

MER- MEDICAL EXAMINATION REPORT

Date of Examination	30/01/24		
NAME	Ashish Kumar VERMA		
AGE	37	Gender	M
HEIGHT(cm)	168	WEIGHT (kg)	72 BMB-25.5
B.P.	110/80		
ECG	Normal		
X Ray	Normal		
Vision Checkup	Normal		
Present Ailments	None		
Details of Past ailments (If Any)	No		
Comments / Advice : She /He is Physically Fit	Medicines Rx		



  
Dr. Smriti Rastogi  
 MBBS, DCP  
 Reg. No. 37370  
 Signature with Stamp of Medical Examiner

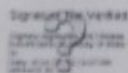
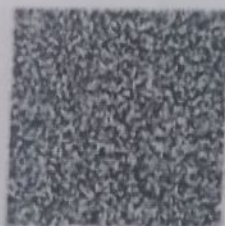


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भारतीय विशिष्ट पहचान प्राधिकरण  
Unique Identification Authority of India

नामांकन क्रम/ Enrolment No.: 1093/42067/01607

To  
अशीश कुमार वर्मा  
Ashish Kumar Verma  
S/O Shriram Arya,  
House No-41 A,  
Pink City Colony,  
Near Buddheshwar Mandir,  
Mohanan road,  
VTC, Avas Vikas Colony S.O,  
District: Lucknow,  
State: Uttar Pradesh,  
PIN Code: 226017,  
Mobile: 9532044580



आपका आधार क्रमांक / Your Aadhaar No. :

XXXX XXXX 0807

VID : 9157 1303 8900 2215

मेरा आधार, मेरी पहचान



भारत सरकार  
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अशीश कुमार वर्मा  
Ashish Kumar Verma  
जन्म तिथि/DOB: 18/07/1987  
लिंग/ GENDER: MALE

आधार पहचान का प्रमाण है, नागरिकता या जन्मतिथि का नहीं।  
इसका उपयोग सरकार (ऑनलाइन प्रशासनिक सेवाओं के लिए) और निजी सेवाओं (ऑनलाइन प्रशासनिक सेवाओं के लिए) के साथ किया जाना चाहिए।  
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सूचना / INFORMATION

- आधार पहचान का प्रमाण है, नागरिकता या जन्मतिथि का नहीं। जन्मतिथि आधार संख्या धारक द्वारा प्रस्तुत सूचना और विभिन्नताओं में विशिष्ट जन्मतिथि के प्रमाण के दस्तावेज पर आधारित है।
- इस आधार पर जो सुझाव/अनुमति द्वारा नियुक्त प्रशासनिक एजेंसी के लिए ऑनलाइन प्रशासनिक सेवाओं के द्वारा संचालित किया जाना चाहिए या ऐप स्टोर में उपलब्ध एप्लिकेशन या आधार नमूना कोड स्कैनर ऐप में नमूना कोड को स्कैन करके या [www.uidai.gov.in](http://www.uidai.gov.in) पर उपलब्ध सुनिश्चित नमूना कोड ऐप का उपयोग करके संचालित किया जाना चाहिए।
- आधार विशिष्ट और सुरक्षित है।
- पहचान और पते के संबंध में दस्तावेजों को आधार के लिए नवीकरित की जाती है प्रत्येक 10 वर्षों में कम से कम एक बार आधार में अपडेट करना चाहिए।
- आधार विभिन्न सरकारी और गैर-सरकारी सेवाओं/सेवाओं का लाभ लेने में सहायता करता है।
- आधार में अपना मोबाइल नंबर और ईमेल आईडी अपडेट करें।
- आधार सेवाओं का लाभ लेने के लिए एप्लिकेशन ऐप डाउनलोड करें।
- आधार/बायोमेट्रिक्स का उपयोग न करने के समय सुरक्षा सुनिश्चित करने के लिए आधार/बायोमेट्रिक्स लॉक/अलॉक सुविधा का उपयोग करें।
- आधार की रक्षा करने वाले सड़कित लेने के लिए सावधान रहें।
- Aadhaar is proof of identity, not of citizenship or date of birth (DOB). DOB is based on information supported by proof of DOB document specified in regulations, submitted by Aadhaar number holder.
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- Aadhaar is unique and secure.
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- Entities seeking Aadhaar are obligated to seek consent.



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नाम:  
S/O श्रीराम अर्या, हाउस नं-41 ए, पिंक सिटी कॉलोनी,  
निकट बुद्धेश्वर मंदिर, मोहान रोड, अवास विकास कॉलोनी  
स/O श्रीराम अर्या,  
हाउस नं-41 ए, 226017

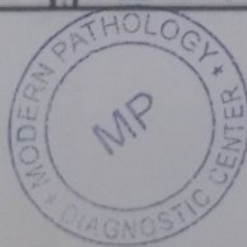


Address:  
S/O Shriram Arya, House No-41 A, Pink City  
Colony, Near Buddheshwar Mandir, Mohanan  
Road, Avas Vikas Colony S.O, DIST:  
Lucknow,  
Uttar Pradesh - 226017

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You have been informed that Opthal , Dental ,Ent, Dietician ,  
consultation facility is not available at our center .If you are  
ready then your test can be start.

*Ch. M. S.*





# MODERN PATHOLOGY & 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

Date	: 30-Aug-2024		
Name	: <b>Mr. ASHISH KUMAR VERMA</b>	Age	: 37 Yrs.
Ref.By	: APOLLO HEALTH	Sex	: Male

Haemoglobin	14.3	gm%	14 - 17
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Total Leucocyte Count	6400	Cells/cumm.	4000-11000
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Differential Leucocyte Count			
Polymorphs	53	%	45 - 70
Lymphocytes	38	%	20 - 45
Eosinophils	02	%	0 - 6
Monocytes	07	%	0 - 8
Basophils	00	%	0 - 1

Erythrocyte Sedimentation Rate (Wintrobe)			
ESR	08	mm in 1st Hr.	0 - 9
PCV	45.2	cc%	40 - 52
Corrected ESR	02	mm in 1st Hr.	0 - 9

Platelet Count	1.67	lakh/cumm.	1.5 - 4.0
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Red Cells Count	5.36	million/cmm	3.90 to 5.80
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Absolute values			
MCV	84.4	fL	77 - 97
MCH	<b>26.7</b>	pg	27 - 31
MCHC	31.7	gm /dl	31 - 34

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

Results, adhering 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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Date	: 30-Aug-2024		
Name	: <b>Mr. ASHISH KUMAR VERMA</b>	Age	: 37 Yrs.
Ref.By	: APOLLO HEALTH	Sex	: Male

Plasma Glucose - F GOD-POD Method	91	mg/dl	70 - 110
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Plasma Glucose - PP GOD POD Method	126	mg/dl	110 - 170
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Blood Group & Rh	"A" Positive		
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Serum Bilirubin	0.54	mg%	0.2 - 1.0
Direct Bilirubin	0.21	mg%	0.0 to 0.40
Indirect Bilirubin	0.33	mg%	0.10 to 0.90

SGOT	56	IU/L	UPTO 40
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SGPT	62	IU/L	Upto 40
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S. Alkaline Phosphatase	181	IU/L	100 - 275
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Serum Gamma G.T.	36	IU/L	11 - 50
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<b>Total Proteins</b>			
S. Protein	7.12	gm/dl	6.5 - 8.5
S. Albumin	4.50	gm/dl	3.5 - 5.5
S. Globulin	2.62	gm/dl	2.3 to 3.5
A/G Ratio	1.72 : 1		

<b>KFT</b>			
UREA	20.4	mg %	15 - 50
CREATININE	1.03	mg %	0.5 - 1.5
URIC ACID	5.1	mg %	2 - 7
CALCIUM	9.6	mg %	8.8 - 10.0

Urine Sugar (Fasting)	NIL		
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Urine Sugar (PP)	NIL		
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Date : 30-Aug-2024  
Name : **Mr. ASHISH KUMAR VERMA**  
Ref.By : APOLLO HEALTH  
Age : 37 Yrs.  
Sex : Male

### LIPID PROFILE

Triglycerids	153	mg%	70 - 190
S. Cholestrol S.	189	mg%	130 - 230
S. HDL Cholestrol	44.2	mg%	35 - 75
S. LDL Cholestrol	114.2	mg%	75 - 150
VLDL	30.6	mg%	0 - 34
Chol / HDL factor	4.28		
LDL / HDL Factor	2.58		

### 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<br>TG greatly raised                         | TYPE 3: Cholesterol increased<br>TG increased  |
| TYPE 2a: Cholesterol increased<br>LDL increased<br>TG normal            | TYPE 4: Cholesterol normal /increased<br>VLDL increased<br>TG increased                |
| TYPE 2b Chol. increased<br>VLDL raised<br>TG increased<br>LDL increased | TYPE 5: Cholesterol increased<br>LDL reduced<br>VLDL increased<br>TG greatly increased |

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



Date	: 30-Aug-2024		
Name	: <b>Mr. ASHISH KUMAR VERMA</b>	Age	: 37 Yrs.
Ref.By	: APOLLO HEALTH	Sex	: Male

### THYROID TEST

Tri-iodothyronine (T3)	1.40	nmol/L	0.50 to 2.50
Thyroxine (T4)	7.68	mcg/dL	5.0 to 12.5
Thyroid Stimulating Hormone (TSH)	4.96	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 may be 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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Mob.: 7618884441, 9450389932, 8177063877

Date	: 30-Aug-2024	Age	: 37 Yrs.
Name	: <b>Mr. ASHISH KUMAR VERMA</b>	Sex	: Male
Ref.By	: APOLLO HEALTH		

### Glycosylated Haemoglobin

Glycosylated Haemoglobin	5.5	%	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 haemoglobin is the adducted glucose in the haemoglobin 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.

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Date : 30-Aug-2024

Name : **Mr. ASHISH KUMAR VERMA**

Age : 37 Yrs.

