

MER- MEDICAL EXAMINATION REPORT

Date of Examination	8/7/2023		
NAME	INDIKA YADAV		
AGE	49	Gender	R.
HEIGHT(cm)	148	WEIGHT (kg)	52
B.P.	134/80		
ECC	Normal		
X Ray	Normal		
Vision Checkup	Wiglow lenses, +2R R+D.		
Present Ailments	Thyroid (ongoing)		
Details of Past ailments (If Any)	None.		
Comments / Advice : She /He is Physically Fit	Medicines Rx		



Dr. Smita Rastogi
 MBBS, DCP
 Reg. No. 13270

Signature with Stamp of Medical Examiner

To
The Manager
Modern Pathology and Diagnostic Centre
Gomti Nagar, LKO.

08/07/23

Dear Sir / madam

I am Indira Yadav w/o Ramashraya Singh Yadava (Employee of BOB).

I am ready for Health checkup without ENT, Gynecal
and dietitian consultation, and also ready for
TMT ~~left~~ in place of 2DBCHO.

इन्दिरा

INDIKA YADAV

w/o Ramashraya Singh Yadava.

*





MODERN PATHOLOGY & DIAGNOSTIC CENTRE

Dr. R. P. Rastogi
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CLINIC :
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Gomti Nagar, Lucknow - 226 010
Ph.: 0522-4008184, 4308184 • 8112323230
Mob.: 7618884441, 9450389932, 8177063877

SAMPLE DATE : 08/7/2023
NAME : Mrs Indira Yadav
AGE/SEX : 49/YRS/FEMALE
REFERRED BY : Apollo Health

Test Name	Result	Bio. Ref. Range	Unit
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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 adequate 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 endometrial 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 ***

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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.

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Registration Date 08/07/2023

Age : 49 Sex: F

Name : Mrs Indira Yadav

Ref By: Apollo Health Care

Dr. H. S. Kholia
M.B.B.S., D.O.M.S.
Consultant Ophthalmologist
Registration No.: 34062 (M.C.I., U.P.)

EYES EXAMINATION REPORT

EYE SIGHT	DISTANT VISION		NEAR VISION	
	RIGHT	LEFT	RIGHT	LEFT
WITHOUT GLASSES	6/6	6/6	N-9	N-9
WITH GLASSES			N-6	N-6
POWER OF GLASSES IF USED			+0.75	+0.75
FUNDUS	NORMAL			
COLOR VISION	Present Normal according to ISHIHARA'S CHART			
PUPILS	Normally reacting to light and accommodation			



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TEST REQUEST ID :012307080030	SAMPLE DATE	:08/Jul/2023 09:27AM
NAME :Mrs. INDIRA YADAV	SAMPLE REC. DATE	:08/Jul/2023 09:27AM
AGE/SEX :49 YRS/FEMALE	REPORTED DATE	:08/Jul/2023 12:22PM
REFERRED BY : Apollo Health and Lifestyle Limited,	BARCODE NO	:01080030

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 ***

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DR. PANKAJ UPADHYAYA

Dr. Smita Rastogi
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TEST REQUEST ID	:012307080030	SAMPLE DATE	:08/Jul/2023 09:27AM
NAME	:Mrs. INDIRA YADAV	SAMPLE REC. DATE	:08/Jul/2023 09:27AM
AGE/SEX	:49 YRS/FEMALE	REPORTED DATE	:08/Jul/2023 01:16PM
REFERRED BY	: Apollo Health and Lifestyle Limited,	BARCODE NO	:01080030

USG WHOLE ABDOMEN-FEMALE

Liver: is normal in size (115 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 (81 mm), shape and echotexture. No focal echovariant lesion is seen. Splenic vein is normal.

Both Kidneys: are normal in size (RK- 85 x 39 mm & LK – 92 x 43 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 (57 x 25 x 38 mms), shape and echotexture. It is anteverted. Myometrium is homogenous. . Endometrial thickness is normal 2.6 mm. Cervix

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DR. PANKAJ UPADHYAYA
Consultant Radiologist

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

Print Date Time: 08/07/2023 1:16 PM

Checked By: Ashish Singh

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appears normal in size, shape and echotexture. No evidence of collection in cervical canal. **Well defined heterogeneously hypoechoic space occupying lesion of size 44 x 28 mm is seen in pelvic cavity in mid line posterior to uterine body abutting it.**

Bilateral Ovaries and adnexae Both ovaries are grossly normal.

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

OPINION:

- **WELL DEFINED HETEROGENEOUSLY HYPOECHOIC SPACE OCCUPYING LESION IN PELVIC CAVITY IN MID LINE POSTERIOR TO UTERINE BODY ABUTTING IT.....? UTERINE FIBROID...? OVARIAN ETIOLOGY**

Advised – MRI pelvis.

