



# 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 : 03/08/2024

NAME : Mrs Rakhi Verma

AGE : 26 Years      SEX : F

HEIGHT : 157 CMS

WEIGHT : 65 KGS

BMI : 26.4

Blood Pressure : 112/74

  
Dr. Smita Rastogi  
MBBS, DCP  
Reg. No. 37370



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

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

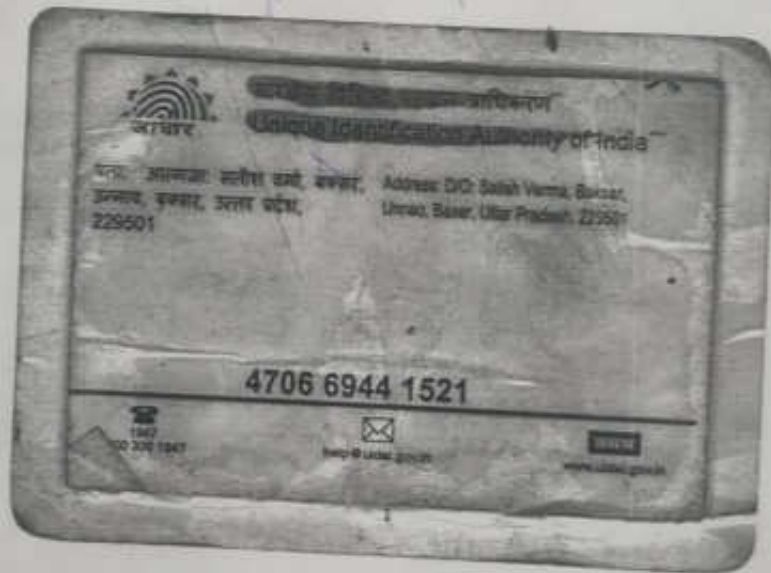
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Rakhi Verma





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Date	: 03-Aug-2024		
Name	: Mrs. RAKHI VERMA	Age	: 26 Yrs.
Ref.By	: APOLLO HEALTH	Sex	: Female

Haemoglobin	14.0	gm%	11 - 14
-------------	------	-----	---------

Total Leucocyte Count	9500	Cells/cumm.	4000-11000
-----------------------	------	-------------	------------

Differential Leucocyte Count			
Polymorphs	59	%	45 - 70
Lymphocytes	33	%	20 - 45
Eosinophils	02	%	0 - 6
Monocytes	06	%	0 - 8
Basophils	00	%	0 - 1

Erythrocyte Sedimentation Rate (Wintrobe)			
ESR	06	mm in 1st Hr.	0 - 19
PCV	43.0	cc%	40 - 52
Corrected ESR	02	mm in 1st Hr.	0 - 19

Platelet Count	3.41	lakh/cumm.	1.5 - 4.0
----------------	------	------------	-----------

Red Cells Count	<b>6.09</b>	million/cmm	3.90 to 4.60
-----------------	-------------	-------------	--------------

Absolute values			
MCV	77.2	fL	77 - 97
MCH	27.1	pg	27 - 31
MCHC	31.5	gm /dl	31 - 34

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Date	: 03-Aug-2024	Age	: 26 Yrs.
Name	: Mrs. RAKHI VERMA	Sex	: Female
Ref.By	: APOLLO HEALTH		

### 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

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Dr. Smriti Rastogi

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Date	: 03-Aug-2024			
Name	: Mrs. RAKHI VERMA		Age	: 26 Yrs.
Ref.By	: APOLLO HEALTH		Sex	: Female
Plasma Glucose - F GOD-POD Method	93	mg/dl	70 - 110	
Plasma Glucose - PP GOD POD Method	sample not given		mg/dl	110 - 170
<b>LFT T&amp;D</b>				
Total Bilirubin	0.91	mg%	0.2 - 1.0	
Direct Bilirubin	0.24	mg%	0.0 to 0.40	
Indirect Bilirubin	0.67	mg%	0.10 to 0.90	
S.G.P.T	41	IU/L	5 - 40	
S.G.O.T	35	IU/L	5 - 50	
ALP	78	IU/L	35 to 104	
Serum Gamma G.T.	18	IU/L	11 - 50	
Blood Group & Rh	"B" Positive			
<b>KFT</b>				
UREA	18.4	mg %	15 - 50	
CREATININE	1.0	mg %	0.5 - 1.5	
URIC ACID	4.8	mg %	2 - 6	
CALCIUM	9.3	mg %	8.8 - 10.0	
Urine Sugar (Fasting)	NIL			
Urine Sugar (PP)	sample not given			

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Date	: 03-Aug-2024		
Name	: Mrs. RAKHI VERMA	Age	: 26 Yrs.
Ref.By	: APOLLO HEALTH	Sex	: Female

### THYROID TEST

Tri-iodothyronine (T3)	1.65	nmol/L	0.50 to 2.50
Thyroxine (T4)	6.80	mcg/dL	5.0 to 12.5
Thyroid Stimulating Hormone (TSH)	3.45	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 : 03-Aug-2024  
Name : Mrs. RAKHI VERMA Age : 26 Yrs.  
Ref.By : APOLLO HEALTH Sex : Female

### LIPID PROFILE

Triglycerids	148	mg%	70 - 190
S. Cholestrol S.	170	mg%	130 - 230
S. HDL Cholestrol	40.2	mg%	35 - 75
S. LDL Cholestrol	100.2	mg%	75 - 150
VLDL	29.6	mg%	0 - 34
Chol / HDL factor	4.23		
LDL / HDL Factor	2.49		

### 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 : 03-Aug-2024	Age : 26 Yrs.
Name : <b>Mrs. RAKHI VERMA</b>	Sex : Female
Ref.By : APOLLO HEALTH	

### Glycosylated Haemoglobin

<b>Glycosylated Haemoglobin</b>	5.2	%	4.5 TO 6.0
=====			
<b>INTERPRETATION AND COMMENTS</b>			
=====			
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		
<p>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.</p>			

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Date : 03-Aug-2024

Name : Mrs. RAKHI VERMA

Age : 26 Yrs.

Ref.By : APOLLO HEALTH

Sex : Female

## 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 : 0-2 /hpf  
Red Blood Cells : Nil /hpf  
Casts : Nil  
Crystals : Nil  
Others : Nil

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Page 5 of End Of Report  
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Mob.: 7618884441, 9450389932, 817706387



TEST REQUEST ID :012408030029	SAMPLE DATE	:03/Aug/2024 09:40AM
NAME :Mrs. RAKHI VERMA	SAMPLE REC. DATE	:03/Aug/2024 09:40AM
AGE/SEX :26 YRS/FEMALE	REPORTED DATE	:03/Aug/2024 11:54AM
REFERRED BY : Apollo Health and Lifestyle Limited,	BARCODE NO	:01030029

### 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 \*\*\*



*Surbhi*

Dr.Surbhi  
MBBS,MD (Radiodiagnosis)

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Mob.: 7618884441, 9450389932, 8177063877

SAMPLE DATE : 03/08/2024  
NAME : Mrs Rakhi Verma  
AGE/SEX : 26/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 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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Mob.: 7618884441, 9450389932, 8177008817



TEST REQUEST ID :012408030029	SAMPLE DATE	:03/Aug/2024 09:40AM
NAME :Mrs. RAKHI VERMA	SAMPLE REC. DATE	:03/Aug/2024 09:40AM
AGE/SEX :26 YRS/FEMALE	REPORTED DATE	:03/Aug/2024 10:45AM
REFERRED BY : Apollo Health and Lifestyle Limited,	BARCODE NO	:01030029

## USG WHOLE ABDOMEN-FEMALE

**Liver:** is normal in size ( 141 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 ( 79 mm), shape and echotexture. No focal echovariant lesion is seen. Splenic vein is normal.