Ref.By : APOLLO HEALTH

Sex : Male

## Urine Examination

### PHYSICAL

Colour	Straw
Turbidity	Nil
Deposit	Nil
Reaction	Acidic
*Specific Gravity	1.010

### CHEMICAL

Protein	Nil
Sugar	Nil
*Bile Salts	Nil
*Bile Pigments	Nil
Phosphate	Nil

### MICROSCOPIC

Pus Cells	Nil	/hpf
Epithelial Cells	Occasional	/hpf
Red Blood Cells	Nil	/hpf
Casts	Nil	
Crystals	Nil	
Others	Nil	

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Page 5 (End Of Report)  
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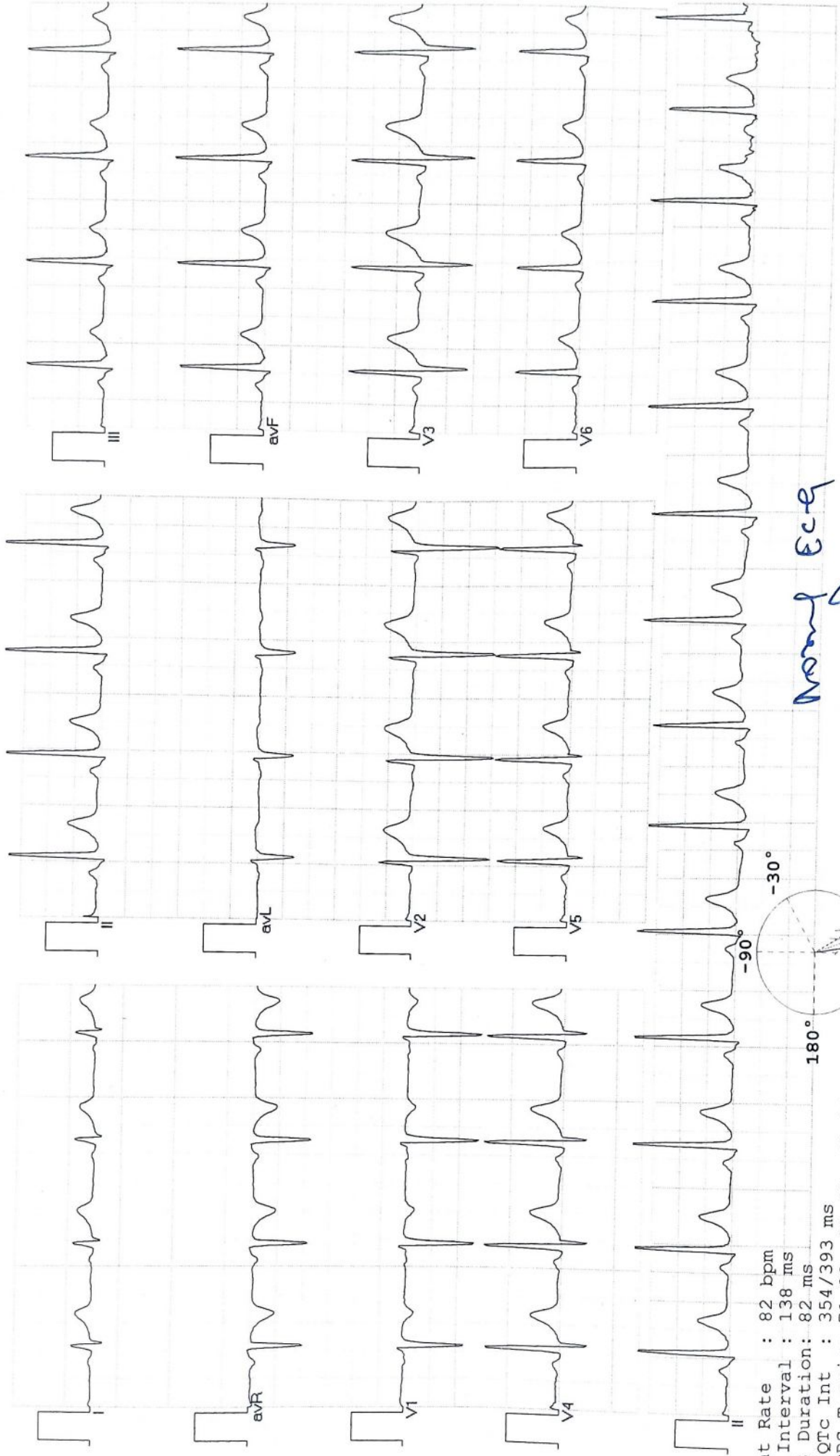
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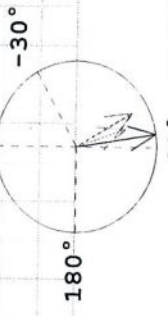
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Vent Rate : 82 bpm  
 PR Interval : 138 ms  
 QRS Duration : 82 ms  
 QT/QTc Int : 354/393 ms  
 P-QRS-T axis: 71.00• 81.00• 60.00•

Allergens ECG (Pisces)(PIS215191030)



Normal ECG

Axis  
 90° R 81° T 60° P 71°

*Dr. Amit Mohan*  
**DR. AMIT MOHAN**  
 MD  
 Reg. No. 44559



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



TEST REQUEST ID :012408300010	SAMPLE DATE	:30/Aug/2024 08:49AM
NAME :Mr. ASHISH KUMAR VERMA	SAMPLE REC. DATE	:30/Aug/2024 08:49AM
AGE/SEX :37 YRS/MALE	REPORTED DATE	:30/Aug/2024 09:58AM
REFERRED BY : Apollo Health and Lifestyle Limited,	BARCODE NO	:01300010

**USG WHOLE ABDOMEN-MALE**

**Liver:** is normal in size ( 132 mm). Parenchymal echogenicity is normal. No focal echovariant lesion is seen. Intrahepatic biliary radicles are not dilated.

**Gall Bladder:** is partially contracted. 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 ( 115 mm), shape and echotexture. No focal echovariant lesion is seen. Splenic vein is normal.

**Right Kidney:** is normal in size 93x34 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. Ureter is not dilated.

**Left Kidney:** is normal in size 108x43 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. Ureter is not dilated.



**Anjay Rastogi**  
M.B.B.S., DCP, CRIAT (BARC)

*Surbhi*  
**Dr. Surbhi**  
MBBS, MD (Radiodiagnosis)

*Dr. Smrta Rastogi*  
**Dr. Smrta Rastogi**  
M.B.B.S., DCP

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NAME :Mr. ASHISH KUMAR VERMA	SAMPLE REC. DATE	:30/Aug/2024 08:49AM
AGE/SEX :37 YRS/MALE	REPORTED DATE	:30/Aug/2024 09:58AM
REFERRED BY : Apollo Health and Lifestyle Limited,	BARCODE NO	:01300010

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

**Prostate:** is normal in size ( 21x33x35 mms, wt = 13.5 gms), shape and 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:

- **NORMAL STUDY.**

\*\*\* End Of Report \*\*\*



**Anjanjay Rastogi**  
MBBS, DCP, CRIAT (BARC)

*Surbhi*  
**Dr.Surbhi**  
MBBS,MD (Radiodiagnosis)

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

Results, adhering 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

e-mail : mpdcgn@gmail.com ♦ For online reports - [www.modernpath.in](http://www.modernpath.in)

Print Date Time: 30/08/2024 4:00 PM Please ask for your computerized report only the printed collection charges

MODERN PATHOLOGY AND DIAGNOSTIC CENTER

Gomti Nagar Lucknow

Report



ashish kumar verma / 37 Yrs / M / 168 Cms / 72 Kg  
 Date: 30 - 08 - 2024 Refd By : APOLLO HEALTH Examined By:

Stage	Time	Duration	Speed(Kmph)	Elevation	METS	Rate	% THR	BP	RPP	PVC	Comments
Supine	00:03	0:03	00.0	00.0	01.0	083	45 %	118/88	097	00	
Standing	00:07	0:04	00.0	00.0	01.0	083	45 %	118/88	097	00	
HV	00:11	0:04	00.0	00.0	01.0	083	45 %	118/88	097	00	
ExStart	00:34	0:23	00.0	00.0	01.0	079	43 %	118/88	093	00	
BRUCE Stage 1	03:34	3:00	02.7	10.0	04.7	111	61 %	126/92	139	00	
BRUCE Stage 2	06:34	3:00	04.0	12.0	07.1	138	75 %	134/96	184	00	
PeakEx	07:19	0:45	05.5	14.0	07.9	149	81 %	140/100	208	00	
Recovery	08:19	1:00	00.0	00.0	01.2	123	67 %	138/96	169	00	
Recovery	09:19	2:00	00.0	00.0	01.0	094	51 %	134/92	125	00	
Recovery	10:19	3:00	00.0	00.0	01.0	099	54 %	132/90	130	00	
Recovery	10:47	3:28	00.0	00.0	01.0	099	52 %	126/88	120	00	

FINDINGS :

Exercise Time : 06:45  
 Max HR Attained : 149 bpm 81% of Target 123  
 Max BP Attained : 140/100 (mm/Hg)  
 Max WorkLoad Attained : 7.9 Fair response to induced stress

Test End Reasons : Test Complete

REPORT :

CONCLUSIONS:

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

Dr. AMIT MOHAN MD  
 Reg. No. 44559

**MODERN PATHOLOGY AND DIAGNOSTIC CENTER**

ashish kumar verma / 37 Yrs / M / 168 Cms / 72 Kg / HR : 83

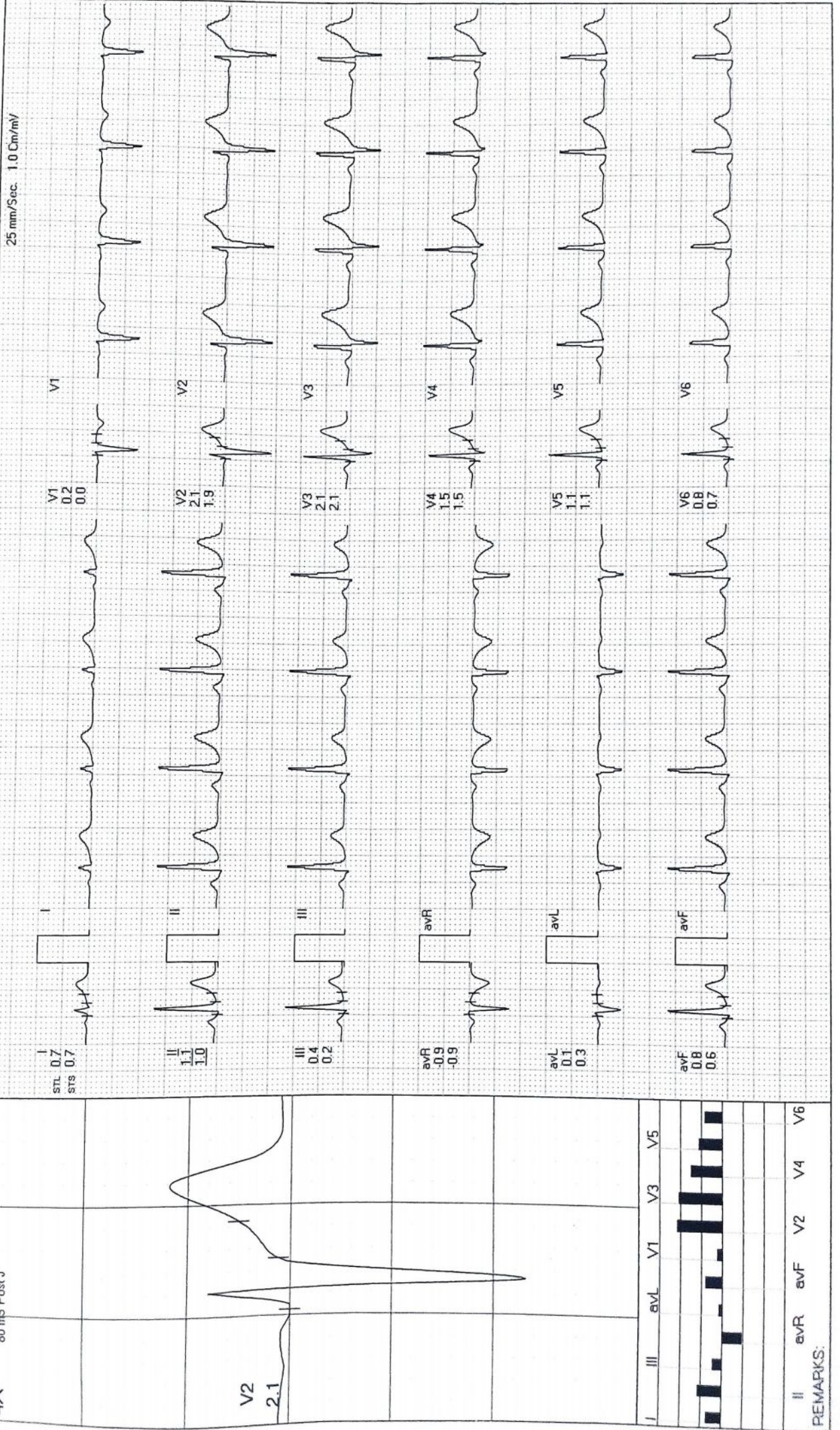
**BRUCE:Supine(0:05)**



Date: 30-08-2024

METS: 1.0 / 83 bpm 45% of THR BP: 118/88 mmHg Combined Medians/BLC On/ HF 0.05 Hz/LF 35 Hz

ExTime 00:00 0.0 Kmph. 0.0%

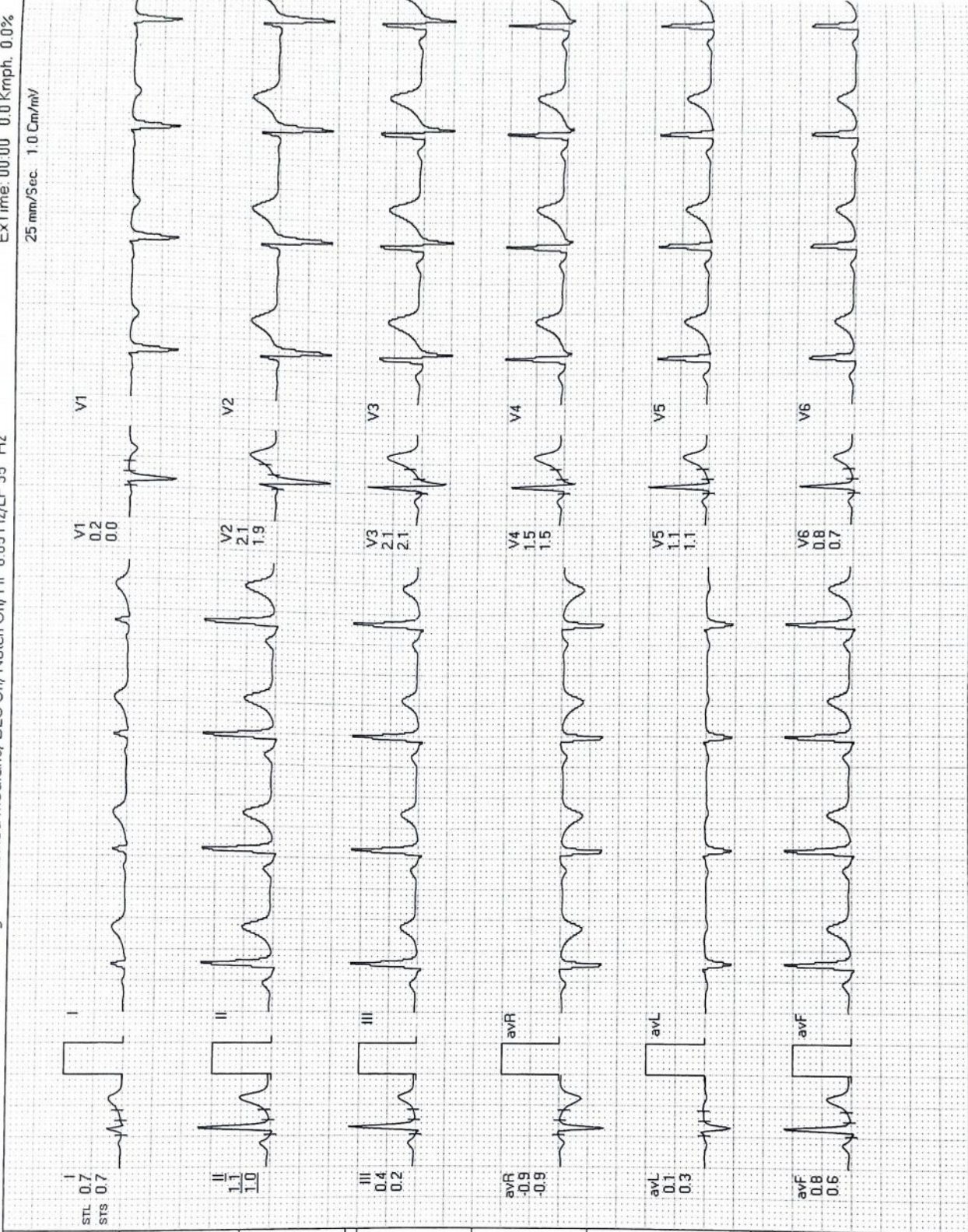
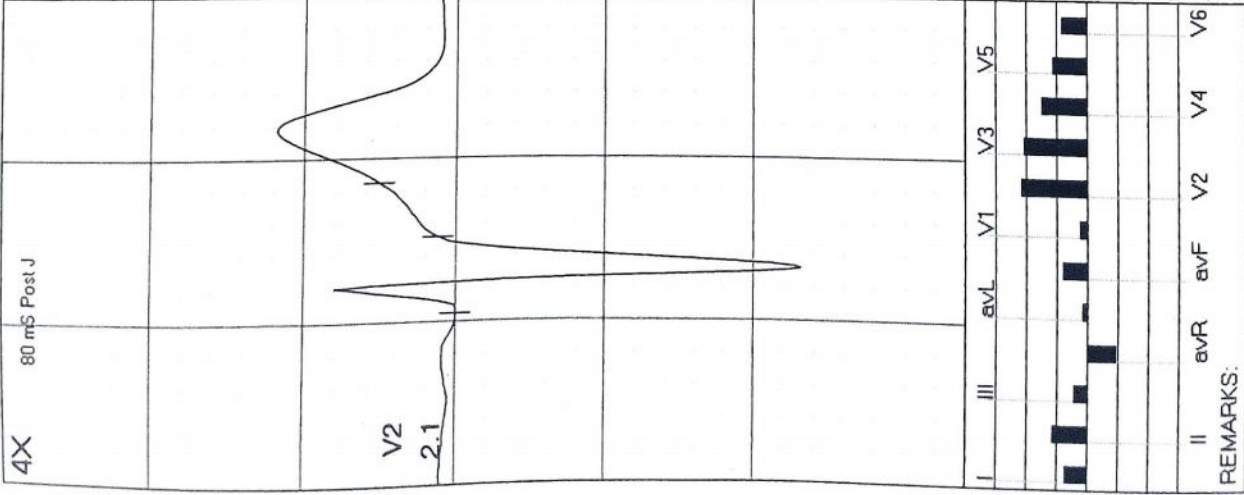


REMARKS:

Date: 30-08-2024

METS: 1.0/ 83 bpm 45% of THR BP: 118/88 mmHg Combined Medians/BLC Ony/ Natch Ony/HF 0.05 Hz/LF 35 Hz