*** End Of Report ***

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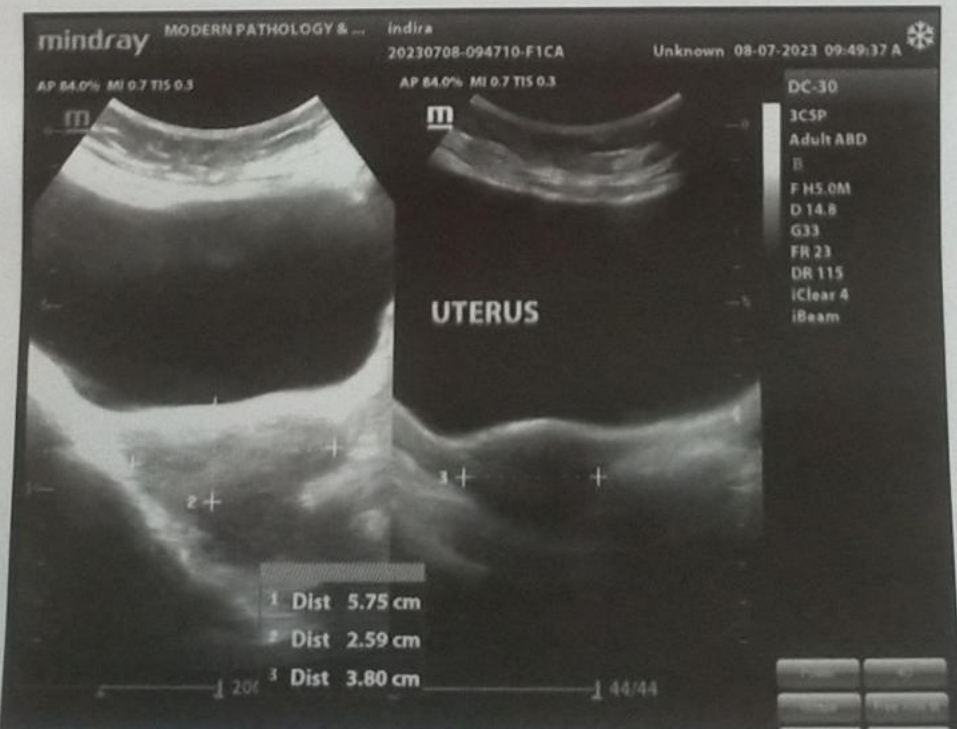
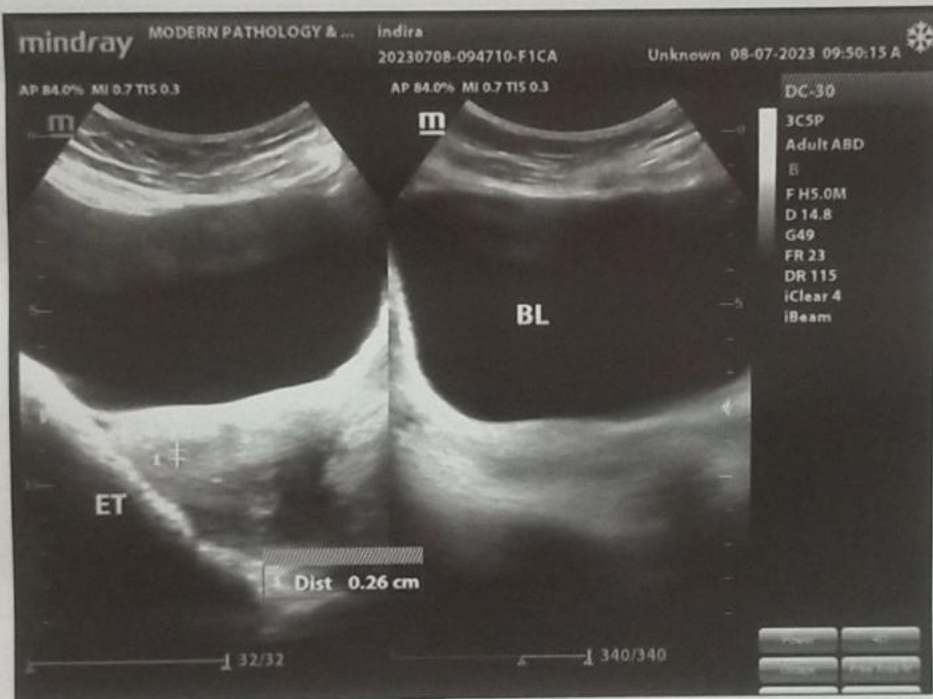
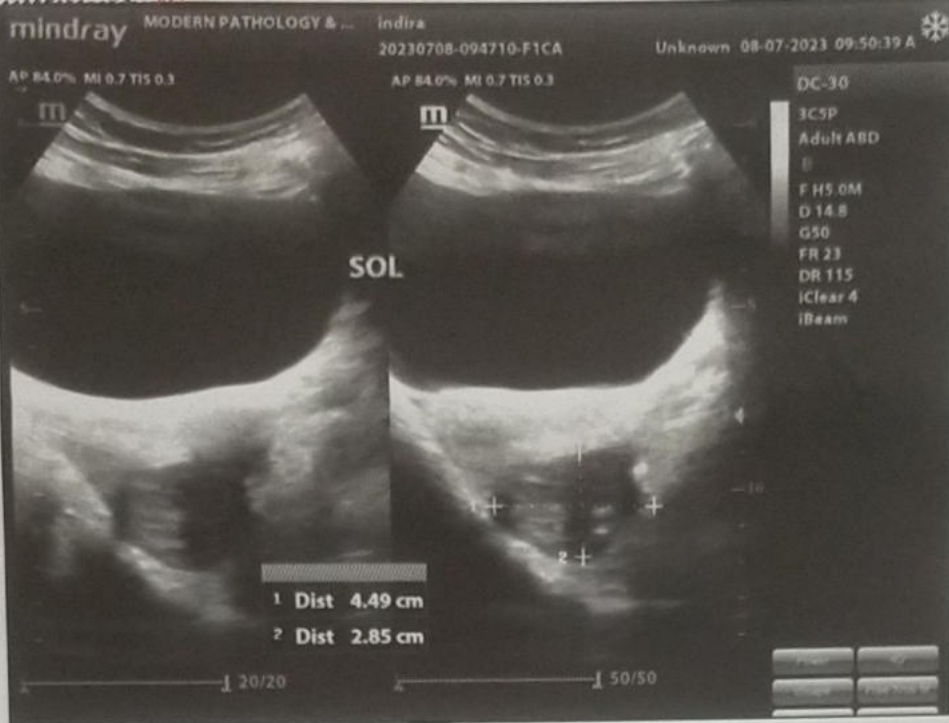
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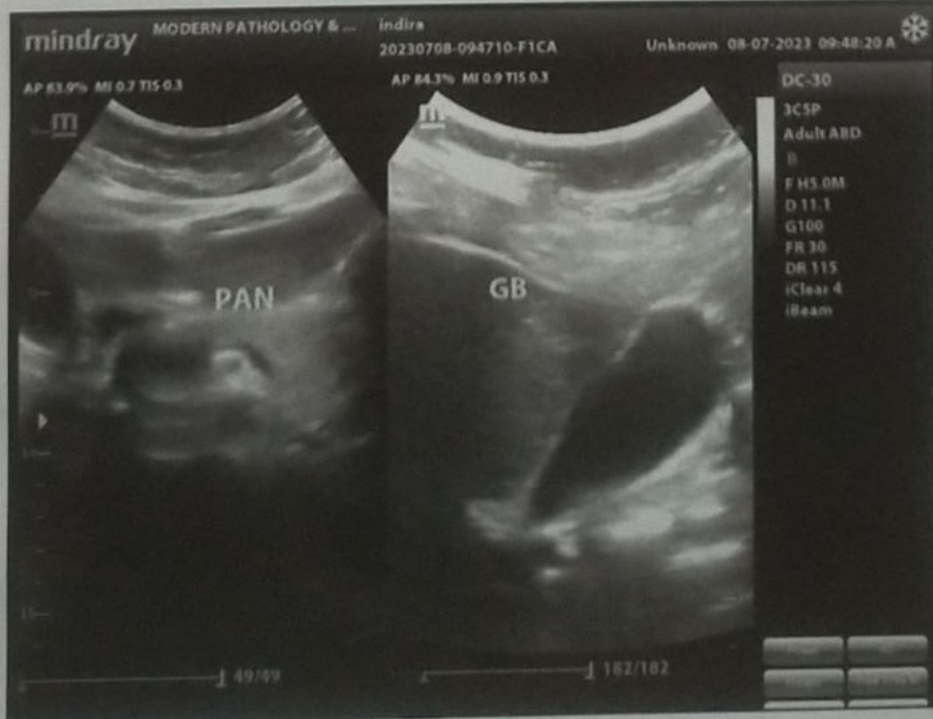
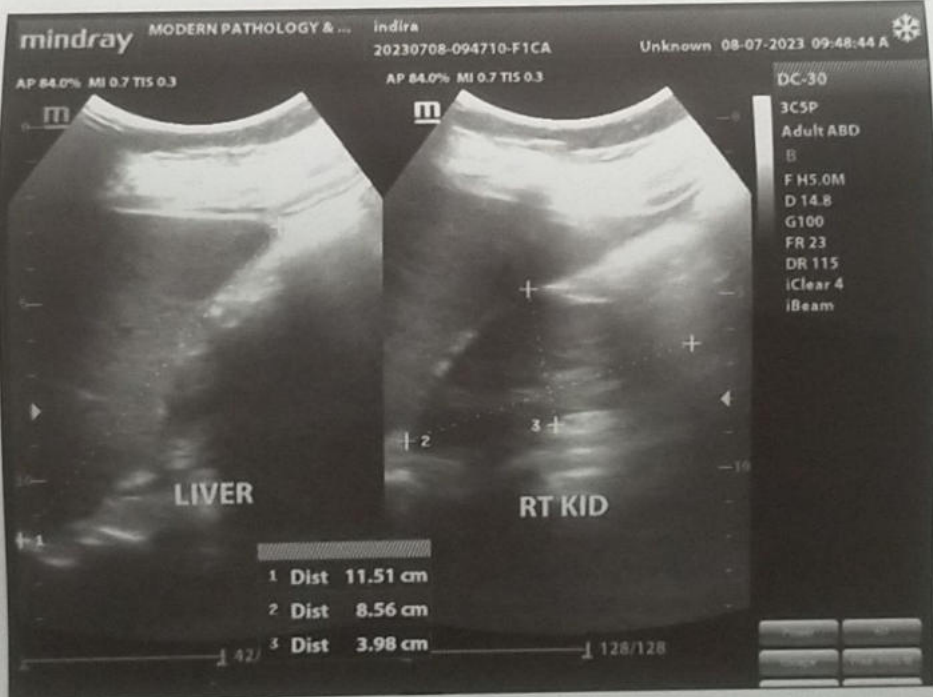
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Date	: 08-Jul-2023		
Name	: Mrs. INDIRA YADAV	Age	: 49 Yrs.
Ref.By	: APOLLO HEALTH	Sex	: Female
Haemoglobin	13.2	gm%	11 - 14
Total Leucocyte Count	4600	Cells/cumm.	4000-11000
Differential Leucocyte Count			
Polymorphs	55	%	45 - 70
Lymphocytes	37	%	20 - 45
Eosinophils	02	%	0 - 6
Monocytes	06	%	0 - 8
Basophils	00	%	0 - 1
Erythrocyte Sedimentation Rate (Wintrobe)			
ESR	16	mm in 1st Hr.	0 - 19
PCV	42.0	cc%	40 - 52
Corrected ESR	06	mm in 1st Hr.	0 - 19
Platelet Count	2.09	lakh/cumm.	1.5 - 4.0
Red Cells Count	4.51	million/cmm	3.90 to 4.60
Absolute values			
MCV	93.0	fL	77 - 97
MCH	29.2	pg	27 - 31
MCHC	31.4	gm /dl	31 - 34
Plasma Glucose - F GOD-POD Method	100	mg/dl	70 - 110
Plasma Glucose - PP GOD POD Method	118	mg/dl	110 - 170
Blood Group & Rh	"B" Positive		
Serum Gamma G.T.	14	IU/L	11 - 50

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Date	: 08-Jul-2023	Age	: 49 Yrs.
Name	: Mrs. INDIRA YADAV	Sex	: Female
Ref.By	: APOLLO HEALTH		

KFT			
UREA	18.1	mg %	15 - 50
CREATININE	0.74	mg %	0.5 - 1.5
URIC ACID	5.5	mg %	2 - 6
CALCIUM	9.1	mg %	8.8 - 10.0

LFT T&D			
Total Bilirubin	0.48	mg%	0.2 - 1.0
Direct Bilirubin	0.12	mg%	0.0 to 0.40
Indirect Bilirubin	0.36	mg%	0.10 to 0.90
S.G.P.T	29	IU/L	5 - 40
S.G.O.T	20	IU/L	5 - 50
ALP	82	IU/L	35 to 104

Urine Sugar (Fasting)	NIL
-----------------------	-----

Urine Sugar (PP)	NIL
------------------	-----

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Date : 08-Jul-2023	Age : 49 Yrs.
Name : Mrs. INDIRA YADAV	Sex : Female
Ref.By : APOLLO HEALTH	

Glycosylated Haemoglobin

Glycosylated Haemoglobin	6.0	%	4.5 TO 6.0
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=====

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.

Page 3
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Date	: 08-Jul-2023	Age	: 49 Yrs.
Name	: Mrs. INDIRA YADAV	Sex	: Female
Ref.By	: APOLLO HEALTH		

LIPID PROFILE

Triglycerids	145	mg%	70 - 190
S. Cholestrol S.	159	mg%	130 - 230
S. HDL Cholestrol	40.1	mg%	35 - 75
S. LDL Cholestrol	89.9	mg%	75 - 150
VLDL	29	mg%	0 - 34
Chol / HDL factor	3.97	Ratio	
LDL / HDL Factor	2.24		

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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Date : 08-Jul-2023

Name : **Mrs. INDIRA YADAV**

Age : 49 Yrs.

