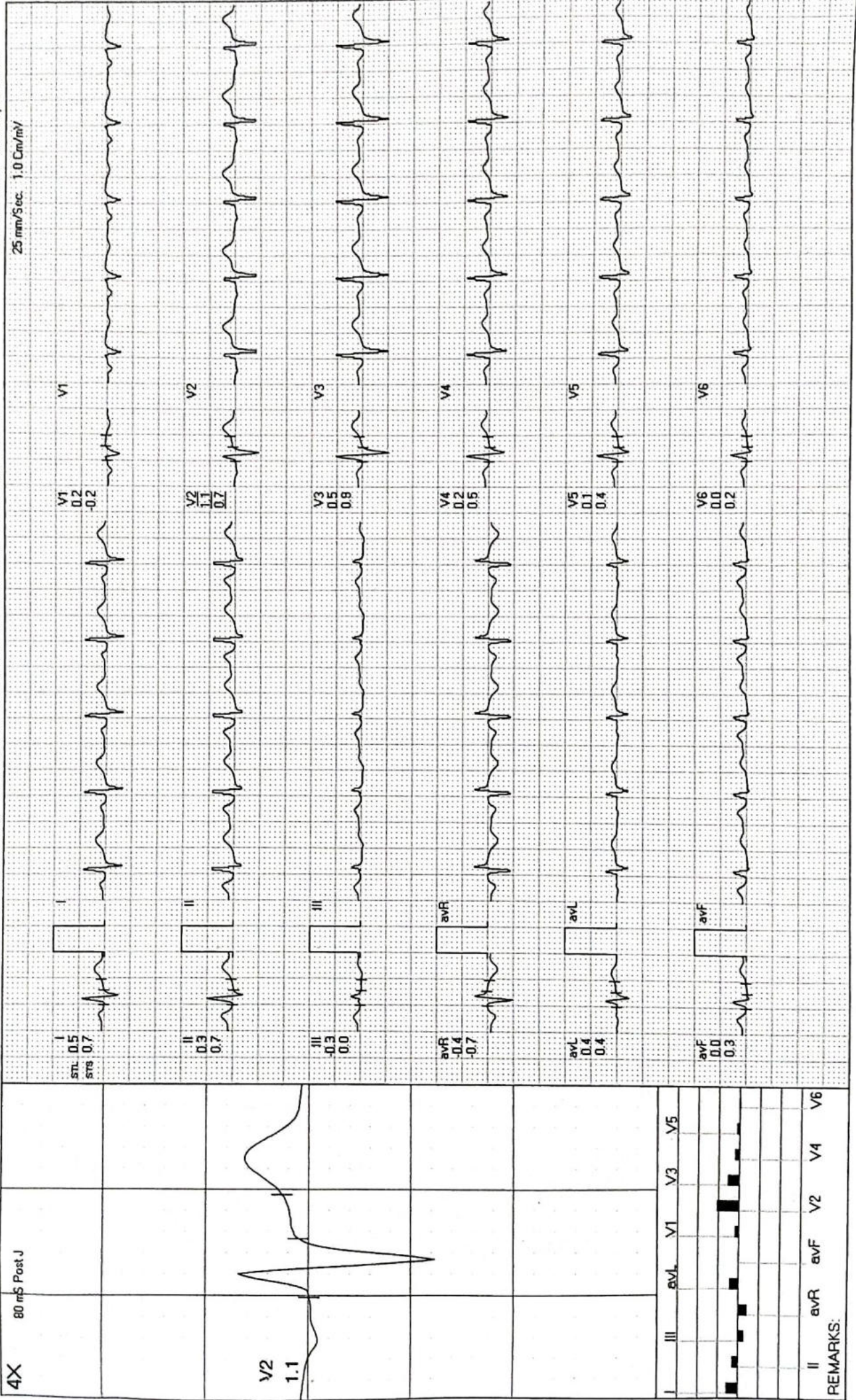
ramashraya singh yadava / 49 Yrs / M / 0 Cms / 0 Kg / HR : 103

Recovery(3:00)



Date: 08-07-2023
 ExTime: 06:11
 0.0 Kmph, 0.0%

METS: 1.0/103 bpm 60% of THR BP: 128/84 mmHg Combined Medians/BLC On/Notch On/HF 0.05 Hz/LF 35 Hz
 25 mm/Sec. 1.0 Cm/mV