ExTime: 00:00 0.0 Kmph. 0.0%  
25 mm/Sec. 1.0 Cm/mV



I  
STL 0.7  
STS 0.7

II  
1.1  
1.0

III  
0.4  
0.2

aVR  
-0.9  
-0.9

aVL  
0.1  
0.3

aVF  
0.8  
0.6

V1  
0.2  
0.0

V2  
2.1  
1.9

V3  
2.1  
2.1

V4  
1.5  
1.5

V5  
1.1  
1.1

V6  
0.8  
0.7

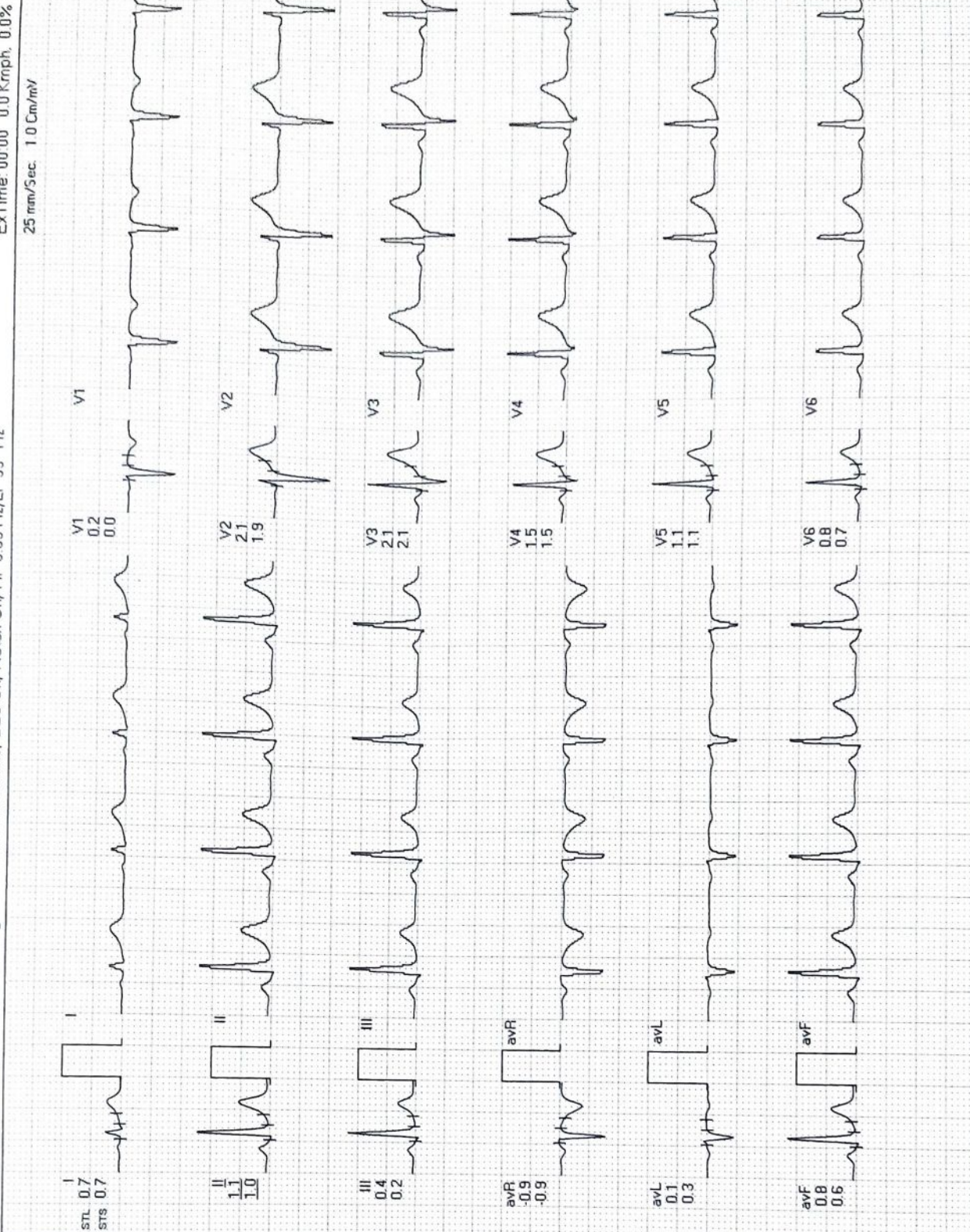
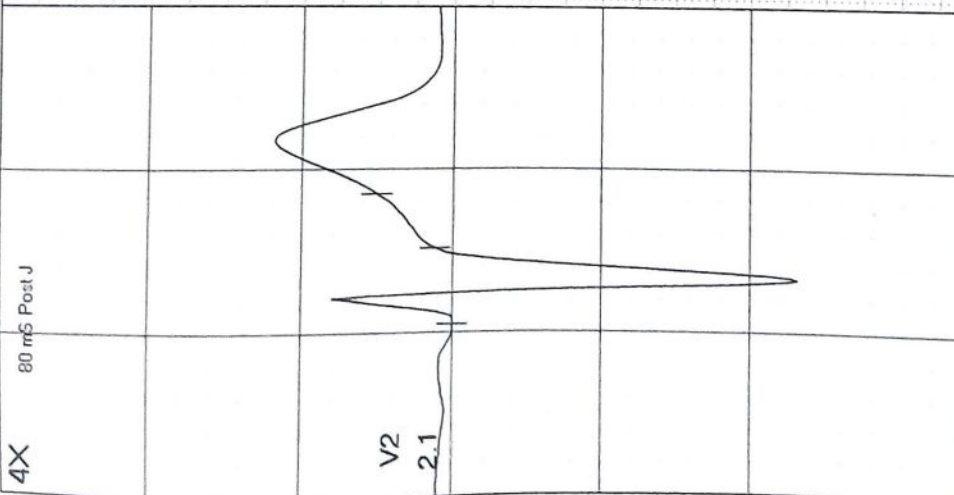
REMARKS:  
II aVR aVF V2 V4 V6



Date: 30-08-2024

METS: 1.0/83 bpm 45% of THR BP: 118/88 mmHg Combined Medians/BLC On/ Notch On/HF 0.05 Hz/LF 35 Hz

ExTime: 00:00 0.0 Kmph. 0.0%  
25 mm/Sec. 1.0 Cm/mV



I	II	III	aVR	aVL	aVF	V1	V2	V3	V4	V5	V6

REMARKS:



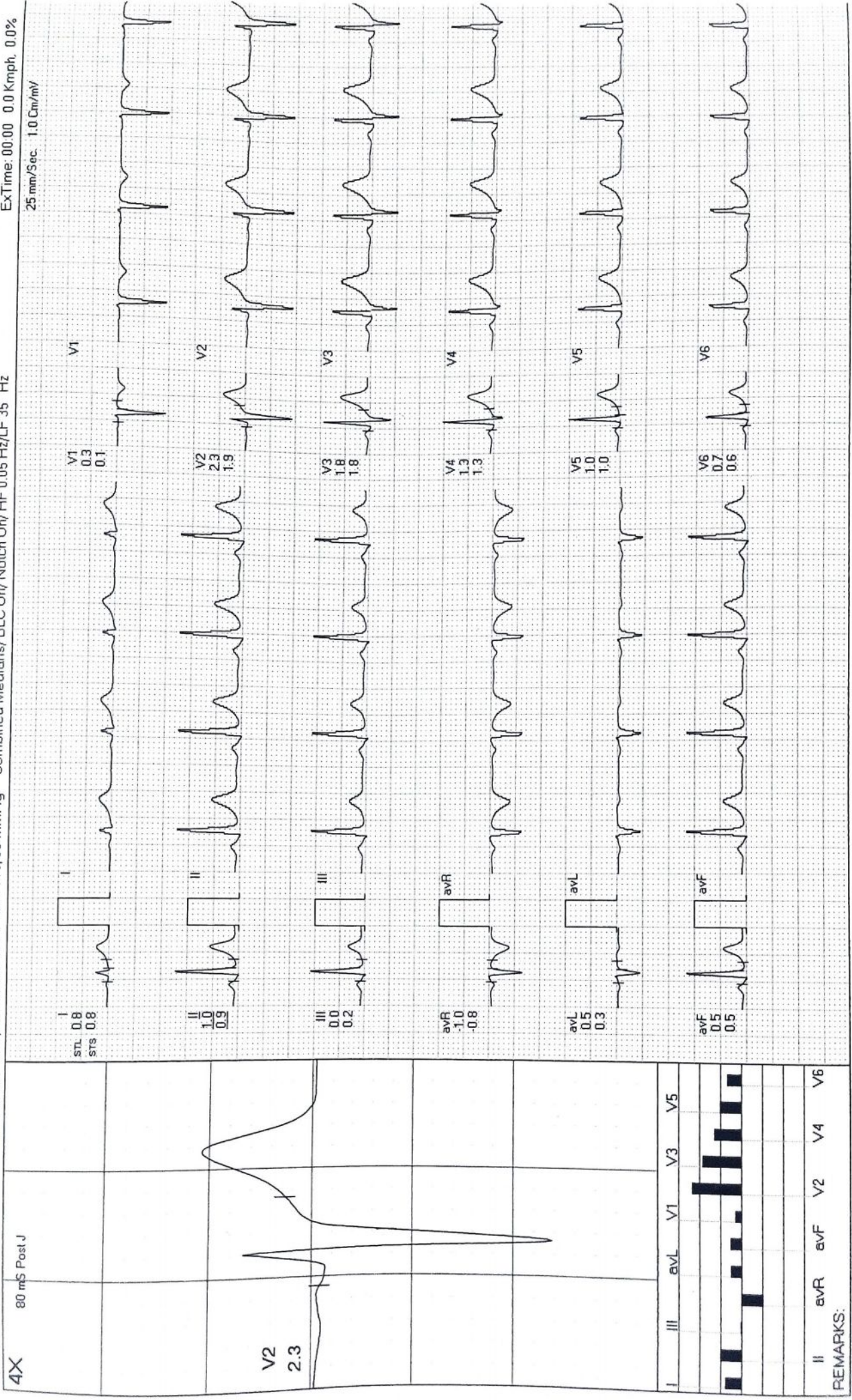
**MODERN PATHOLOGY AND DIAGNOSTIC CENTER**