Ref.By : APOLLO HEALTH

Sex : Female

THYROID TEST

Tri-iodothyronine (T3)	1.90	nmol/L	0.50 to 2.50
Thyroxine (T4)	9.84	mcg/dL	5.0 to 12.5
Thyroid Stimulating Hormone (TSH)	1.61	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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Date : 08-Jul-2023

Name : **Mrs. INDIRA YADAV**

Age : 49 Yrs.

Ref.By : APOLLO HEALTH

Sex : Female

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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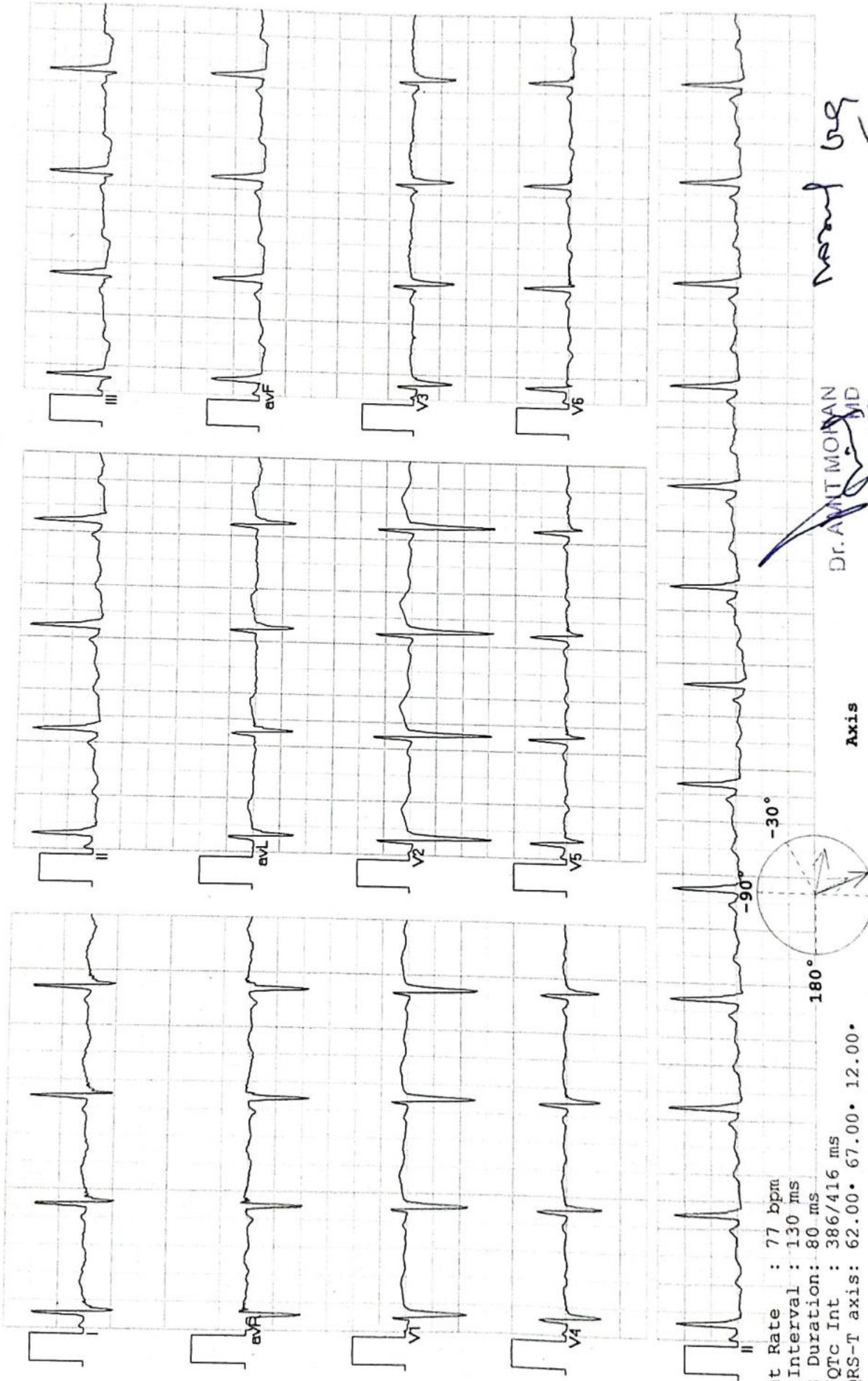
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Modern Pathology And Diagnostic Centre

81 / Indira yadav / 49 Yrs / F / Non Smoker
Heart Rate : 77 bpm / Tested On : 08-Jul-23 11:23:56 / HF 100 Hz - LF 100 Hz / Notch 50 Hz / Sn 1.00 Cm/mV / Sw 25 mm/s
/ Refd By: APOLLO HEALTH

ECG



Vent Rate : 77 bpm
PR Interval : 130 ms
QRS Duration: 80 ms
QT/QTc Int : 386/416 ms
P-QRS-T axis: 62.00° 67.00° 12.00°

Allengers ECG (Pisces)(PIS215191030)

Dr. ANANT MOHAN
MD
Req. No. 44559

Handwritten signature

Axis
90° R 67° T 12° P 62°

MODERN PATHOLOGY AND DIAGNOSTIC

Gomti Nagar Lucknow

Report



Indira Yadav / 49 Yrs / F / 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	00:05	0:05	00.0	00.0	01.0	078	46 %	134/80	104	00	
Standing	00:09	0:04	00.0	00.0	01.0	080	47 %	134/80	107	00	
HV	00:14	0:05	00.0	00.0	01.0	074	43 %	134/80	099	00	
ExStart	00:24	0:10	00.0	00.0	01.0	074	43 %	134/80	099	00	
BRUCE Stage 1	03:24	3:00	02.7	10.0	04.7	128	75 %	140/86	179	00	
BRUCE Stage 2	06:24	3:00	04.0	12.0	07.1	150	88 %	144/90	216	00	
PeakEx	06:36	0:12	05.5	14.0	07.3	146	85 %	144/90	210	00	
Recovery	07:36	1:00	00.0	00.0	01.2	109	64 %	142/88	154	00	
Recovery	08:36	2:00	00.0	00.0	01.0	094	55 %	138/84	129	00	
Recovery	09:36	3:00	00.0	00.0	01.0	098	57 %	136/84	133	00	
Recovery	09:54	3:18	00.0	00.0	01.0	094	55 %	136/82	127	00	

FINDINGS :

Exercise Time : 06:12
 Max HR Attained : 150 bpm 88% of Target 171
 Max BP Attained : 144/90 (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.

Dr. Anil K. HAN
 M.D.
 Reg. No. 44559

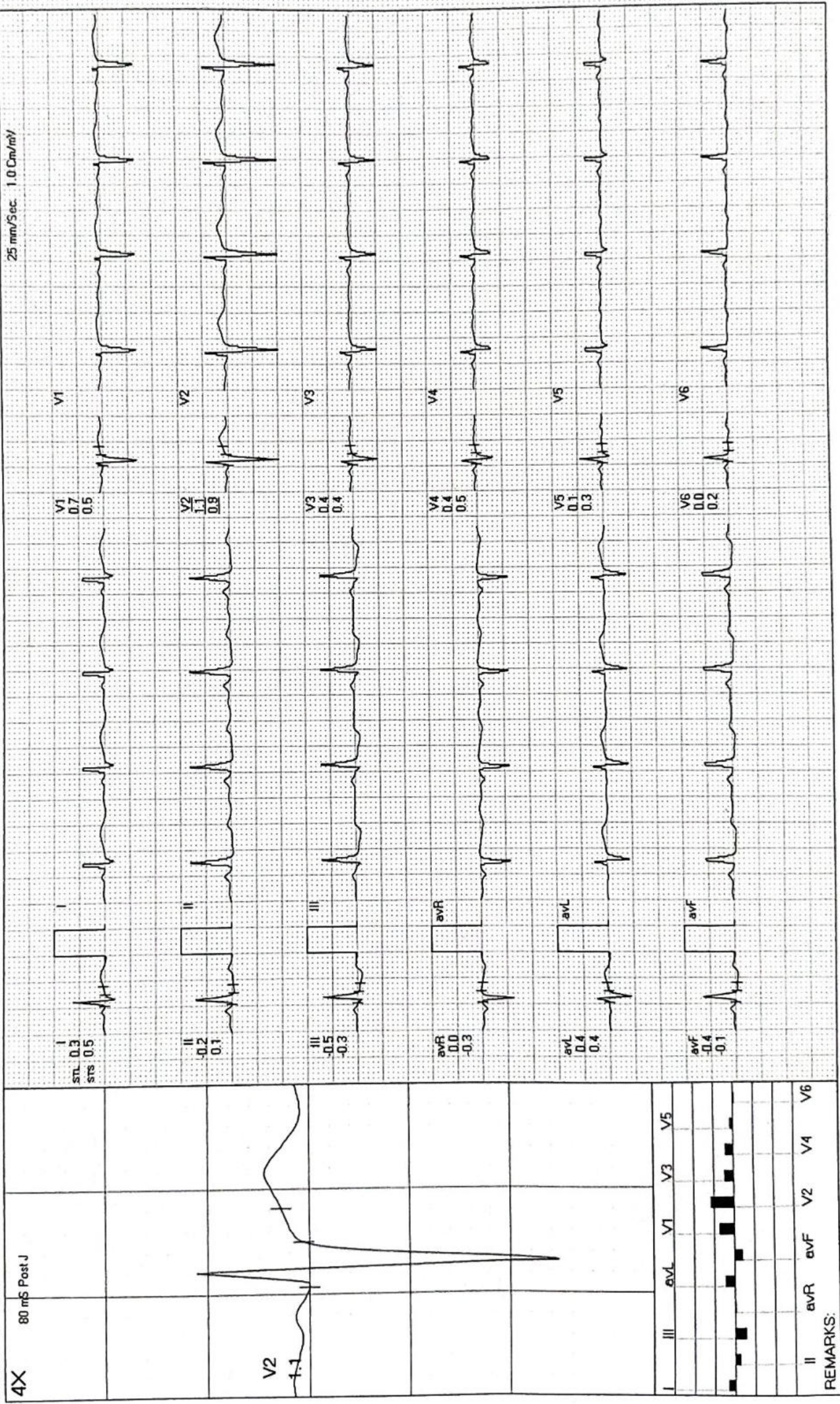


BRUCE:Supine(0:05)