**Right Kidney:** is normal in size 102x36 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 96x43 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.



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TEST REQUEST ID :012408030029	SAMPLE DATE	:03/Aug/2024 09:40AM
NAME :Mrs. RAKHI VERMA	SAMPLE REC. DATE	:03/Aug/2024 09:40AM
AGE/SEX :26 YRS/FEMALE	REPORTED DATE	:03/Aug/2024 10:49AM
REFERRED BY : Apollo Health and Lifestyle Limited,	BARCODE NO	:01030029

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

**Uterus:** is normal in size ( 74x55x43 mms), shape and echotexture. It is anteverted. Myometrium is homogenous. No focal mass is seen. Endometrial thickness is normal 12.4 mm. Cervix appears normal in size 29.3 mm, shape and echotexture. No evidence of collection in cervical canal.

**Bilateral Ovaries and adnexae:** Both ovaries are bulky in size (RO - 44x30x20 mms vol 14.3 cc & LO - 35x30x22 mms vol 12.4 cc), normal shape and echotexture. No adnexal solid or cystic mass lesion is seen.

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

## OPINION:

- BILATERAL BULKY OVARIES.

Adv: S. LH & FSH correlation

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



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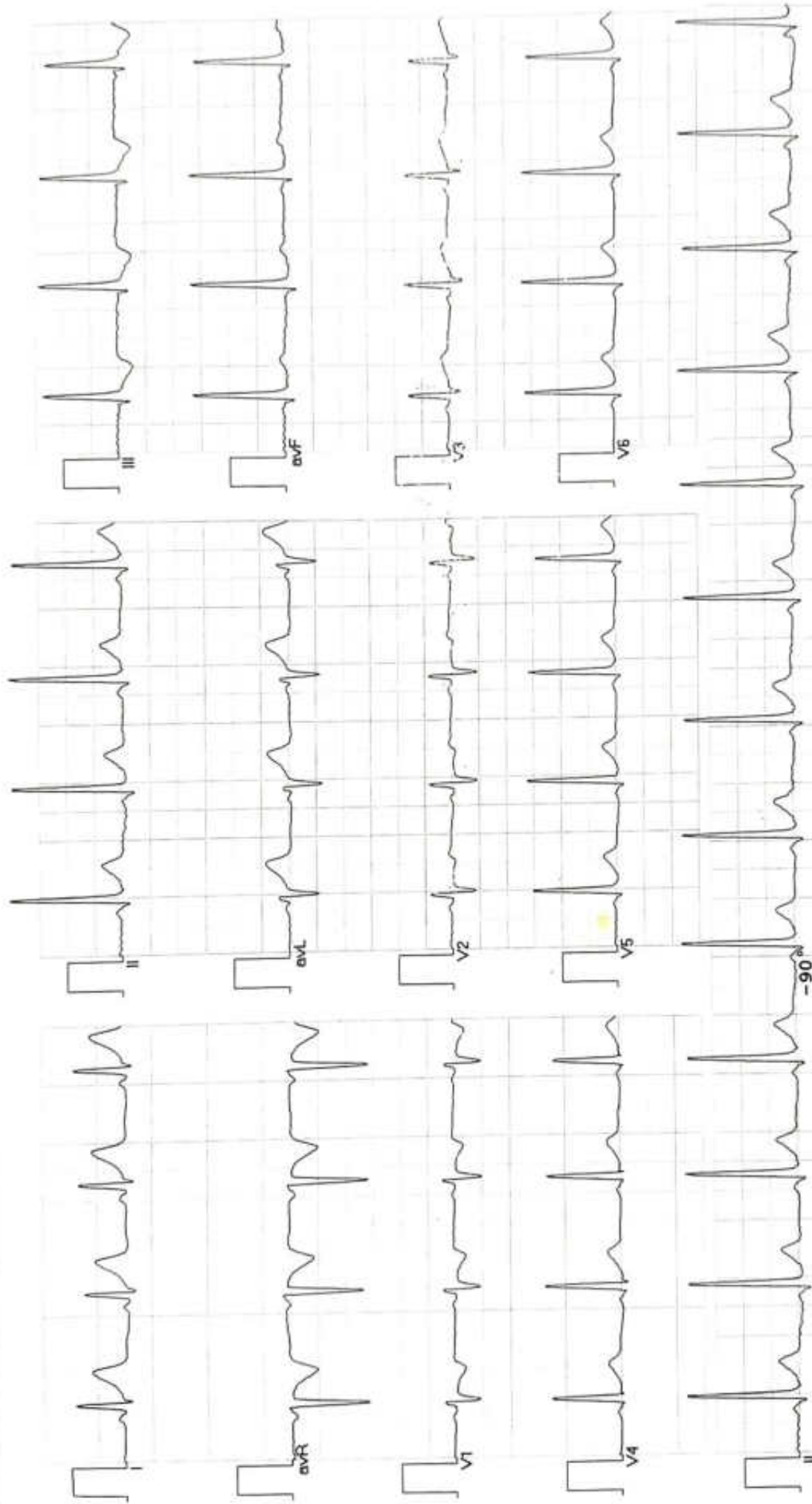


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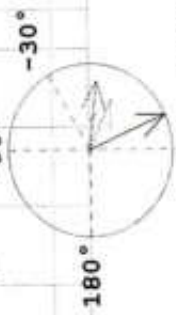
256 / RAKHI VERMA / 26 Yrs / F / 157Cms. / 65Kgs. / Non Smoker

Heart Rate : 75 bpm / Tested On : 03-Aug-24 11:11:08 / HF 0.05 Hz - LF 100 Hz / Notch 50 Hz / Sn 1.00 Cm/mV / Sw 25 mm/s

## ECG



Vent Rate : 75 bpm  
PR Interval : 100 ms  
QRS Duration: 86 ms  
QT/QTc Int : 358/384 ms  
P-QRS-T axis: 24.00 • 66.00 • 6.00 •



Normal ECG

Rakhi Verma

D. AMIT MOHAN MD  
Reg. No. 44559

Axis  
P 24°  
T 6°  
R 66°

Allergens ECG (Pisces)(PIS215191030)

MODERN PATHOLOGY AND DIAGNOSTIC CENTER

Gomti Nagar Lucknow

Report

Rakhi Verma / 26 Yrs / F / 157 Cms / 65 Kg  
 Date: 03 - 08 - 2024 Refd By : APOLLO HEALTH Examined By:

Stage	Time	Duration	Speed(Kmph)	Elevation	METs	Rate	% THR	BP	PP	PVC	Comments
Supine	00:16	0:16	00.0	00.0	01.0	074	38 %	112/74	082	00	
Standing	00:21	0:05	00.0	00.0	01.0	072	37 %	112/74	080	00	
HV	00:26	0:05	00.0	00.0	01.0	076	39 %	112/74	085	00	
ExStart	00:37	0:11	00.0	00.0	01.0	076	39 %	112/74	085	00	
BRUCE Stage 1	03:37	3:00	02.7	10.0	04.7	106	55 %	124/80	131	00	
BRUCE Stage 2	06:37	3:00	04.0	12.0	07.1	122	63 %	130/84	158	00	
BRUCE Stage 3	09:37	3:00	05.5	14.0	10.2	152	78 %	138/90	209	00	
PeakEX	10:50	1:13	06.8	16.0	11.6	174	90 %	138/92	240	00	
Recovery	11:50	1:00	00.0	00.0	04.3	136	70 %	134/86	182	00	
Recovery	12:50	2:00	00.0	00.0	01.0	103	53 %	130/82	133	00	
Recovery	13:50	3:00	00.0	00.0	01.0	116	60 %	122/80	141	00	
Recovery	14:16	3:26	00.0	00.0	01.0	100	52 %	122/80	122	00	

FINDINGS :


Exercise Time : 10:13  
 Max HR Attained : 174 bpm 90% of Target 194  
 Max BP Attained : 138/92 (mm/Hg)  
 Max WorkLoad Attained : 11.6 Good response to induced stress

Test End Reasons : Test Complete, Fatigue, Heart Rate Achieved

REPORT :

CONCLUSIONS:

Significant ST depression in lead 3 and AVF during Peak exercise indicating inferior myocardial ischemia.  
 Changes are borderline for lateral and anterior myocardial ischemia during peak exercise.  
 Stress test is **Positive** for exercise induced ischemic heart disease.  
**ABNORMAL STUDY**

  
 DR. AMIT MOHAN MD  
 Req. No. 44559











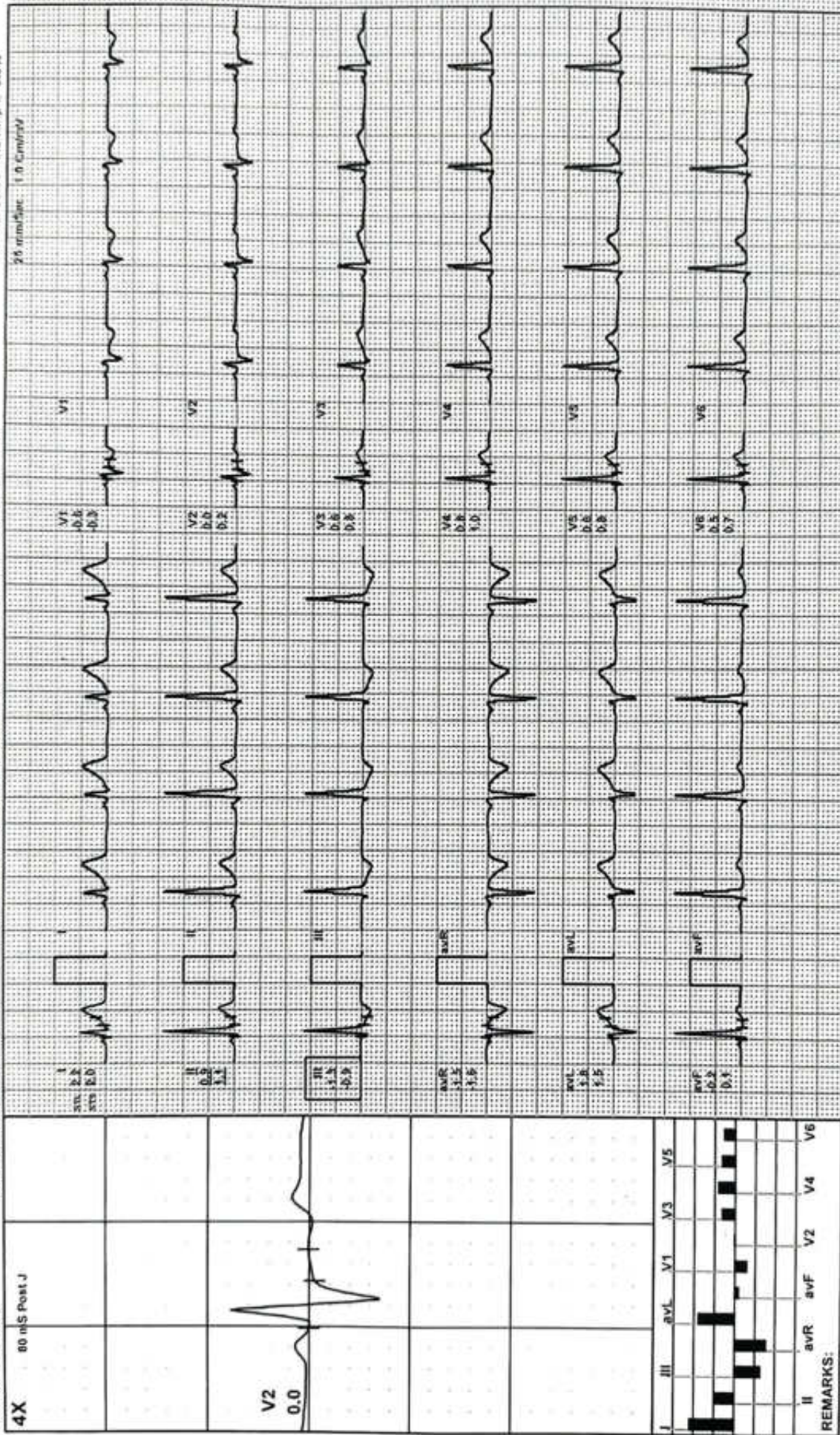
**MODERN PATHOLOGY AND DIAGNOSTIC CENTER**

Rakhi Verma / 26 Yrs / F / 157 Cms / 65 Kg / HR : 76

**BRUCE:HV(0:06)**



Date: 03-08-2024 METS: 1.0/76 bpm 39% of THR BP: 112/74 mmHg Combined Medians/ BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz ExTime: 00:00 0.0 Kmph 0.0%