*ashish kumar verma / 37 Yrs / M / 168 Cms / 72 Kg / HR : 79*

Date: 30-08-2024

METS: 1.0/ 79 bpm 43% of THR BP: 118/88 mmHg Combined Medians/BLCO<sub>n</sub>/Notch On/ HF 0.05 Hz/LF 35 Hz

ExTime: 00:00 0.0 Km/h, 0.0%  
25 mm/Sec. 1.0 Cm/mV



REMARKS:  
II avR avF V2 V4 V6

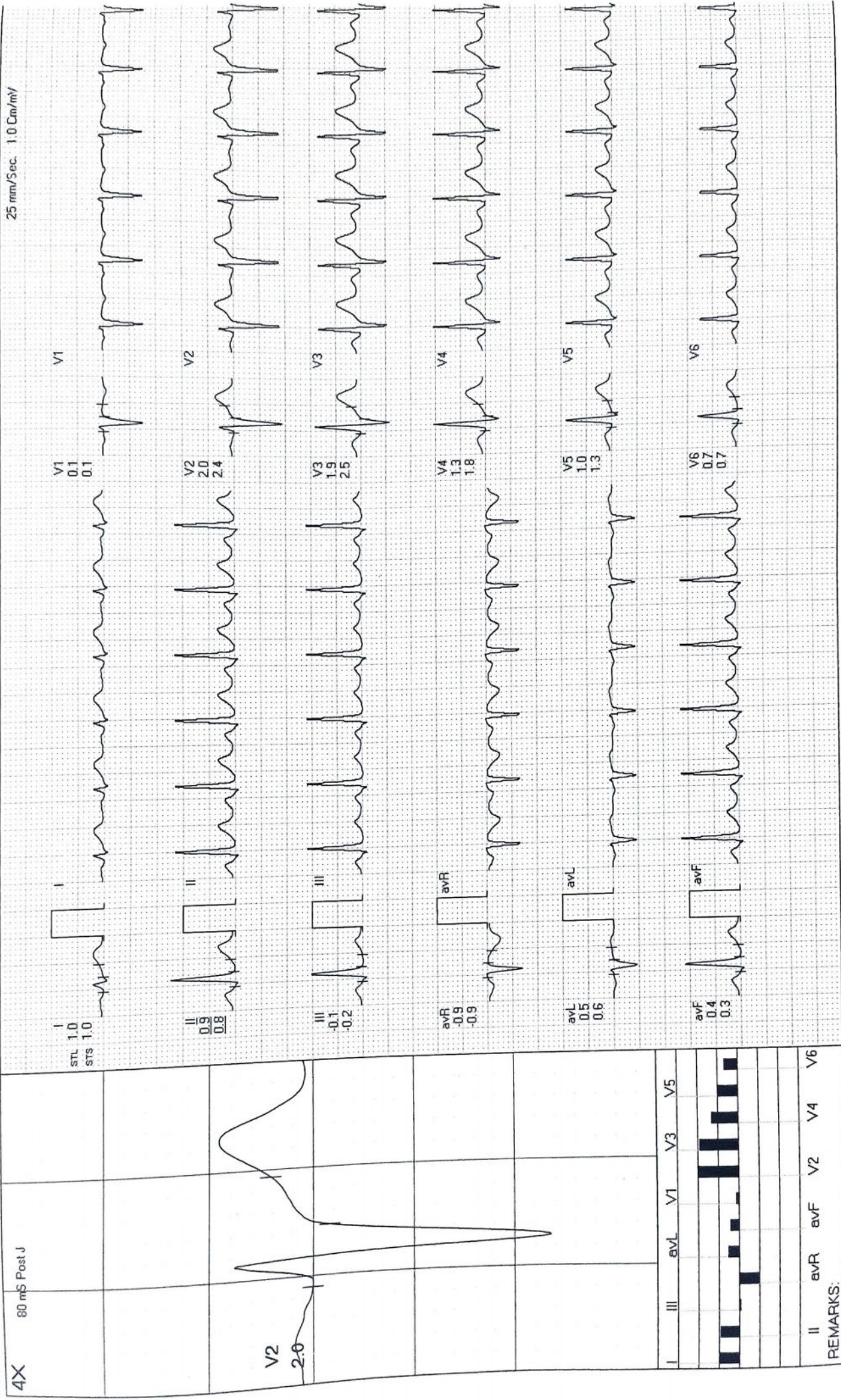


Date: 30-08-2024

METS: 4.7/111 bpm 61% of THR BP: 126/92 mmHg Combined Medians/BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

ExTime: 03:00 2.7 Kmph, 10.0%

25 mm/5ec. 1.0 Cm/mV



REMARKS:

**MODERN PATHOLOGY AND DIAGNOSTIC CENTER**

ashish kumar verma / 37 Yrs / M / 168 Cms / 72 Kg / HR : 138

**BRUCE: Stage 2(3:00)**

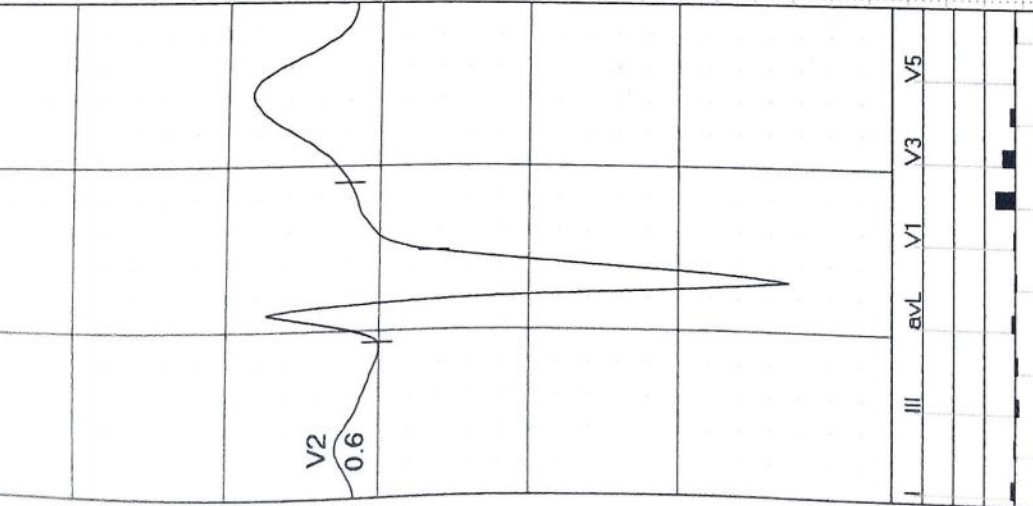
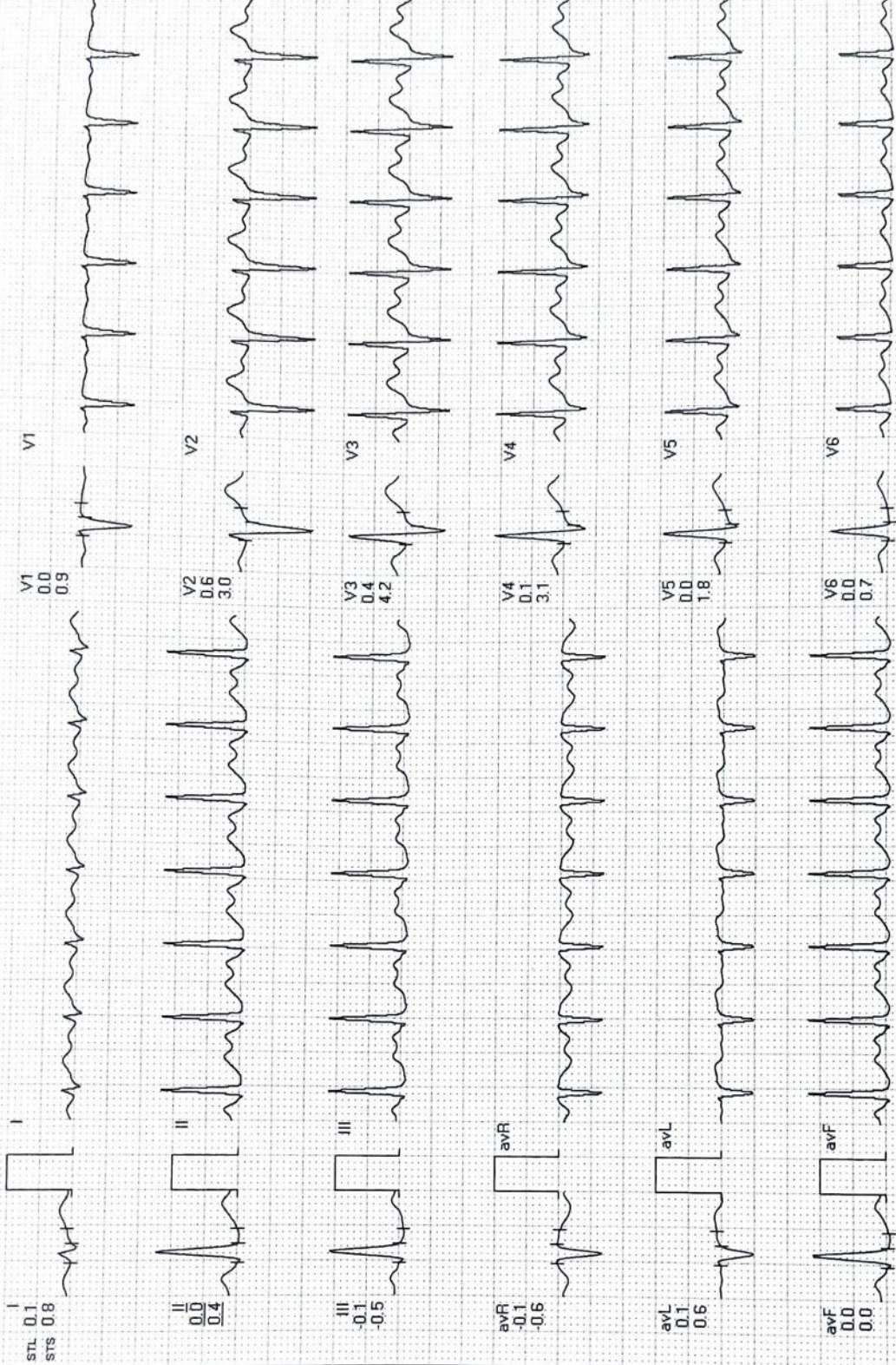