MODERN PATHOLOGY AND DIAGNOSTIC

indira yadav / 49 Yrs / F / 0 Cms / 0 Kg / HR : 78

Date: 08-07-2023 METS: 1.07/78 bpm 46% of THR BP: 134/80 mmHg Combined Medians/ BLC On/ Notch On/ HF 0.05 Hz/ LF 35 Hz ExTime: 00:00 0.0 Kmph, 0.0%



REMARKS:

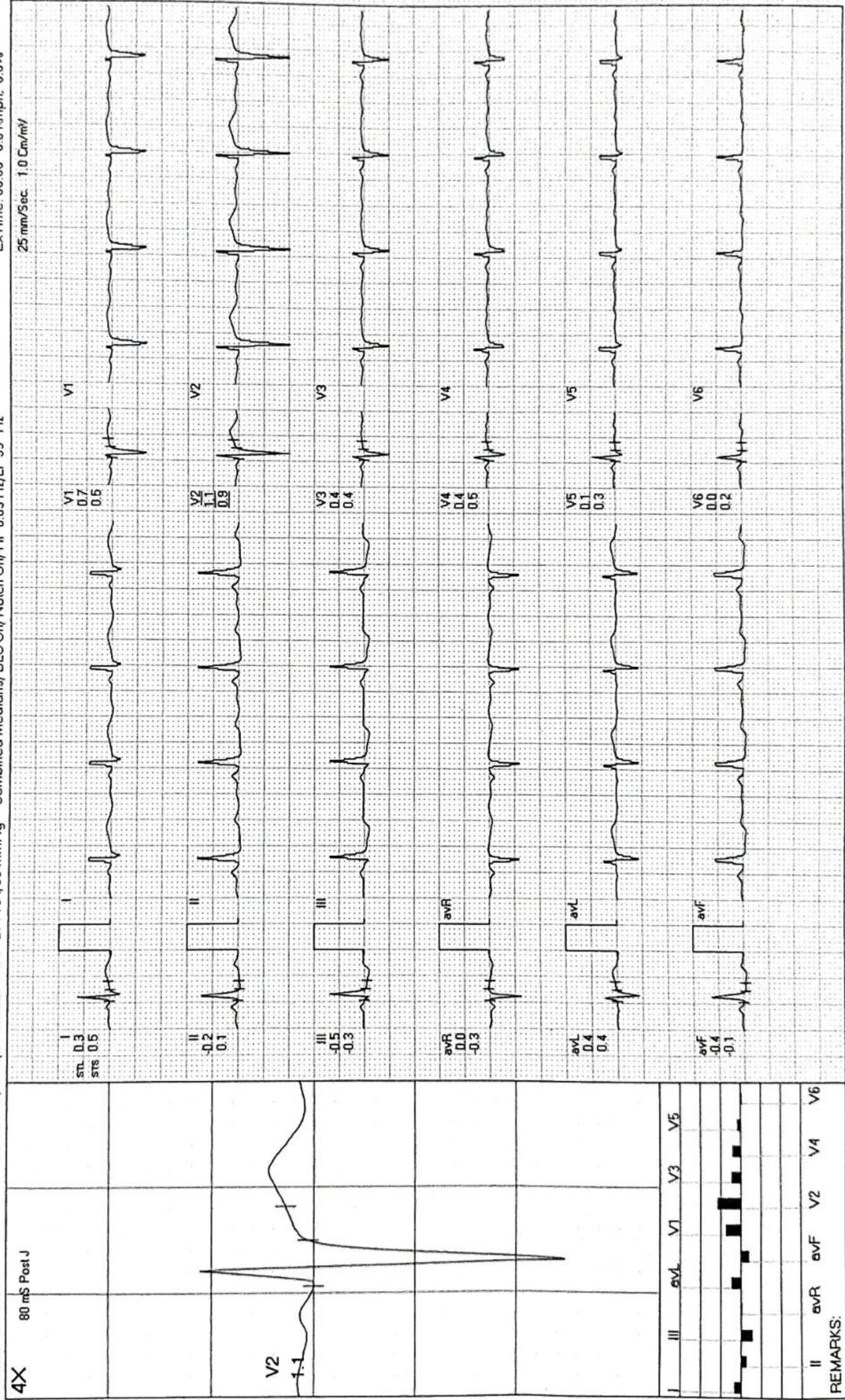
MODERN PATHOLOGY AND DIAGNOSTIC

indira yadav / 49 Yrs / F / 0 Cms / 0 Kg / HR : 80

BRUCE:Standing(0:05)



Date: 08 - 07 - 2023 METS: 1.0/ 80 bpm 47% of THR BP: 134/80 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 25 mm/Sec. 1.0 Cm/mV



REMARKS:
 II aVR aVF V2 V4 V6

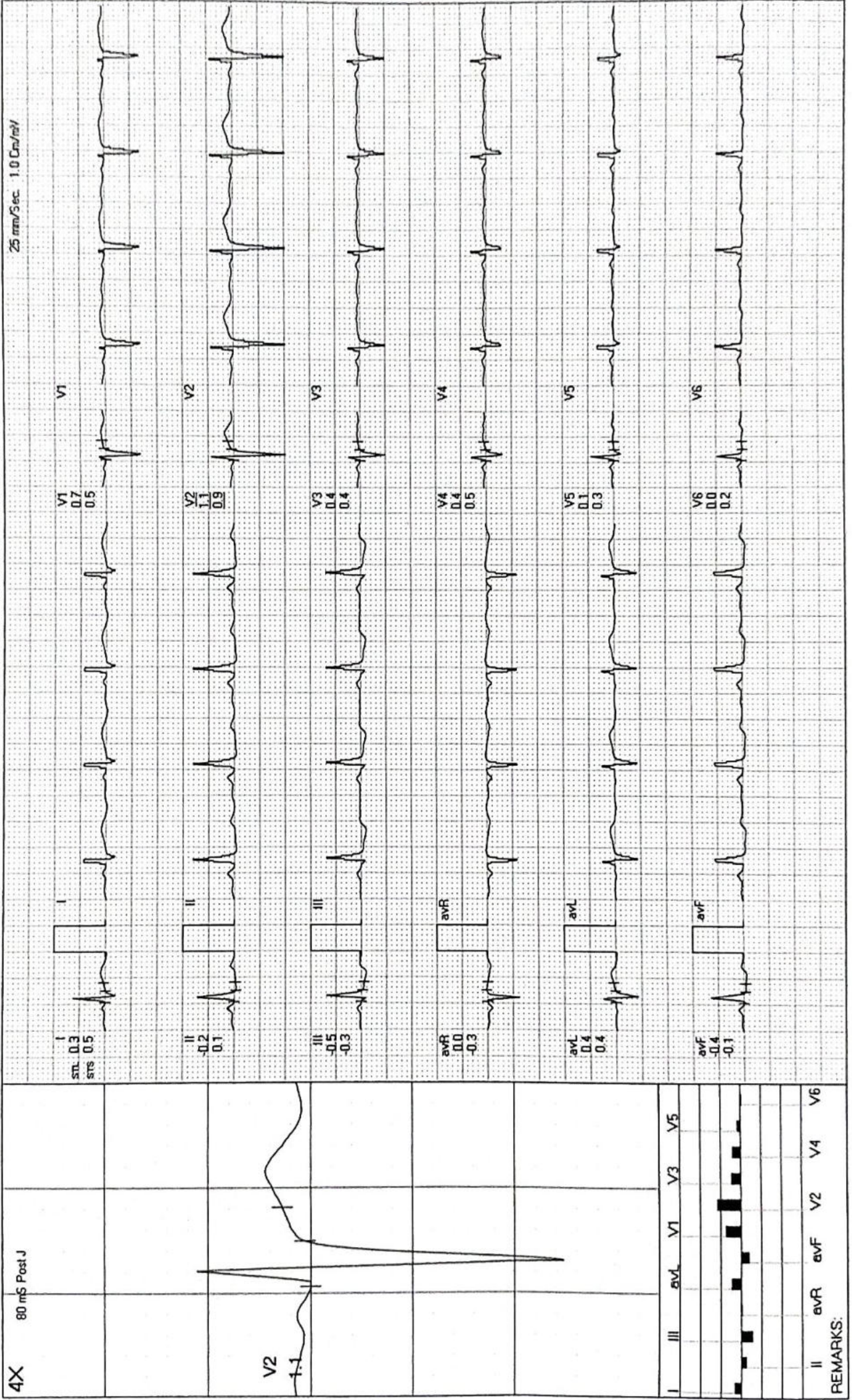
MODERN PATHOLOGY AND DIAGNOSTIC

indira yadav / 49 Yrs / F / 0 Cms / 0 Kg / HR : 74

BRUCE:HV(0:06)



Date: 08-07-2023 METS: 1.0/74 bpm 43% of THR BP: 134/80 mmHg Combined Medians/BLC On/ HF 0.05 Hz/LF 35 Hz ExtTime: 00:00 0.0 Kmph, 0.0%