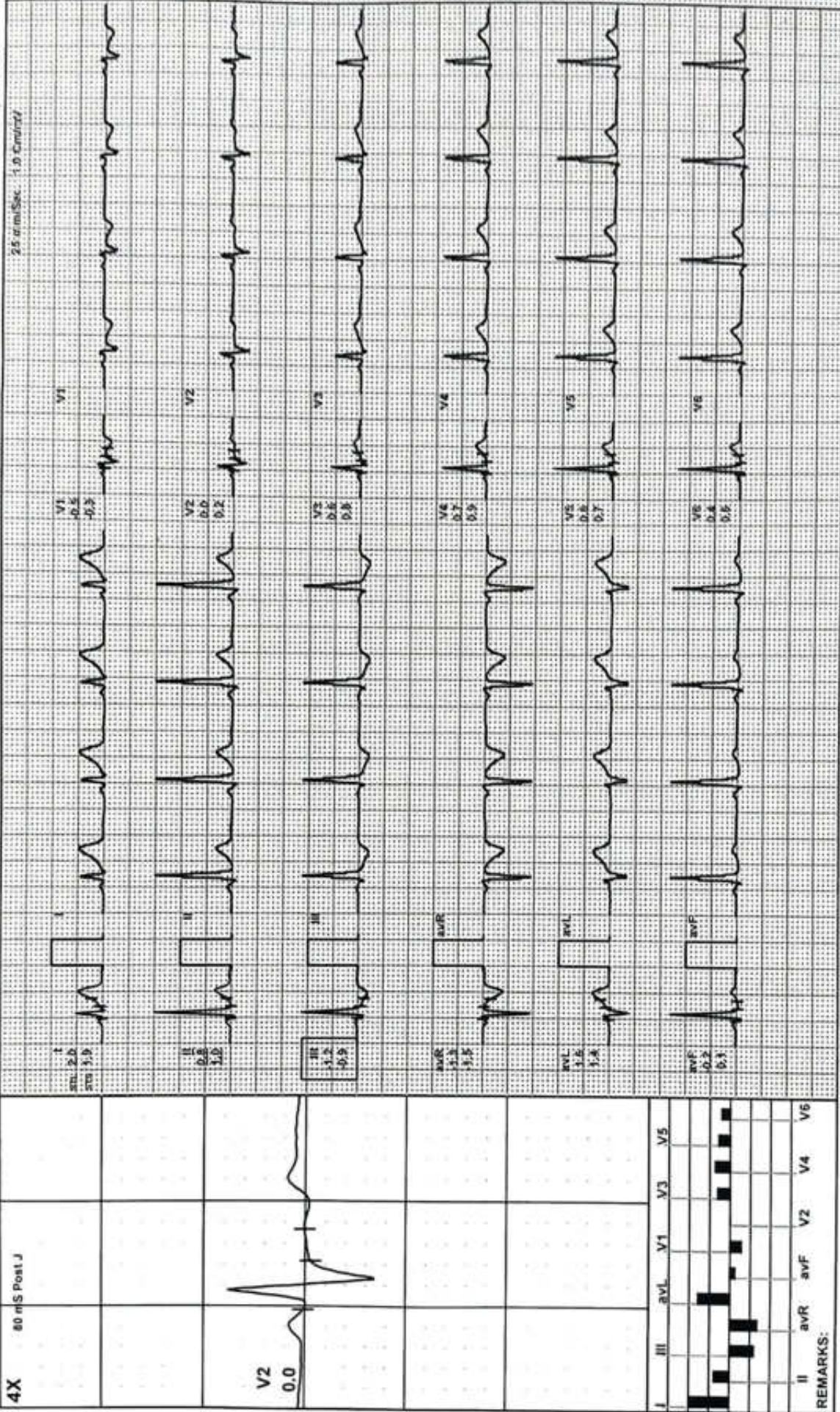
**MODERN PATHOLOGY AND DIAGNOSTIC CENTER**

Rakhi Verma / 26 Yrs / F / 157 Cms / 65 Kg / HR : 76

**ExStart**



Date: 03 - 08 - 2024 METS: 1.0/ 76 bpm 39% of THR BP: 112/74 mmHg Combined Medians/ BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz





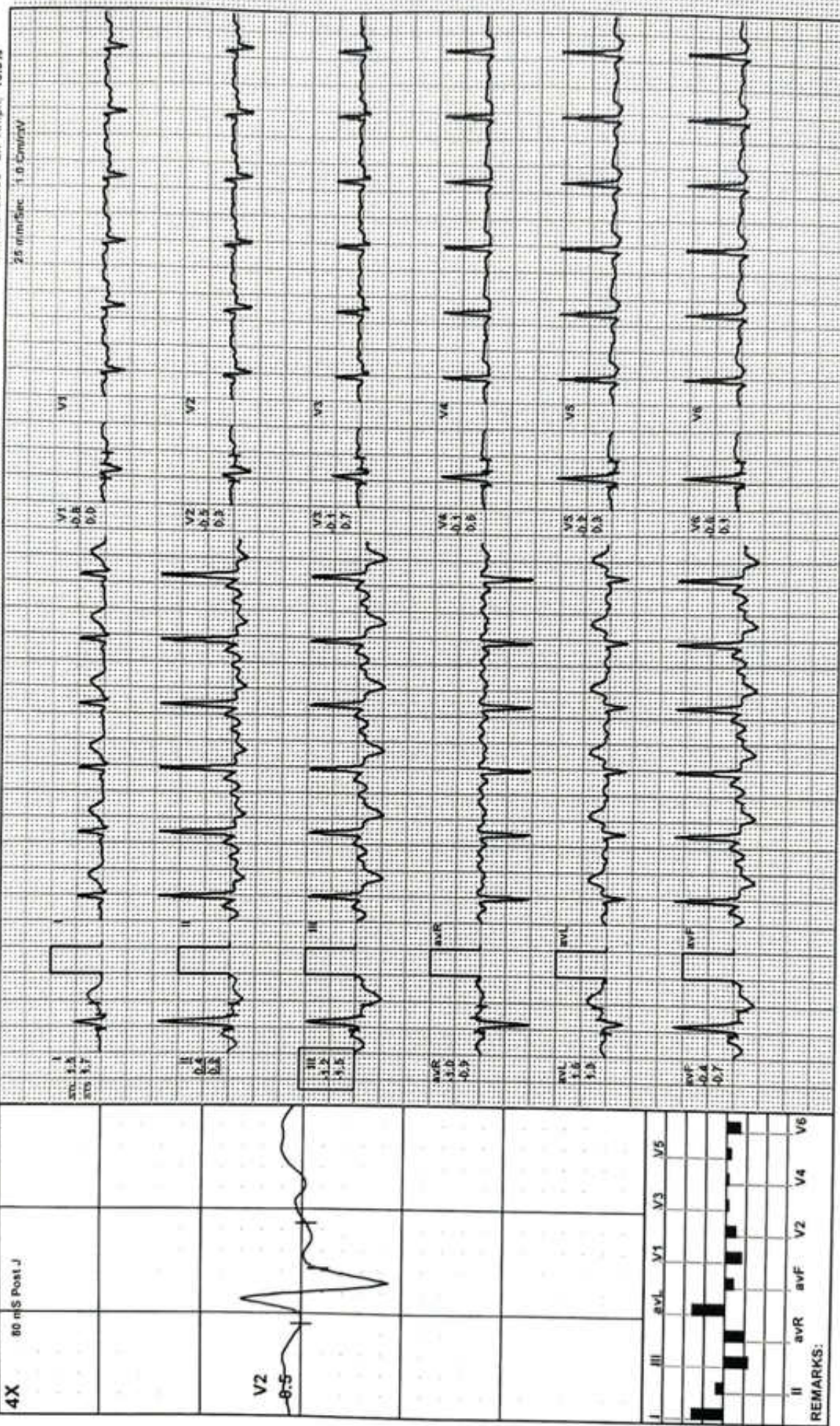
**MODERN PATHOLOGY AND DIAGNOSTIC CENTER**