Date: 30-08-2024

METS: 7.1 / 138 bpm 75% of THR BP: 134/96 mmHg Combined Medians/ BLC On/ HF 0.05 Hz/LF 35 Hz

4X 60 mS Post J

ExTime: 06:00 4.0 KmPh, 12.0%  
25 mm/Sec. 1.0 Cm/mV



II aVR aVF V2 V4 V6  
REMARKS:

**MODERN PATHOLOGY AND DIAGNOSTIC CENTER**

ashish kumar verma / 37 Yrs / M / 168 Cms / 72 Kg / HR : 149

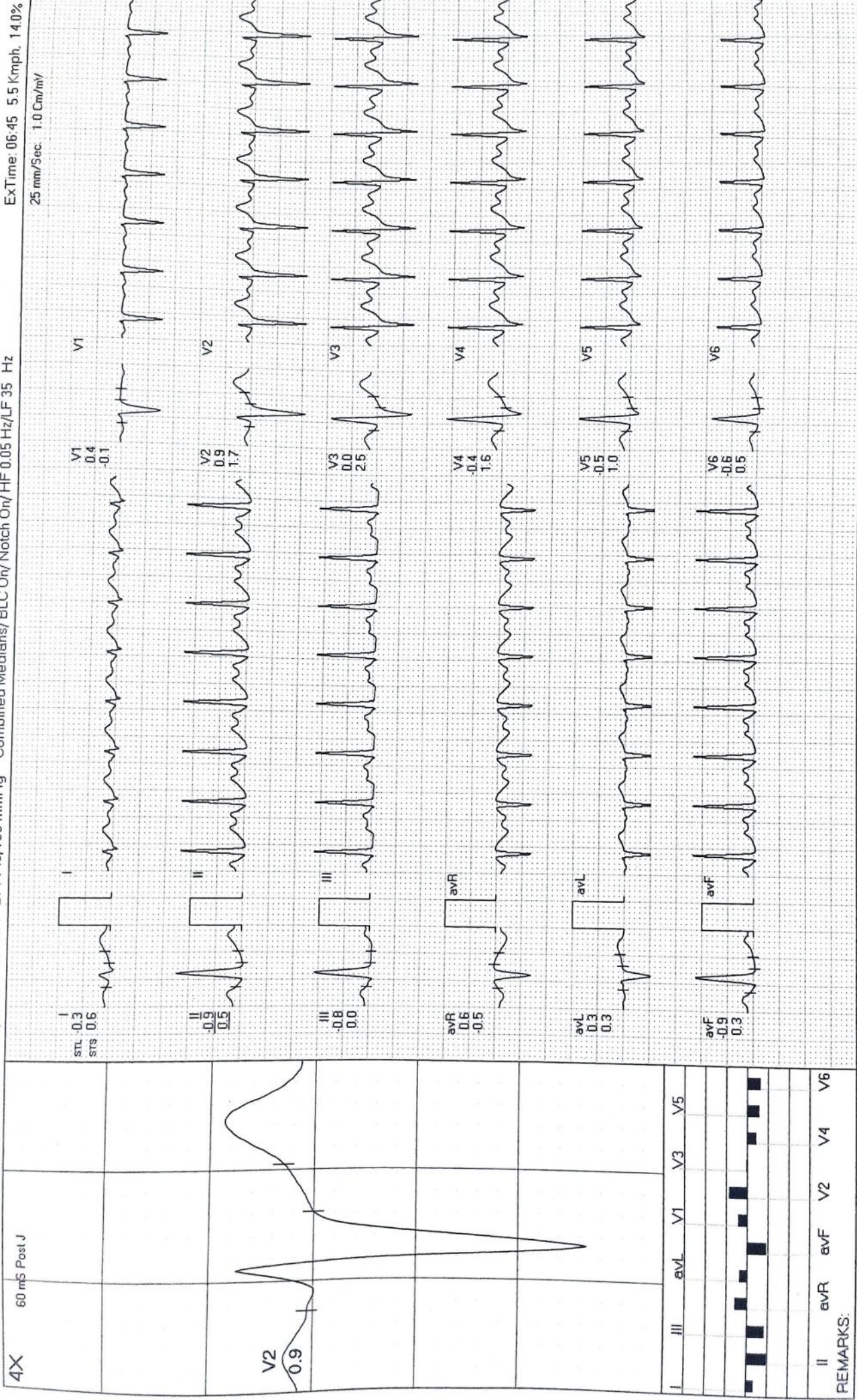


PeakEx

Date: 30 - 08 - 2024

METS: 7.9 / 149 bpm 81% of THR BP: 140/100 mmHg Combined Medians/ BLC On/ Natch On/ HF 0.05 Hz/LF 35 Hz

ExTime: 06:45 5.5 Kmph, 14.0%  
25 mm/Sec. 1.0 Cm/mv



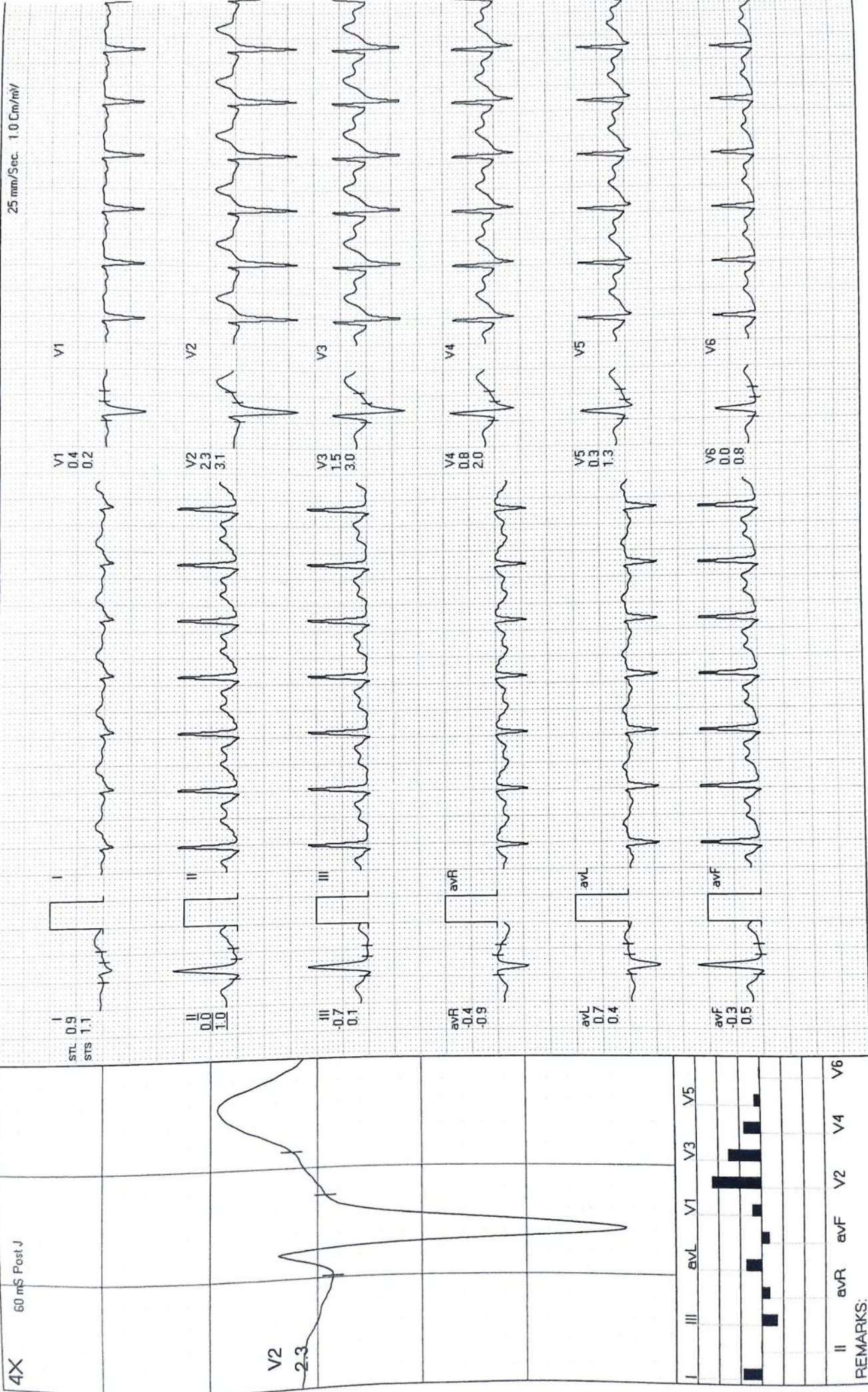
REMARKS:



Date: 30-08-2024

METS: 1.2/123 bpm 67% of THR BP: 138/96 mmHg Combined Medians/BLC On/ HF 0.05 Hz/LF 35 Hz