REMARKS:

MODERN PATHOLOGY AND DIAGNOSTIC

indira yadav / 49 Yrs / F / 0 Cms / 0 Kg / HR : 74

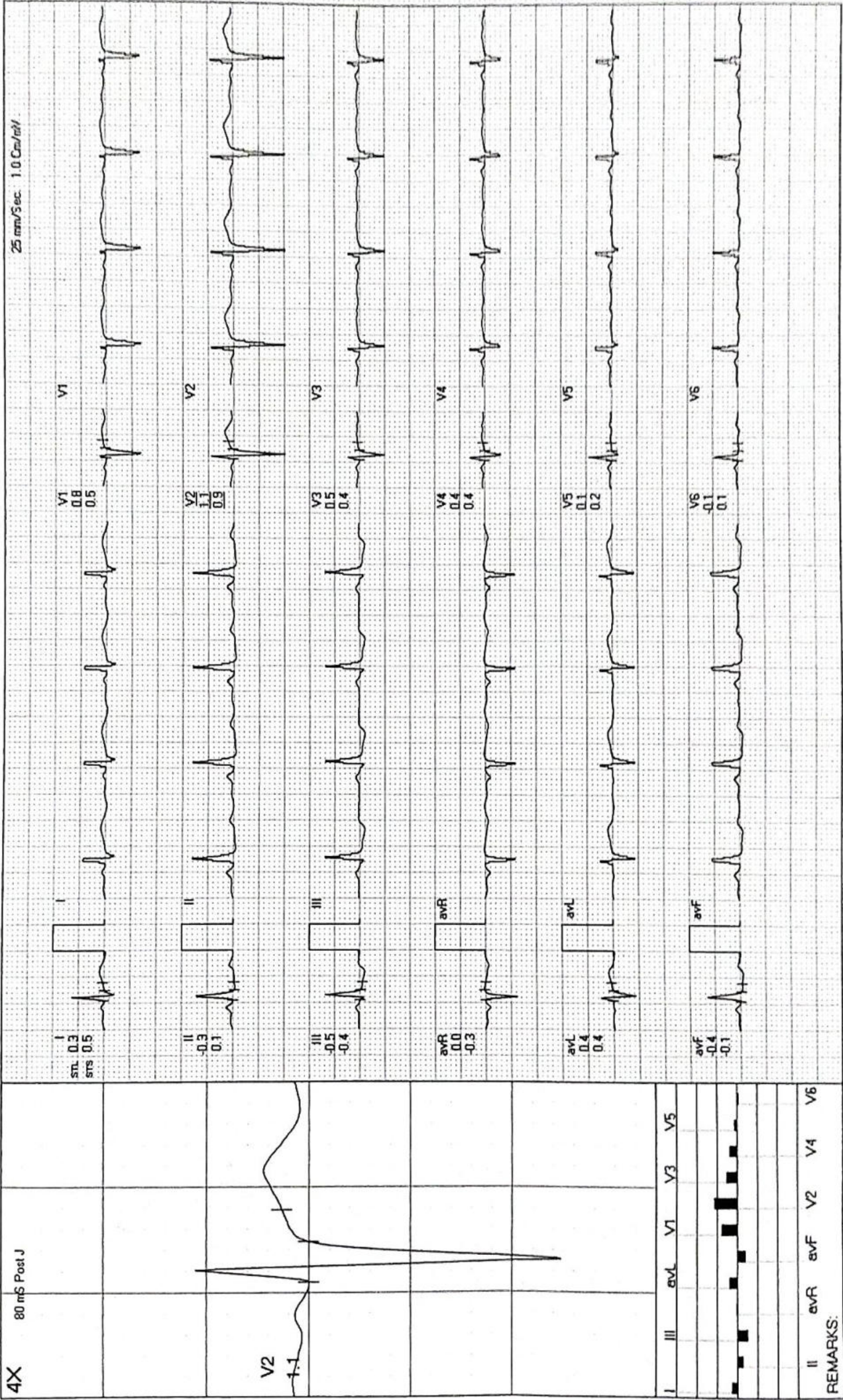
ExStart



Date: 08-07-2023

METS: 1.0 / 74 bpm 43% of THR BP: 134/80 mmHg Combined Medians/BLC On/ Natch On/ HF 0.05 Hz/LF 35 Hz

ExTime: 00:00 0.0 Km/ph. 0.0%



REMARKS:

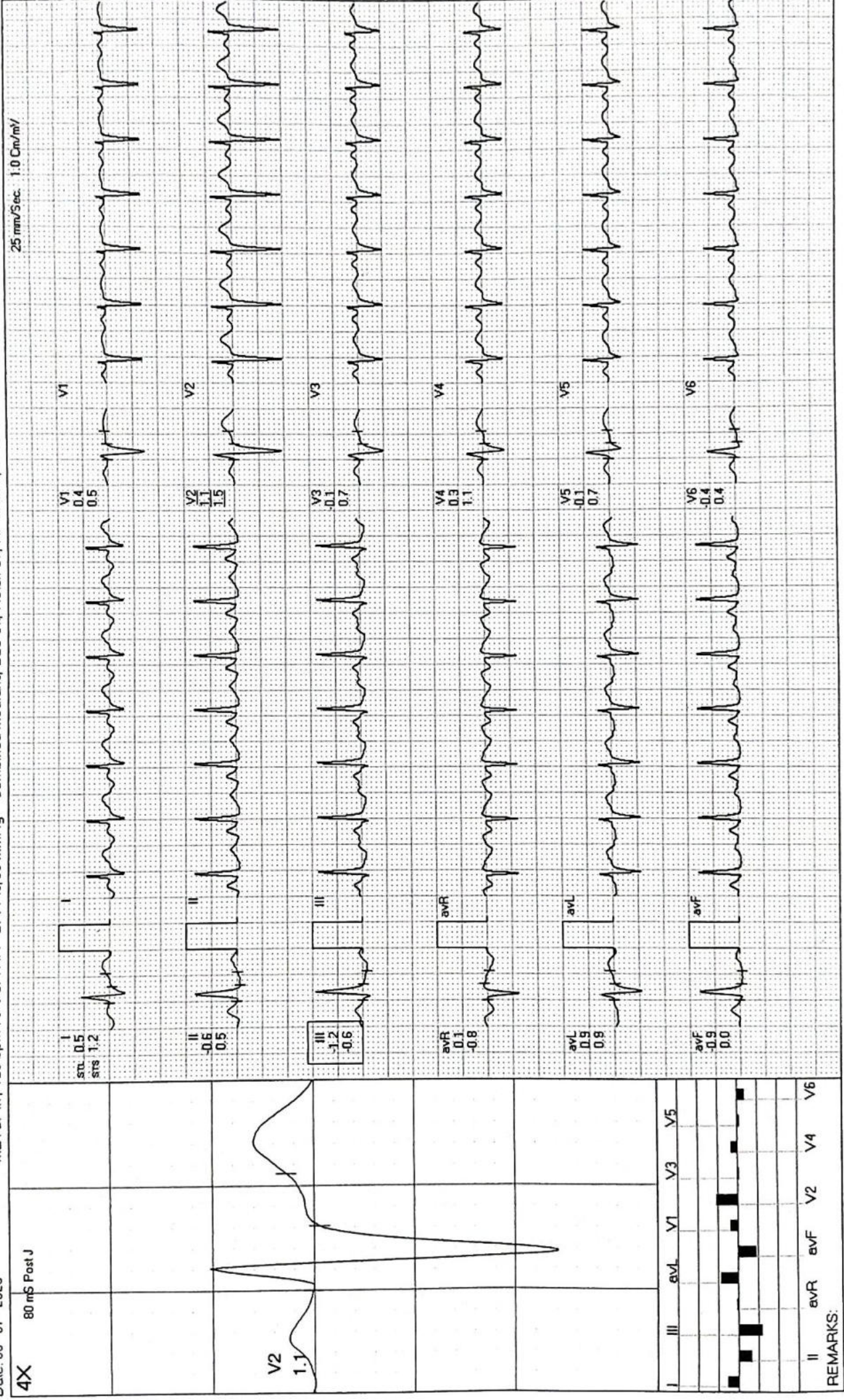


BRUCE: Stage 1(3:00)

MODERN PATHOLOGY AND DIAGNOSTIC

indira yadav / 49 Yrs / F / 0 Cms / 0 Kg / HR : 128

Date: 08 - 07 - 2023 METS: 4.7/128 bpm 75% of THR BP: 140/86 mmHg Combined Medians/BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz ExTime: 03:00 2.7 Kmph, 10.0%



REMARKS:

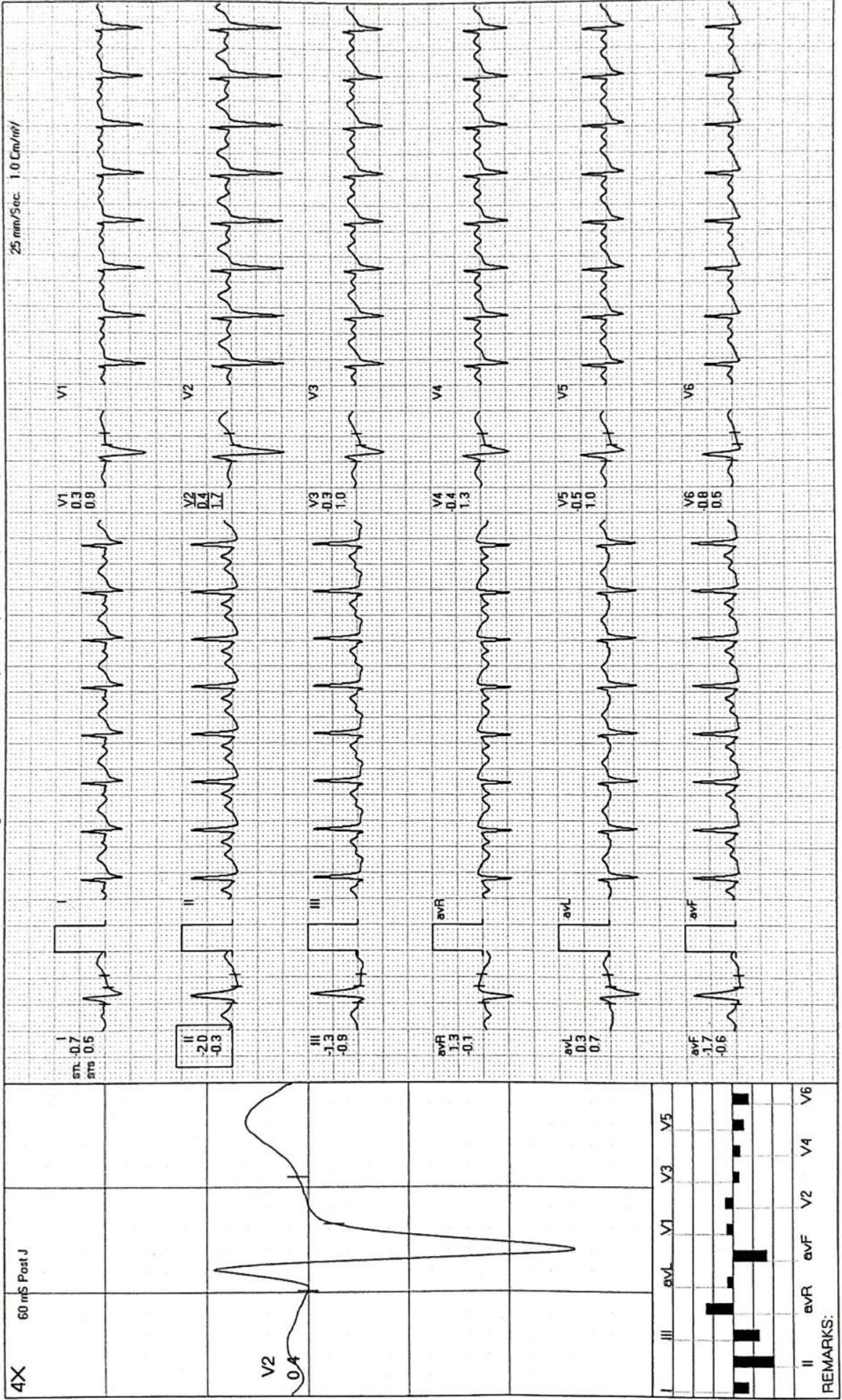
MODERN PATHOLOGY AND DIAGNOSTIC

indira yadav / 49 Yrs / F / 0 Cms / 0 Kg / HR : 150

BRUCE: Stage 2(3:00)



Date: 08 - 07 - 2023 METS: 7.1 / 150 bpm 88% of THR BP: 144/90 mmHg Combined Medians/BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz ExTime: 06:00 4.0 Km/ph. 12.0%



MODERN PATHOLOGY AND DIAGNOSTIC

indira yadav / 49 Yrs / F / 0 Cms / 0 Kg / HR : 146

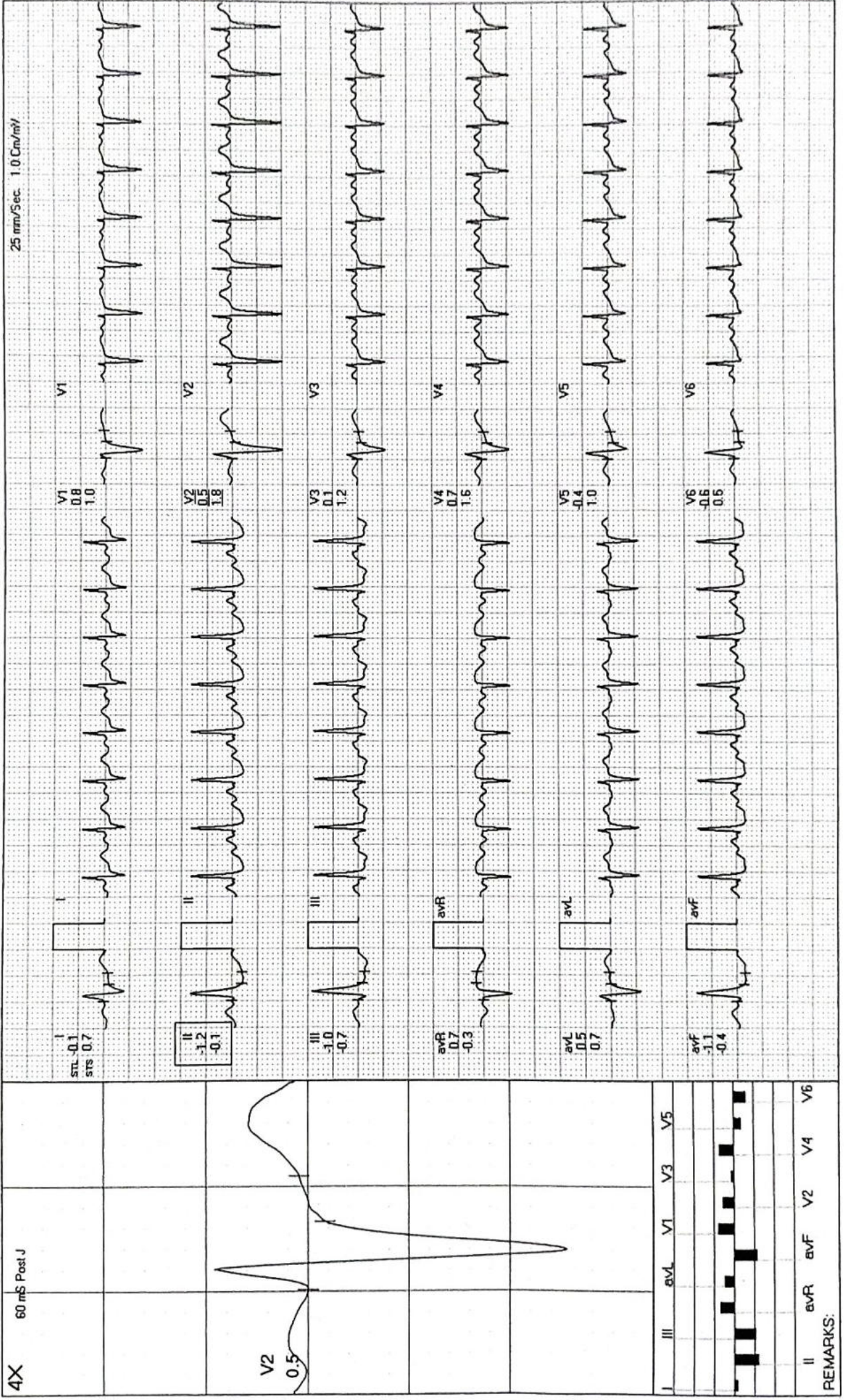


PeakEx

Date: 08 - 07 - 2023

METS: 7.3 / 146 bpm 85% of THR BP: 144/90 mmHg Combined Medians/BLC Onr/ Notch Onr/ HF 0.05 Hz/LF 35 Hz