REMARKS:
 II avR avF V2 V4 V6

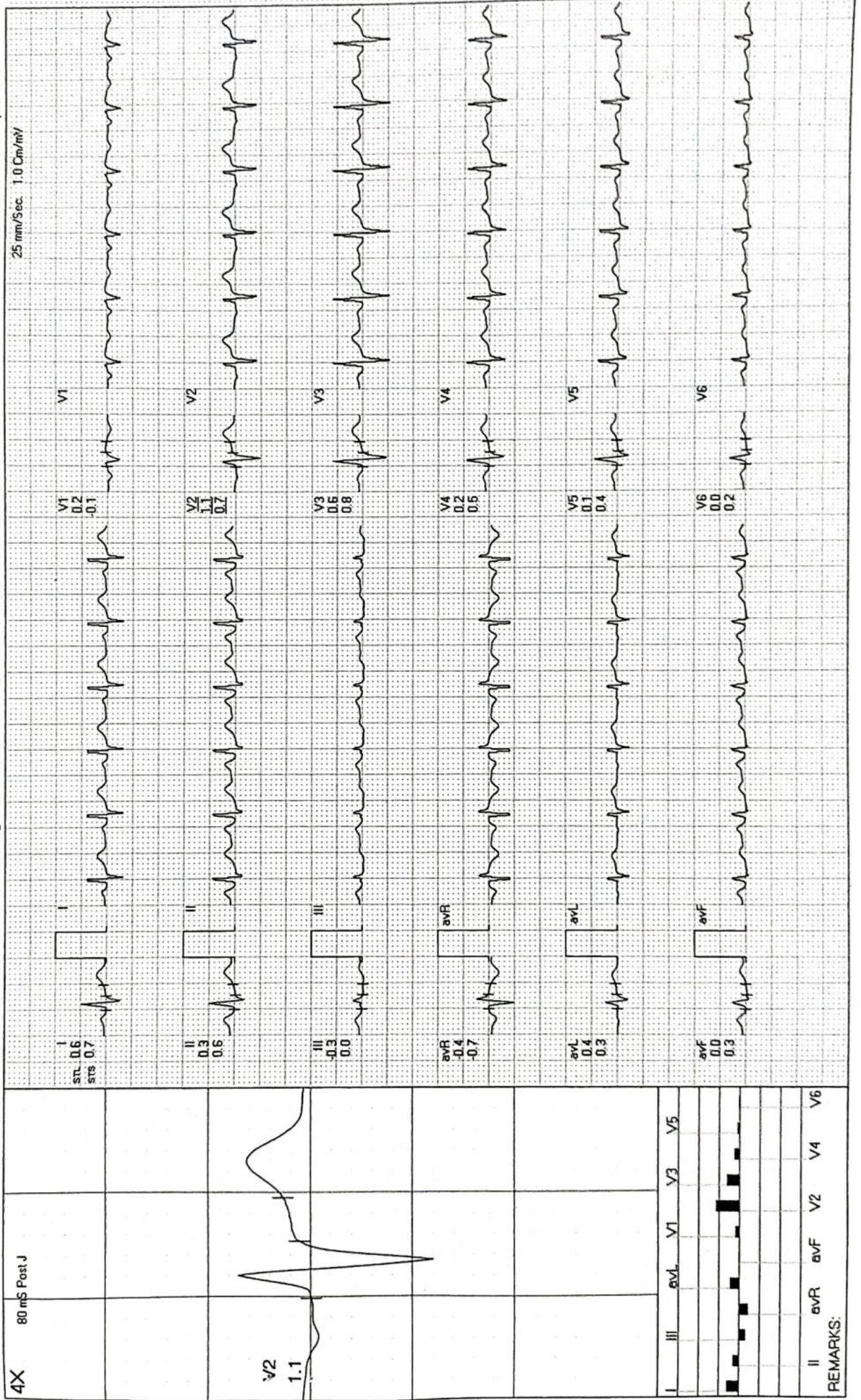
MODERN PATHOLOGY AND DIAGNOSTIC

ramashraya singh yadava / 49 Yrs / M / 0 Cms / 0 Kg / HR : 104

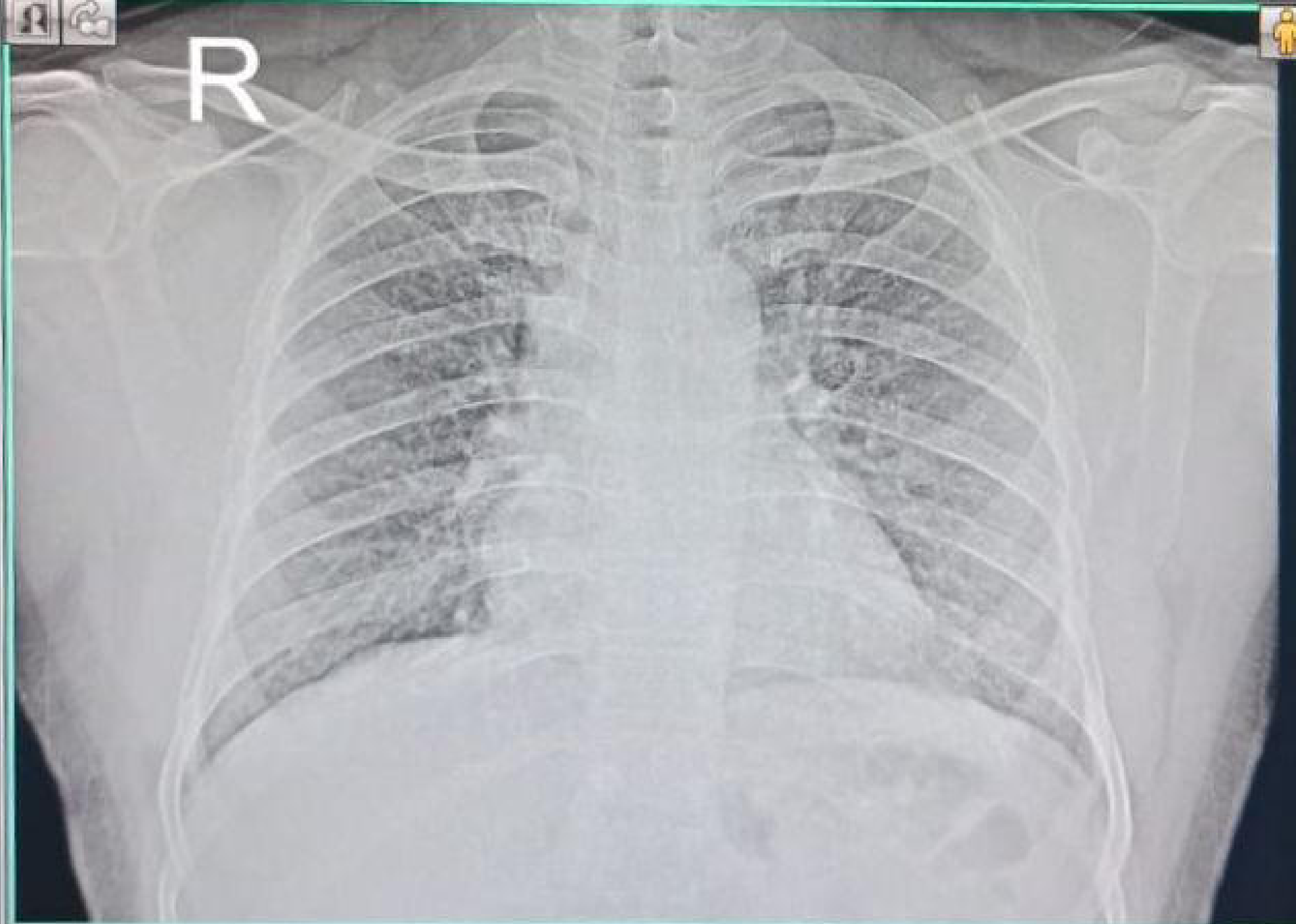
Recovery(3:17)



Date: 08-07-2023 METS: 1.0/104 bpm 61% of THR BP: 129/84 mmHg Combined Medians/BLC On/ HF 0.05 Hz/LF 35 Hz ExTime: 06:11 0.0 Kmph, 0.0%
 25 mm/Sec. 1.0 Cm/mV



REMARKS:



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