ExTime: 06:45 0.0 Kmph. 0.0%



REMARKS:



Recovery(2:00)

MODERN PATHOLOGY AND DIAGNOSTIC CENTER

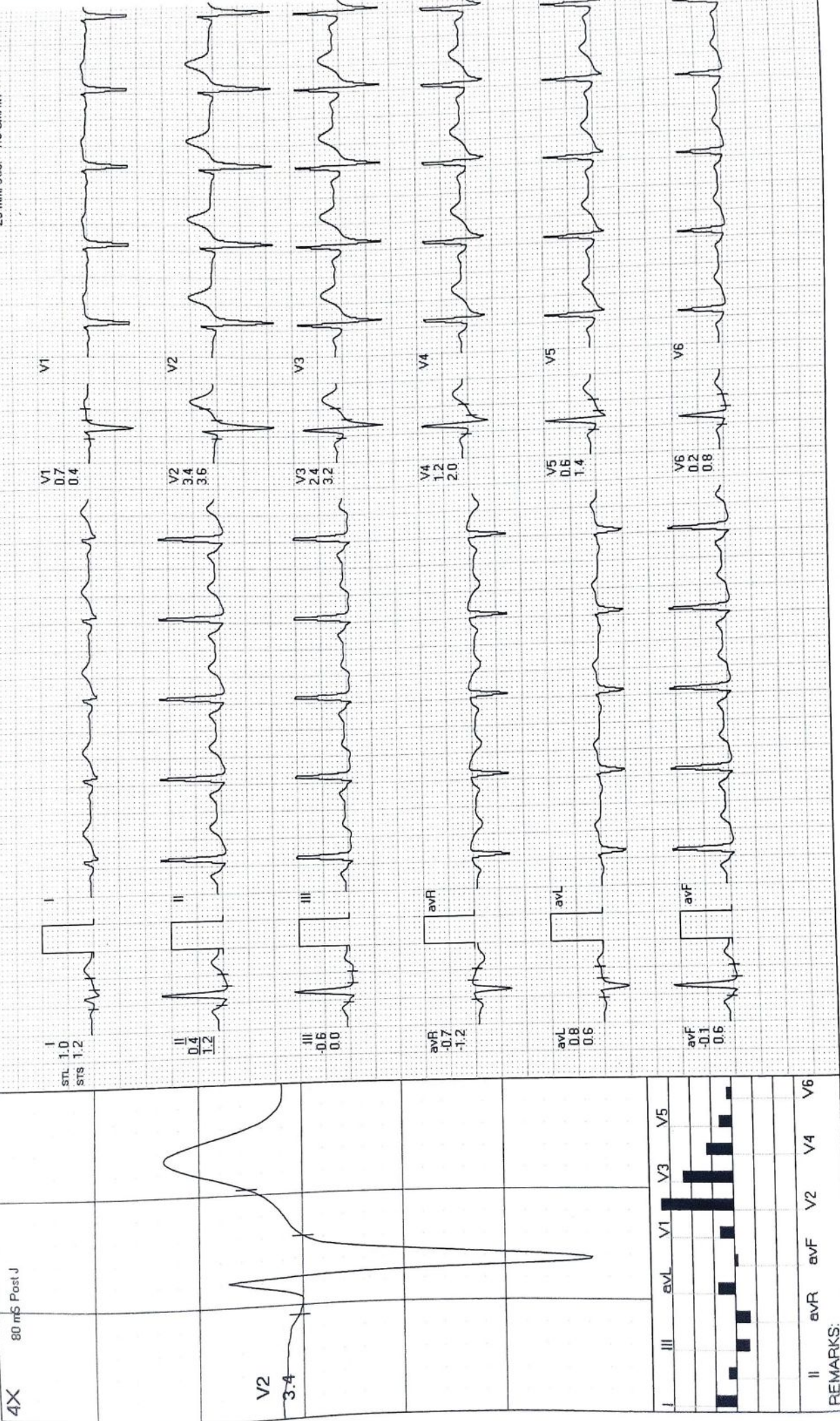
ashish kumar verma / 37 Yrs / M / 168 Cms / 72 Kg / HR : 94

ExTime: 06:45 0.0 KmPh. 0.0%

METS: 1.0/94 bpm 51% of THR BP: 134/92 mmHg Combined Medians/BLC On/ HF 0.05 Hz/LF 35 Hz

Date: 30-08-2024

25 mm/Sec. 1.0 Cm/mV



REMARKS:

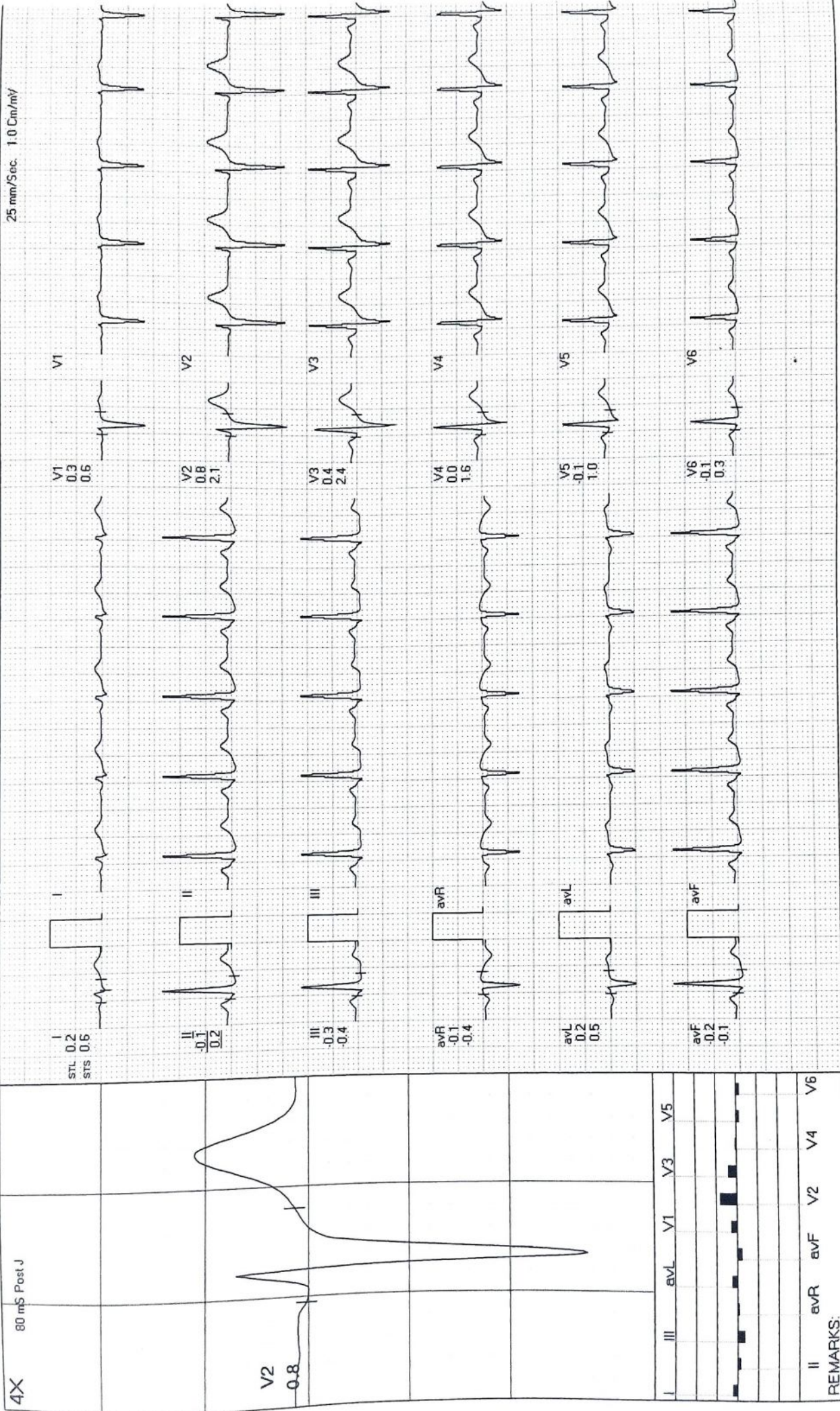


Recovery(3:00)

MODERN PATHOLOGY AND DIAGNOSTIC CENTER

ashish kumar verma / 37 Yrs / M / 168 Cms / 72 Kg / HR : 99

Date 30-08-2024 METS: 1.0/99 bpm 54% of THR BP: 132/90 mmHg Combined Medians/ BLC Or/ Natch Or/ HF 0.05 Hz/LF 35 Hz ExTime: 06:45 0.0 Kmph. 0.0%