ExTime: 06:12 5.5 Kmph, 14.0%



MODERN PATHOLOGY AND DIAGNOSTIC

indira yadav / 49 Yrs / F / 0 Cms / 0 Kg / HR : 109

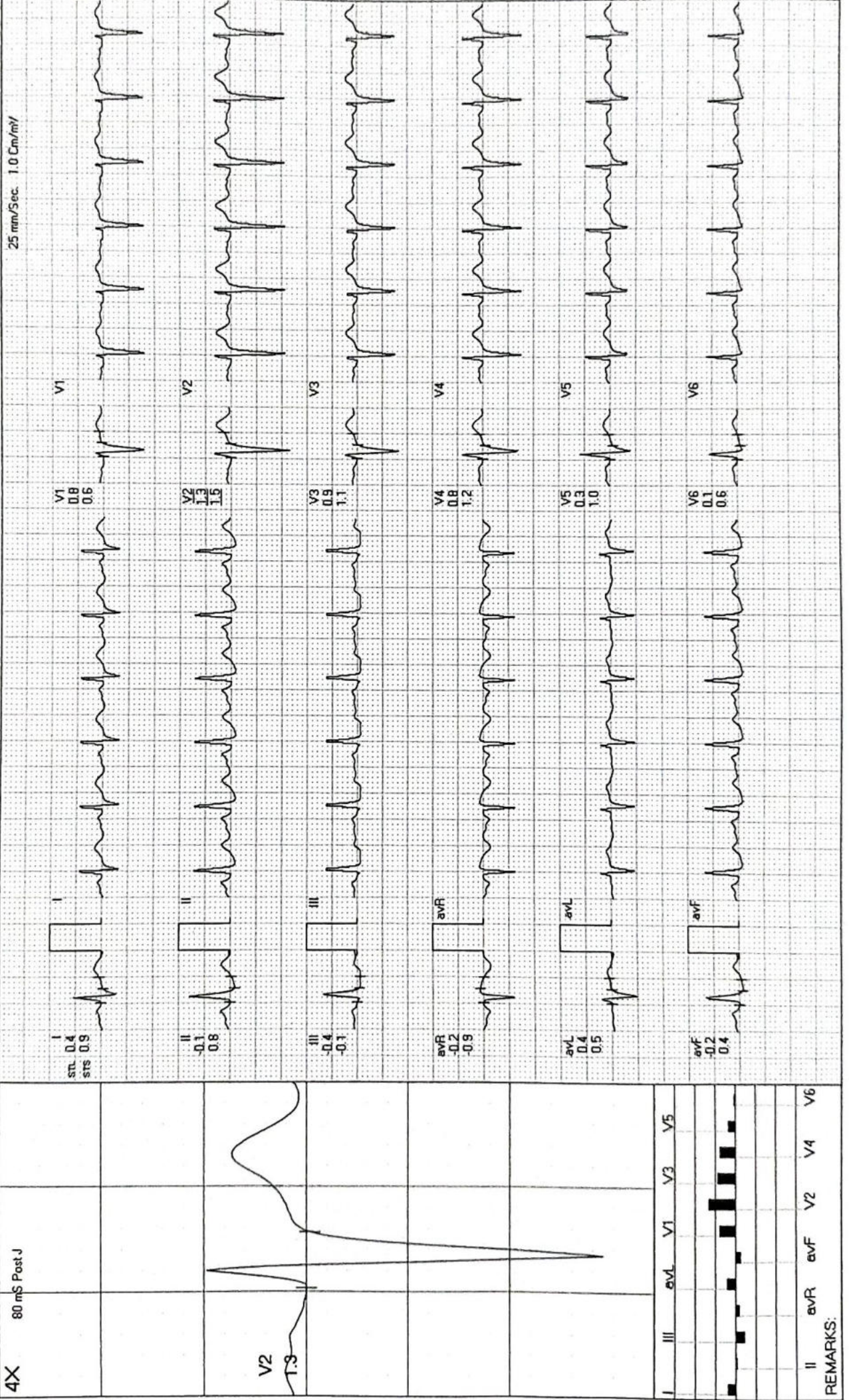
Recovery(1:00)



Date: 08 - 07 - 2023

METS: 1.2 / 109 bpm 64% of TH-R BP: 142/88 mmHg Combined Medians/BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

ExTime: 06:12 0.0 Kmph, 0.0%



REMARKS:

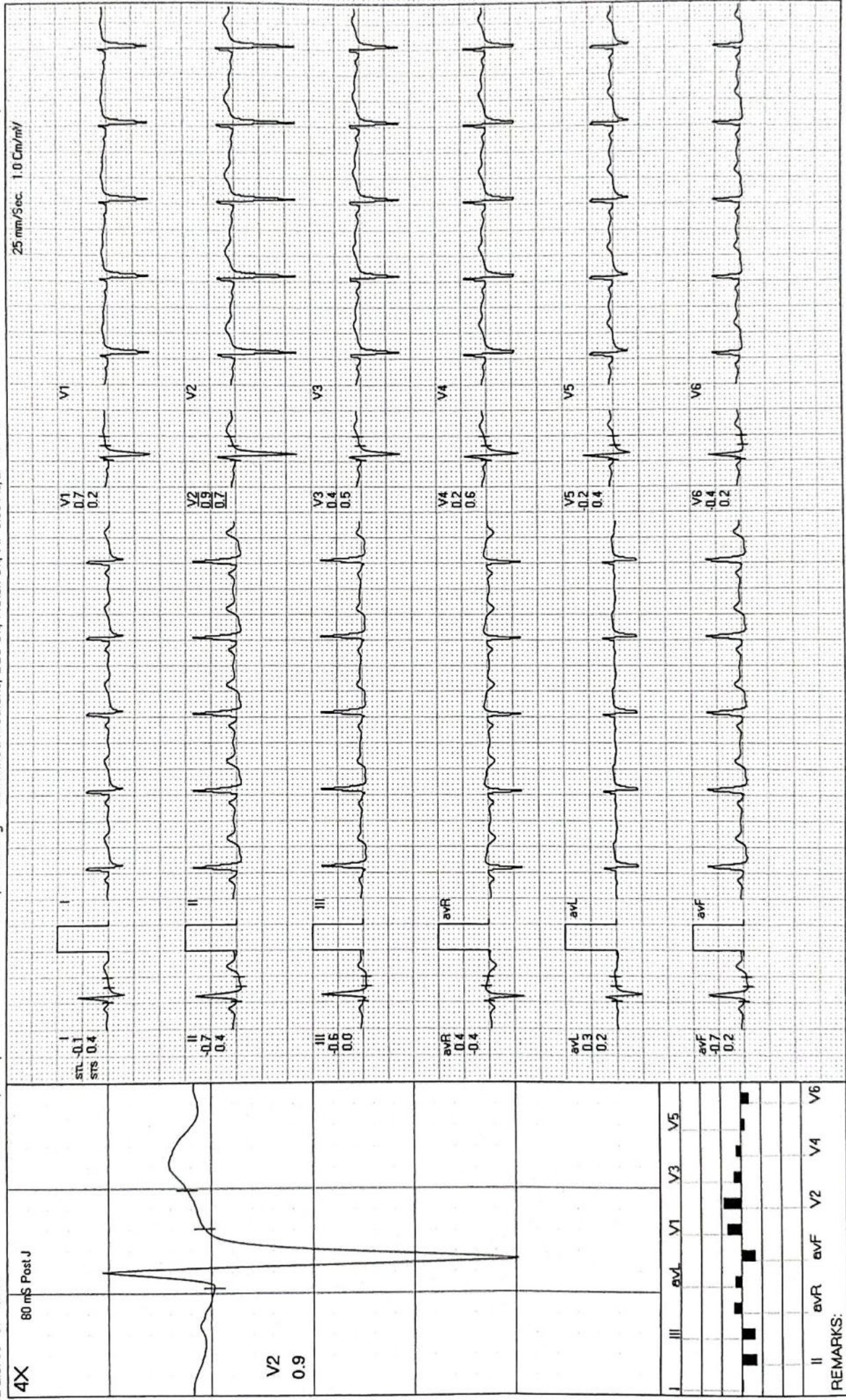
MODERN PATHOLOGY AND DIAGNOSTIC

indira yadav / 49 Yrs / F / 0 Cms / 0 Kg / HR : 94

Recovery(2:00)



Date: 08 - 07 - 2023 METS: 1.0/ 94 bpm 55% of THR BP: 138/84 mmHg Combined Mediations/ BLC On/ HF 0.05 Hz/LF 35 Hz ExTime: 06:12 0.0 Kmph, 0.0%



REMARKS:

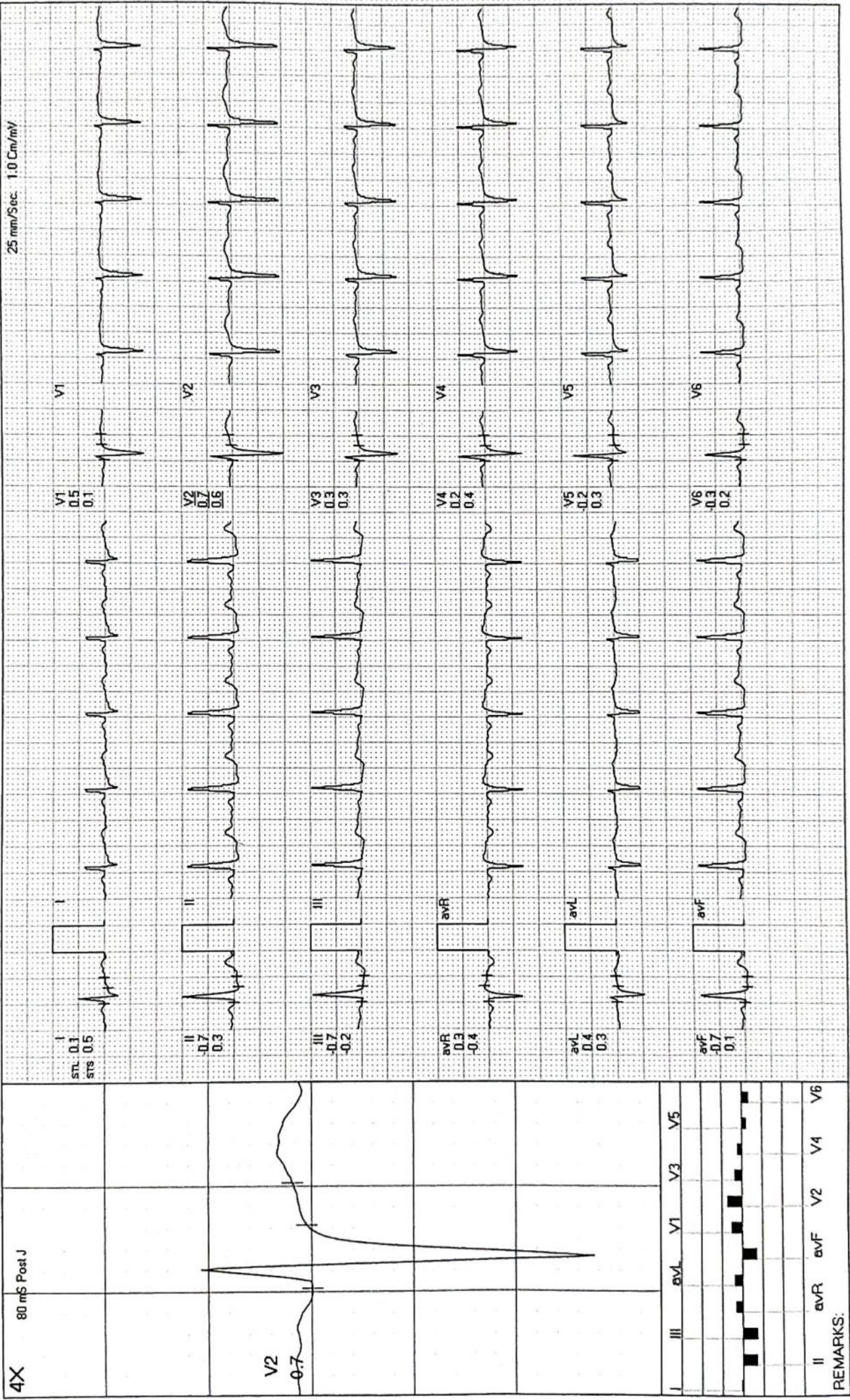
MODERN PATHOLOGY AND DIAGNOSTIC

indira yadav / 49 Yrs / F / 0 Cms / 0 Kg / HR : 98

Recovery(3:00)