Rakhi Verma / 26 Yrs / F / 157 Cms / 65 Kg / HR : 106

**BRUCE: Stage 1(3:00)**



Date: 03 - 06 - 2024 METS: 4.7/ 106 bpm 55% of THR BP: 124/80 mmHg Combined Medians/ BLC On/ Natch On/ HF 0.05 Hz/LF 35 Hz ExTime: 03:00 2.7 Kmph 10.0%





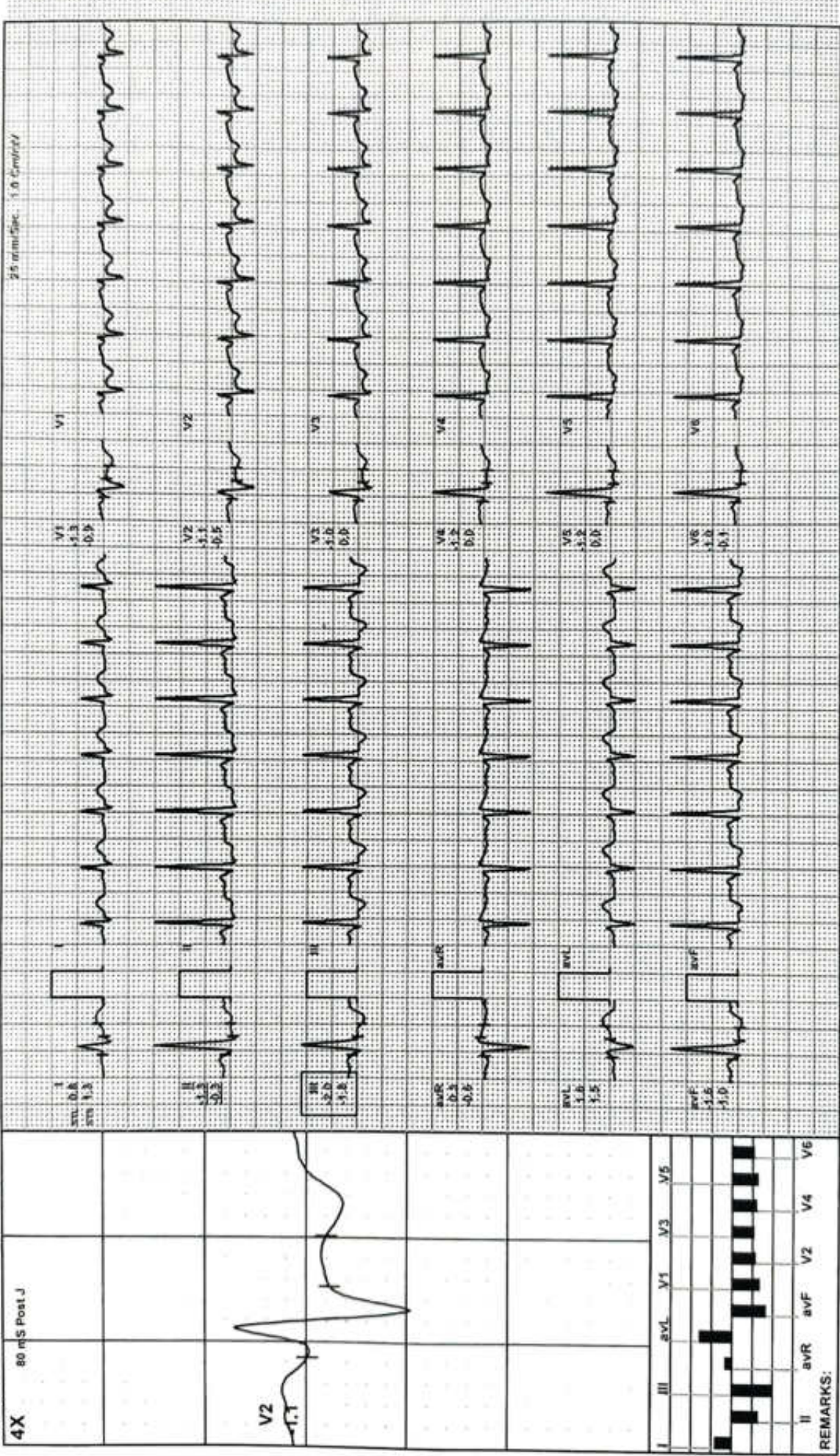
**MODERN PATHOLOGY AND DIAGNOSTIC CENTER**

Rakhi Verma / 26 Yrs / F / 157 Cms / 65 Kg / HR : 122

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

AGIDL

Date: 03 - 08 - 2024 METS 7.1/ 122 bpm 63% of THR BP: 130/84 mmHg Combined Medians/ BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz E/Time 06:00 4.0 Km/ph 12.0%





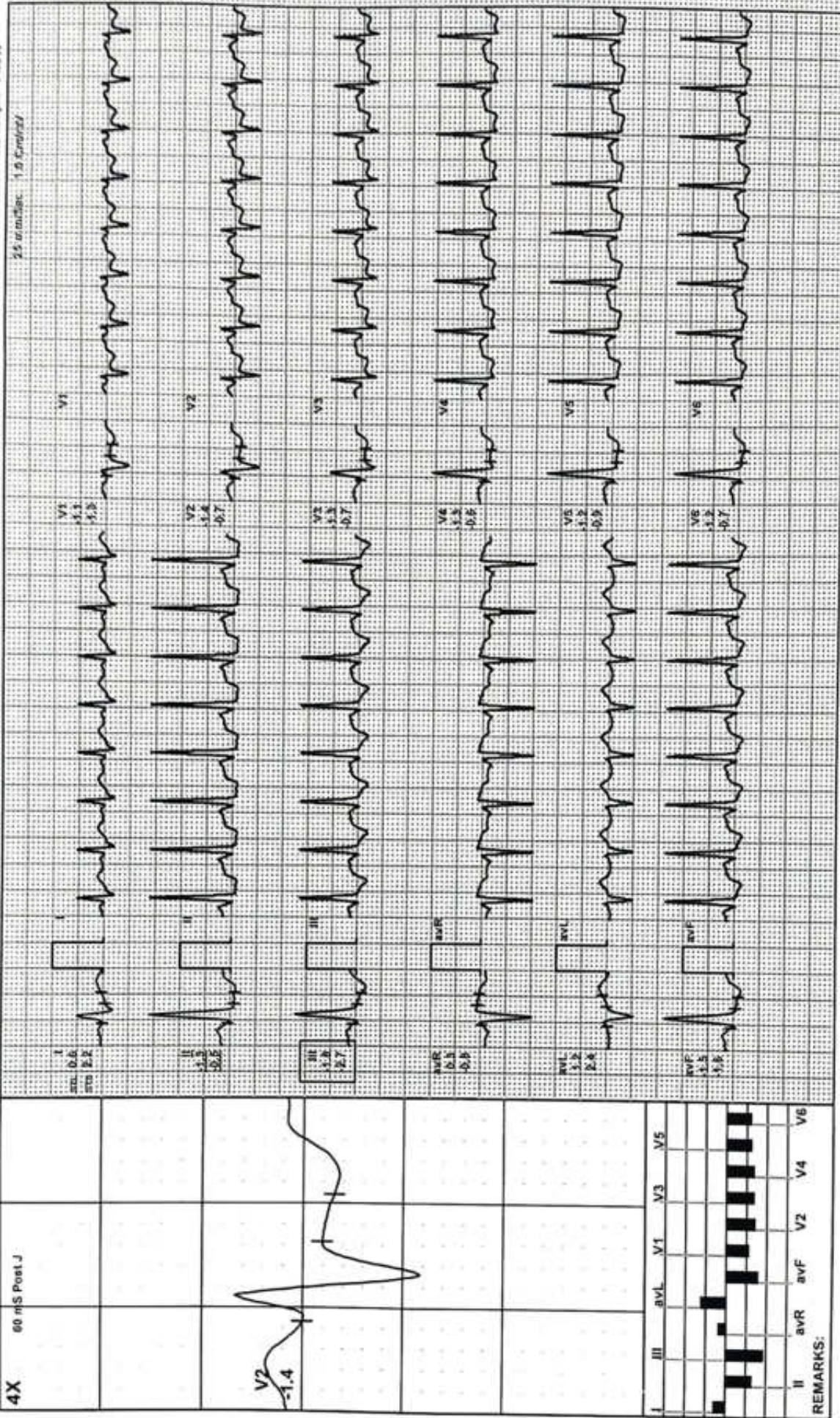
**MODERN PATHOLOGY AND DIAGNOSTIC CENTER**