REMARKS: II avR avF V2 V4 V6

**MODERN PATHOLOGY AND DIAGNOSTIC CENTER**

*ashish kumar verma / 37 Yrs / M / 168 Cms / 72 Kg / HR : 96*

**Recovery(3:28)**

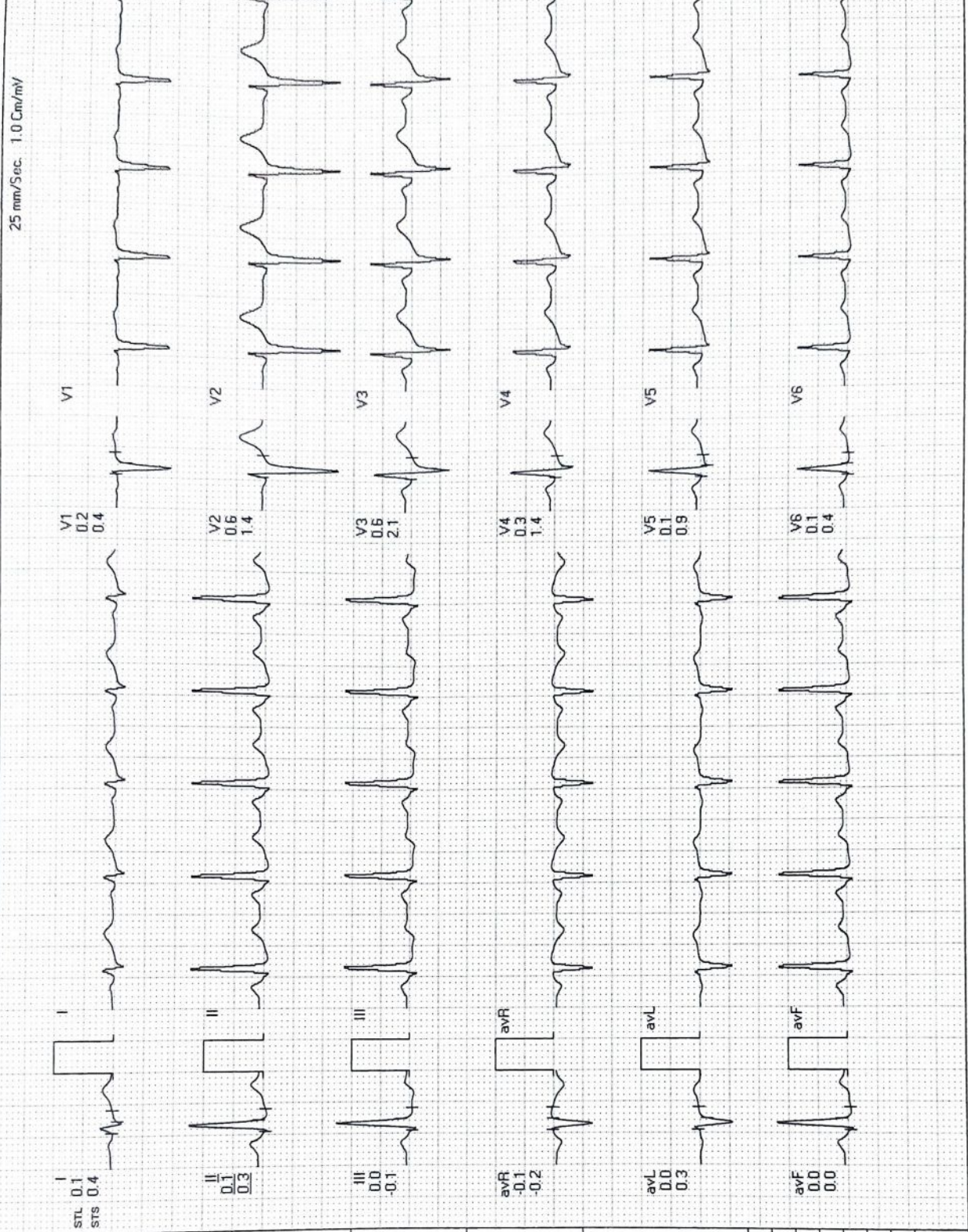
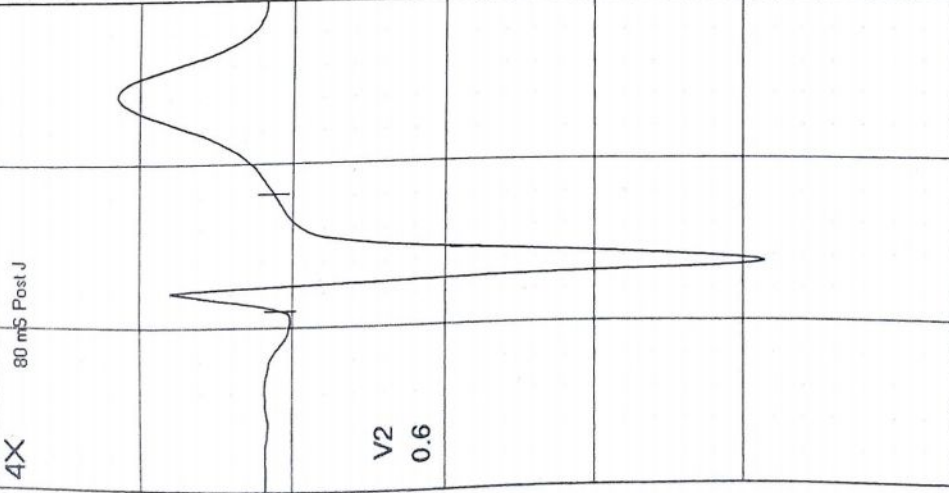


Date: 30-08-2024

METS: 1.0/96 bpm 52% of THR BP: 126/88 mmHg Combined Medians/BLC On/ HF 0.05 Hz/LF 35 Hz

ExTime: 06.45 0.0 Kmph, 0.0%

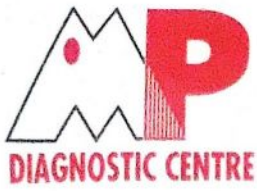
4X 80 mS Post J



I	III	avL	avF	V1	V2	V3	V4	V5	V6

REMARKS:





# MODERN PATHOLOGY & 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 :012408300010	SAMPLE DATE	:30/Aug/2024 08:49AM
NAME : <b>Mr. ASHISH KUMAR VERMA</b>	SAMPLE REC. DATE	:30/Aug/2024 08:49AM
AGE/SEX :37 YRS/MALE	REPORTED DATE	:30/Aug/2024 12:34PM
REFERRED BY : Apollo Health and Lifestyle Limited,	BARCODE NO	:01300010

### 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.

Please correlate clinically.

\*\*\* End Of Report \*\*\*



**Anjay Rastogi**  
DCP, CRIAT (BARC)

*Surbhi*  
**Dr.Surbhi**  
MBBS,MD (Radiodiagnosis)

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

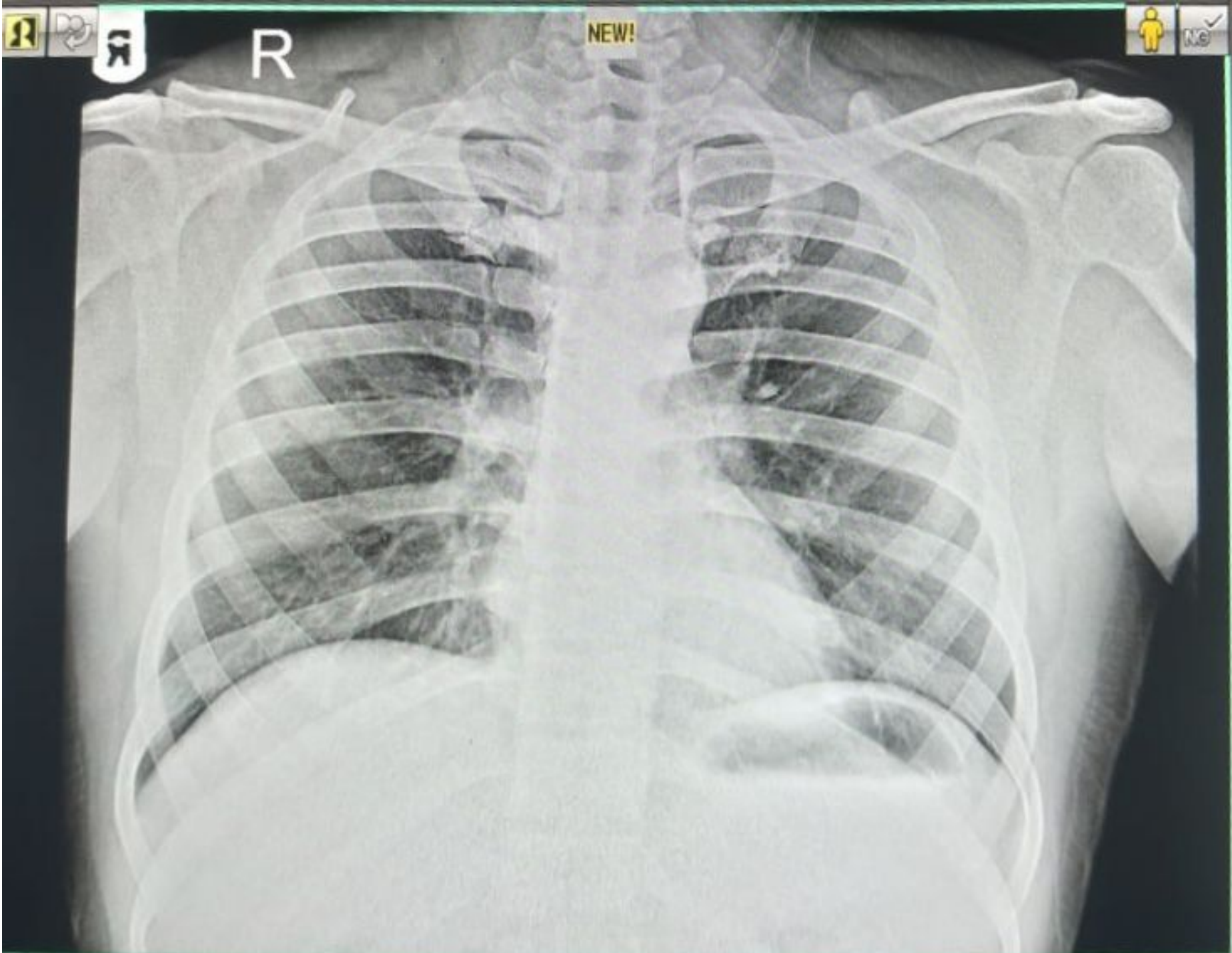
Results, adhering to W.H.O. and International Federation of Clinical Chemists Quality Control Standards.

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24083005699 MR ASHISH KUMAR VERMA 37YRS M SELF CHEST PA  
08/30/2024 MODERN PATHOLOGY & DIAGNOSTIC CENTRE GOMTI NAGAR LUCKNOW