Date: 08 - 07 - 2023 METS: 1.0/98 bpm 57% of THR BP: 136/84 mmHg Combined Medians/BLC On/Notch On/HF 0.05 Hz/LF 35 Hz ExTime: 06:12 0.0 Kmph. 0.0%



REMARKS:

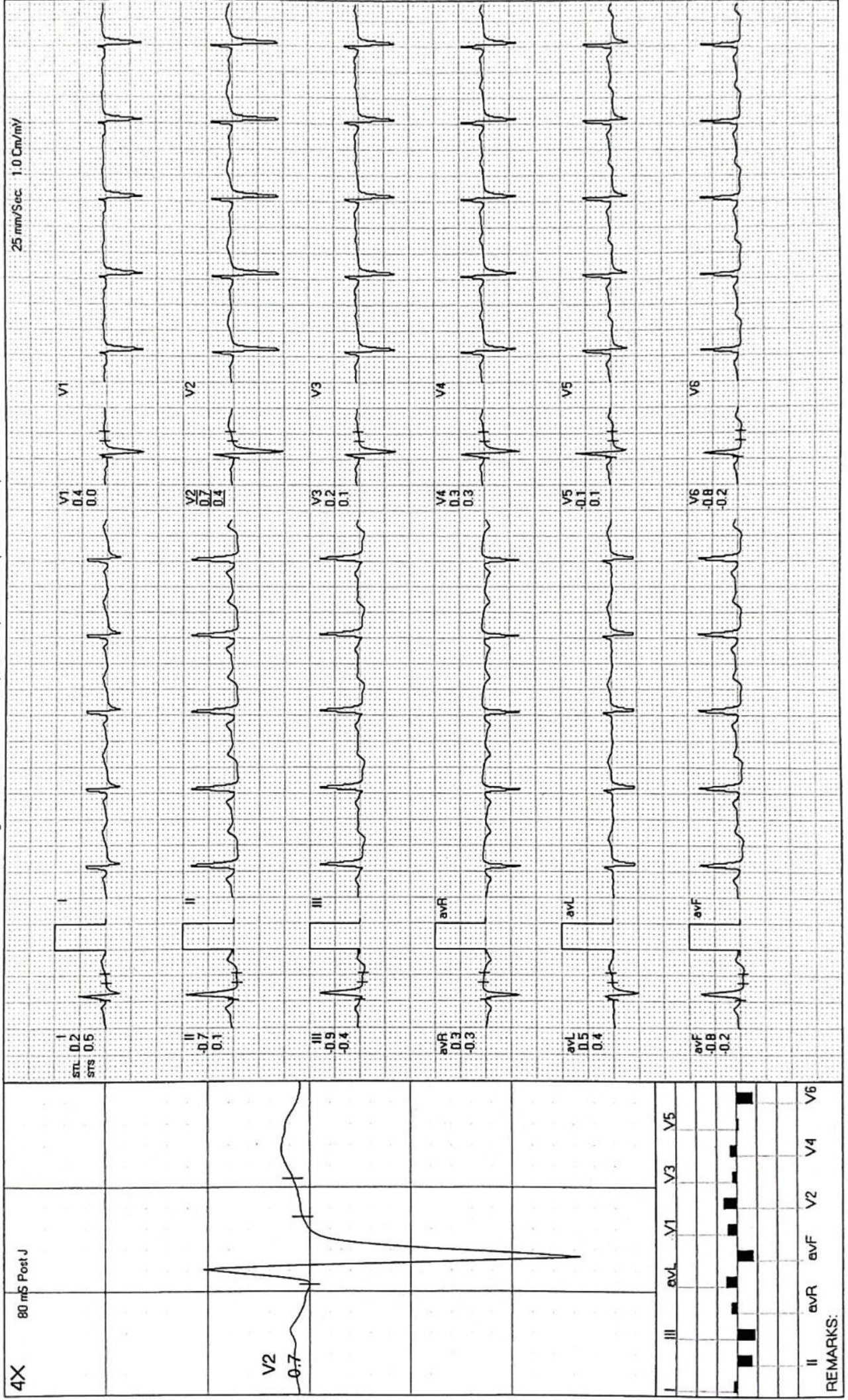
MODERN PATHOLOGY AND DIAGNOSTIC

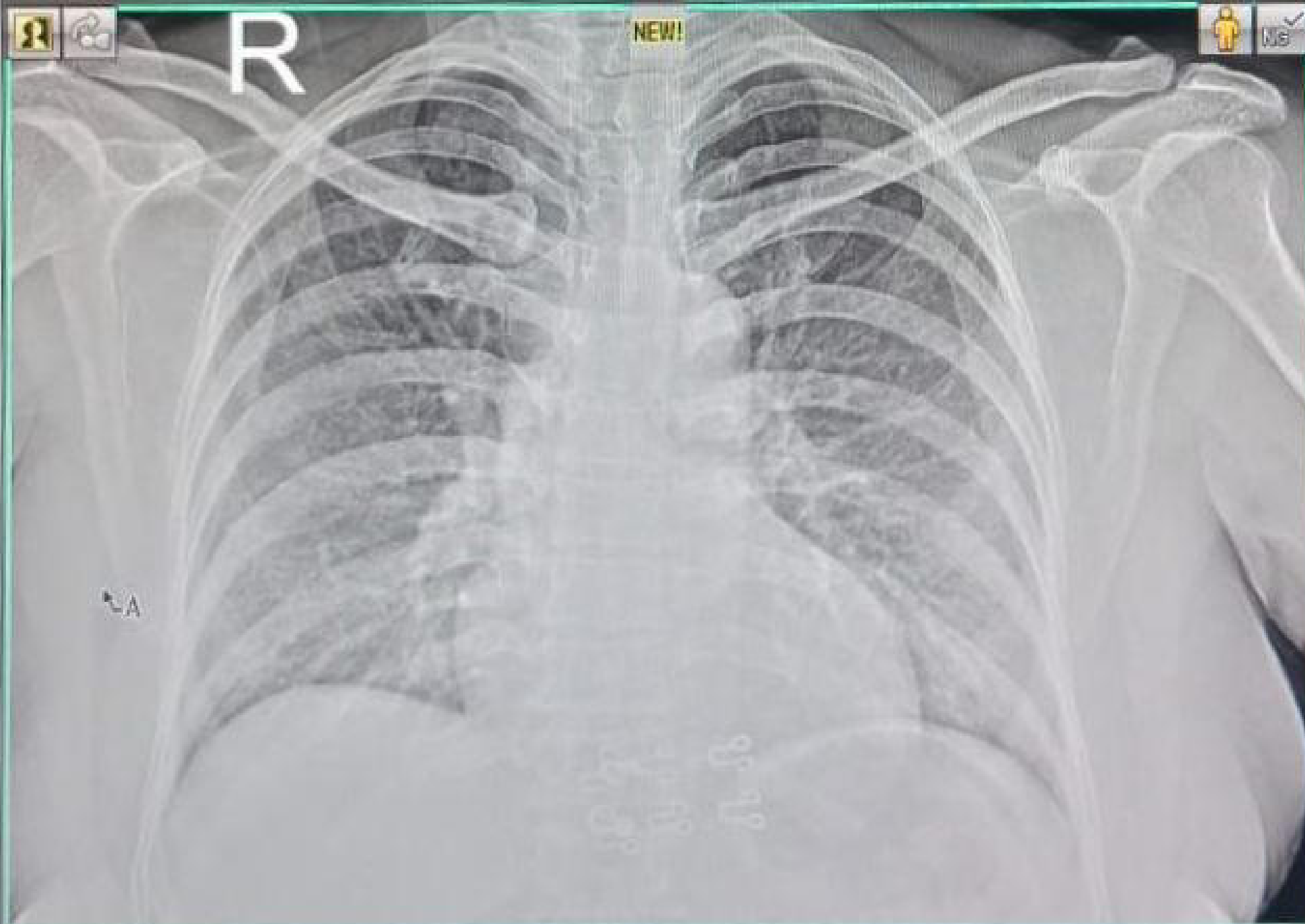
indira yadav / 49 Yrs / F / 0 Cms / 0 Kg / HR : 94

Recovery(3:18)



Date: 08 - 07 - 2023 METS: 1.0/94 bpm 55% of THR BP: 136/82 mmHg Combined Medians/ BLC On/ HF 0.05 Hz/LF 35 Hz ExTime: 06:12 0.0 Kmph, 0.0%





23070801083 MRS INDRA YADAV 00 YRS F DR SELF CHEST PA
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