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



Rakhi Verma / 26 Yrs / F / 157 Cms / 65 Kg / HR : 152

Date: 03 - 08 - 2024 METS: 10.2/ 152 bpm 78% of THR BP: 138/90 mmHg Combined Medians/ BLC On/ Notch On/ HF 0.05 Hz/ LF 35 Hz Ex/Time: 09:00 5.5 Km/hr 14.0%





**MODERN PATHOLOGY AND DIAGNOSTIC CENTER**

Rakhi Verma / 26 Yrs / F / 157 Cms / 65 Kg / HR : 174

PeakEx

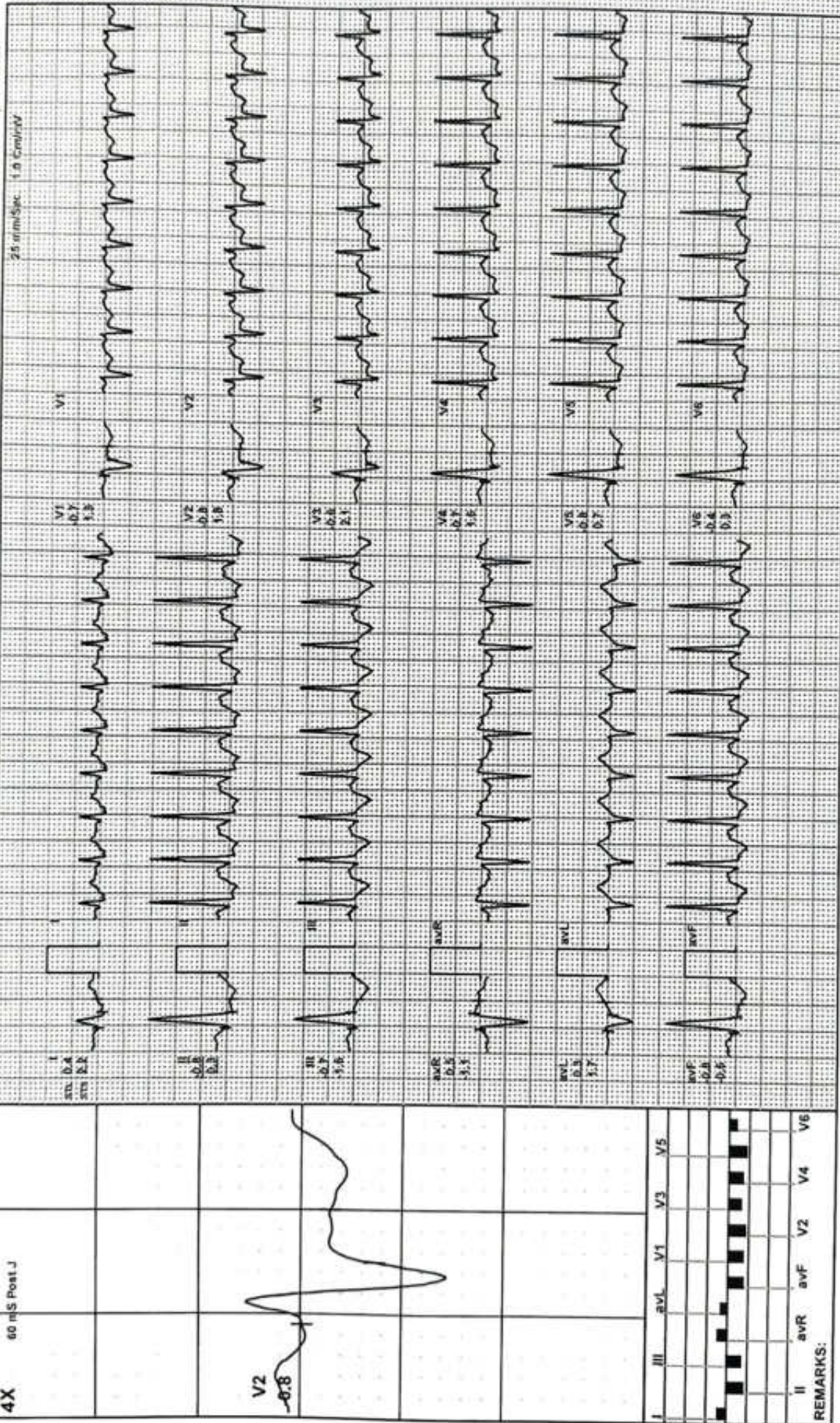


Date: 03 - 08 - 2024

METS: 11.6/ 174 bpm 90% of THR BP: 138/92 mmHg Combined Medians/ B.L.C On/ Notch On/ HF 0.05 Hz/LF 35 Hz

ExTime: 10:13 6.8 Kmph. 16.0%

4X 60 mS Post J



REMARKS:



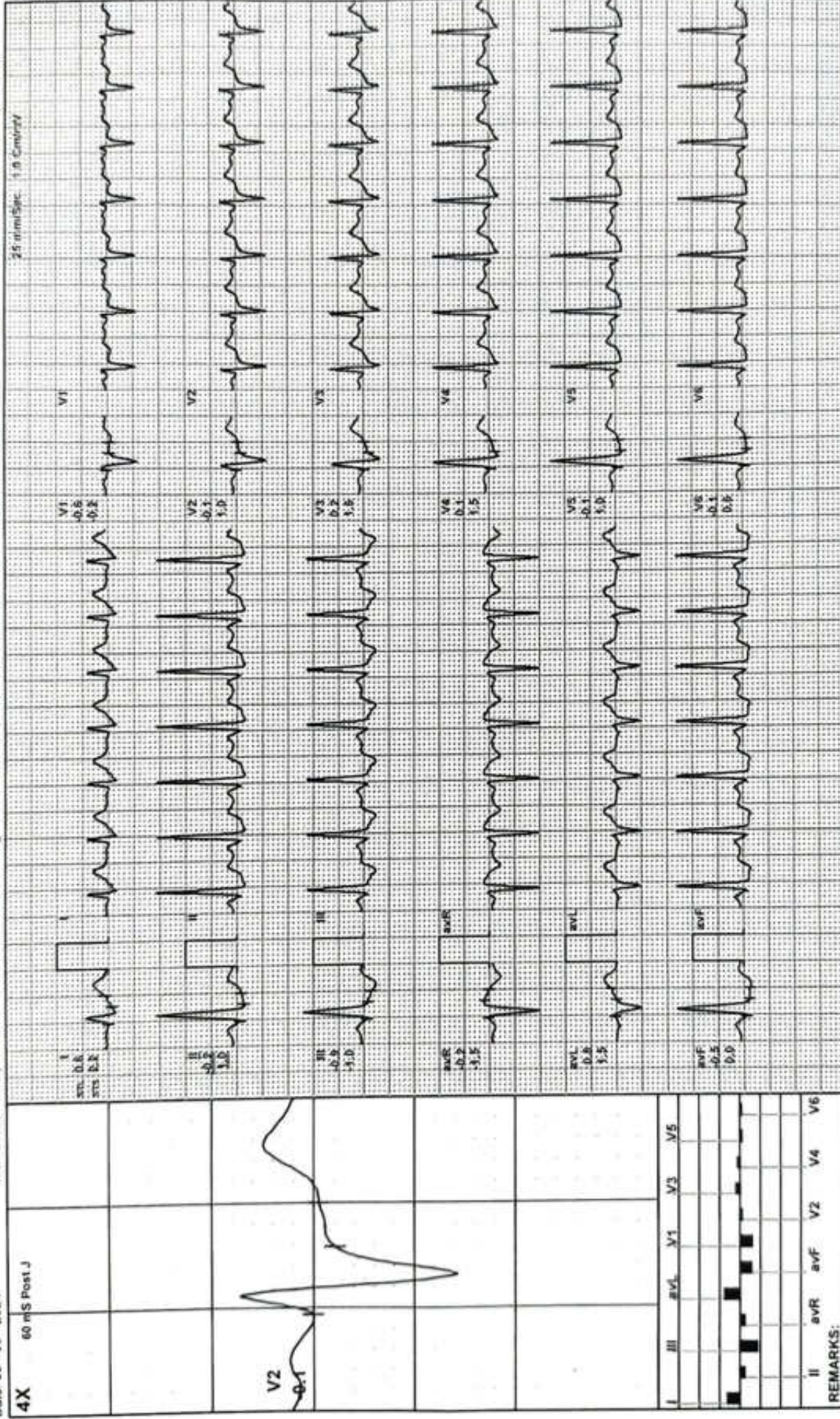
**MODERN PATHOLOGY AND DIAGNOSTIC CENTER**

Rakhi Verma / 26 Yrs / F / 157 Cms / 65 Kg / HR : 136

Recovery(1:00)



Date: 03 - 08 - 2024 METS: 4.3/ 136 bpm 70% of THR BP: 134/86 mmHg Combined Medians/ BLC: On/ Natch On/ HF 0.05 Hz/LF 35 Hz ExTime: 10:13 0.0 Km/ph 0.0%





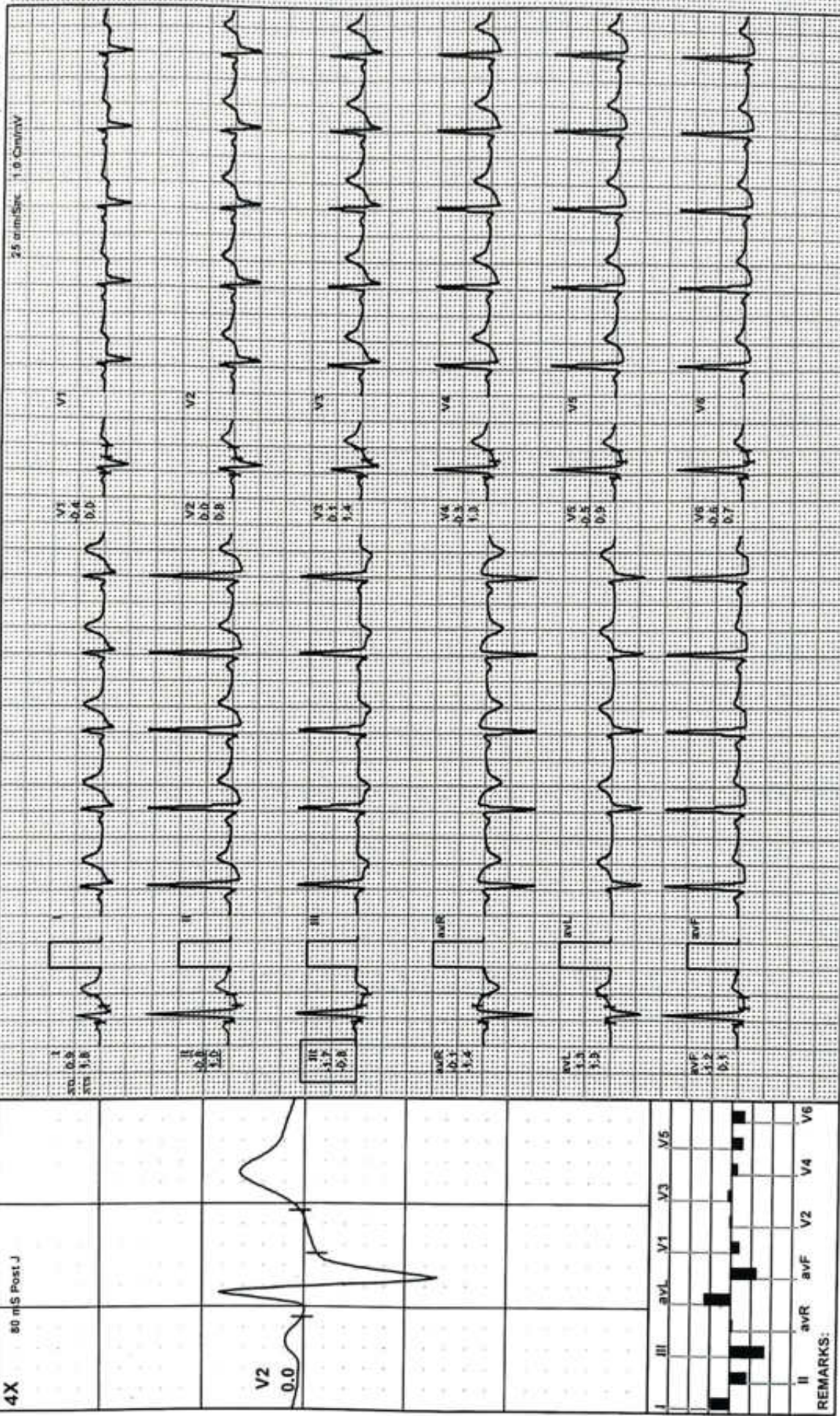
**MODERN PATHOLOGY AND DIAGNOSTIC CENTER**

Rakhi Verma / 26 Yrs / F / 157 Cms / 65 Kg / HR : 103

Recovery(2:00)



Date: 03 - 08 - 2024 METS: 1.0/ 103 bpm 53% of THR BP: 130/82 mmHg Combined Medians/ BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz ExtTime: 10:13 0.0 Km/ph 0.0%







Recovery(3:00)

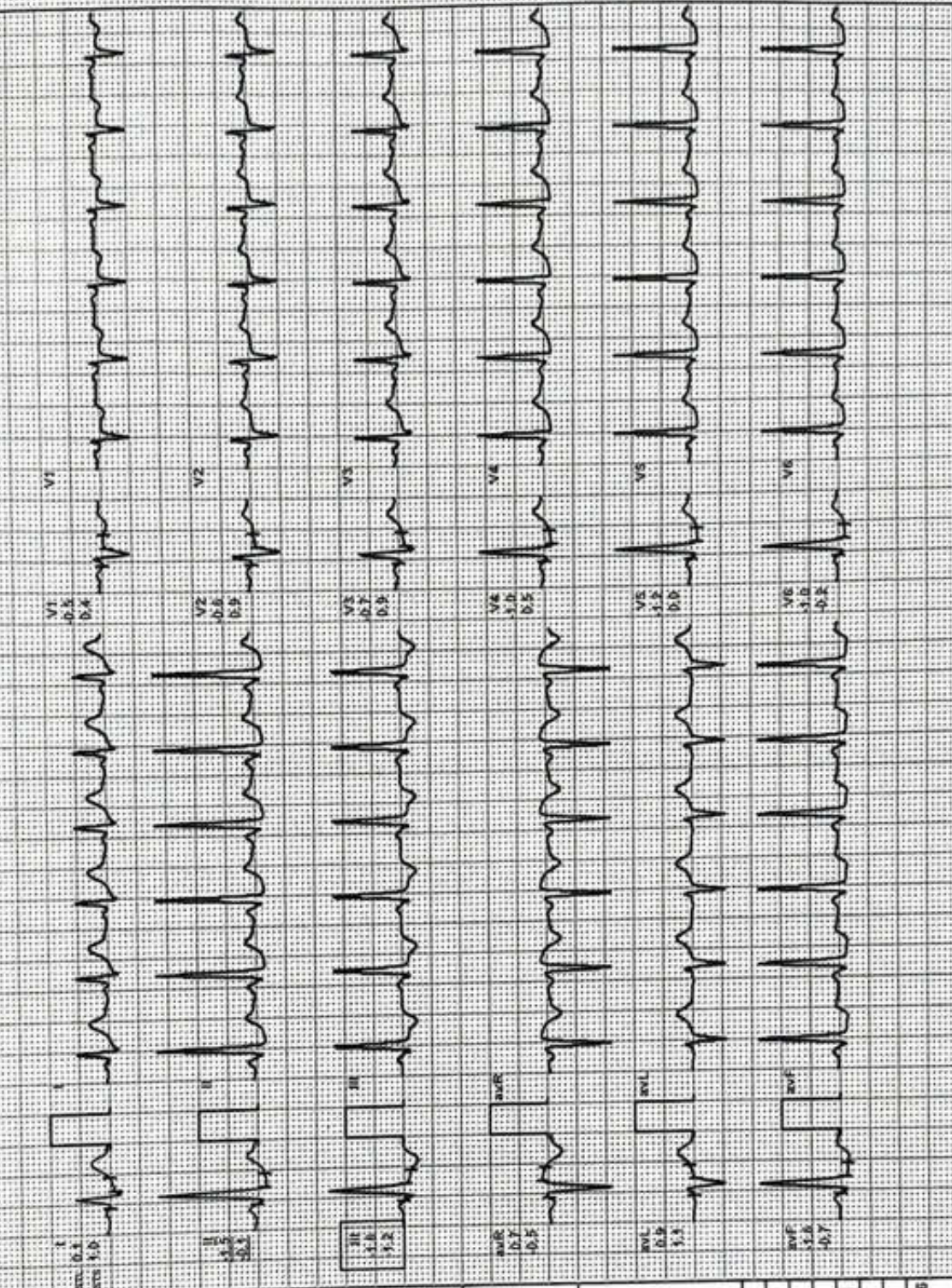
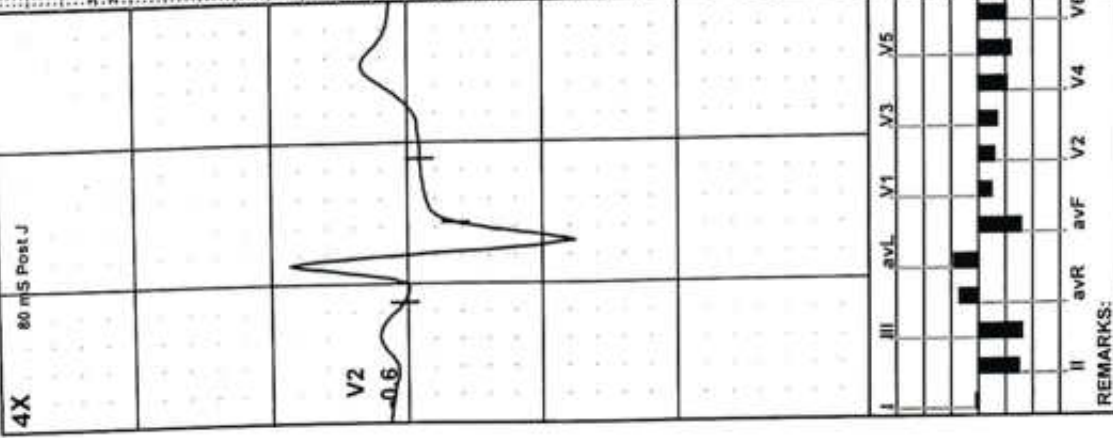
MODERN PATHOLOGY AND DIAGNOSTIC CENTER

Rakhi Verma / 26 Yrs / F / 157 Cms / 65 Kg / HR : 116

ExTime: 10:13 0.0 Kmph, 0.0%

25 mm/5Sec 1.0 Cm/mV

Date: 03-08-2024 METS: 1.0/ 116 bpm 60% of THR BP: 122/80 mmHg Combined Medians/ BLC On/ HF 0.05 Hz/LF 35 Hz

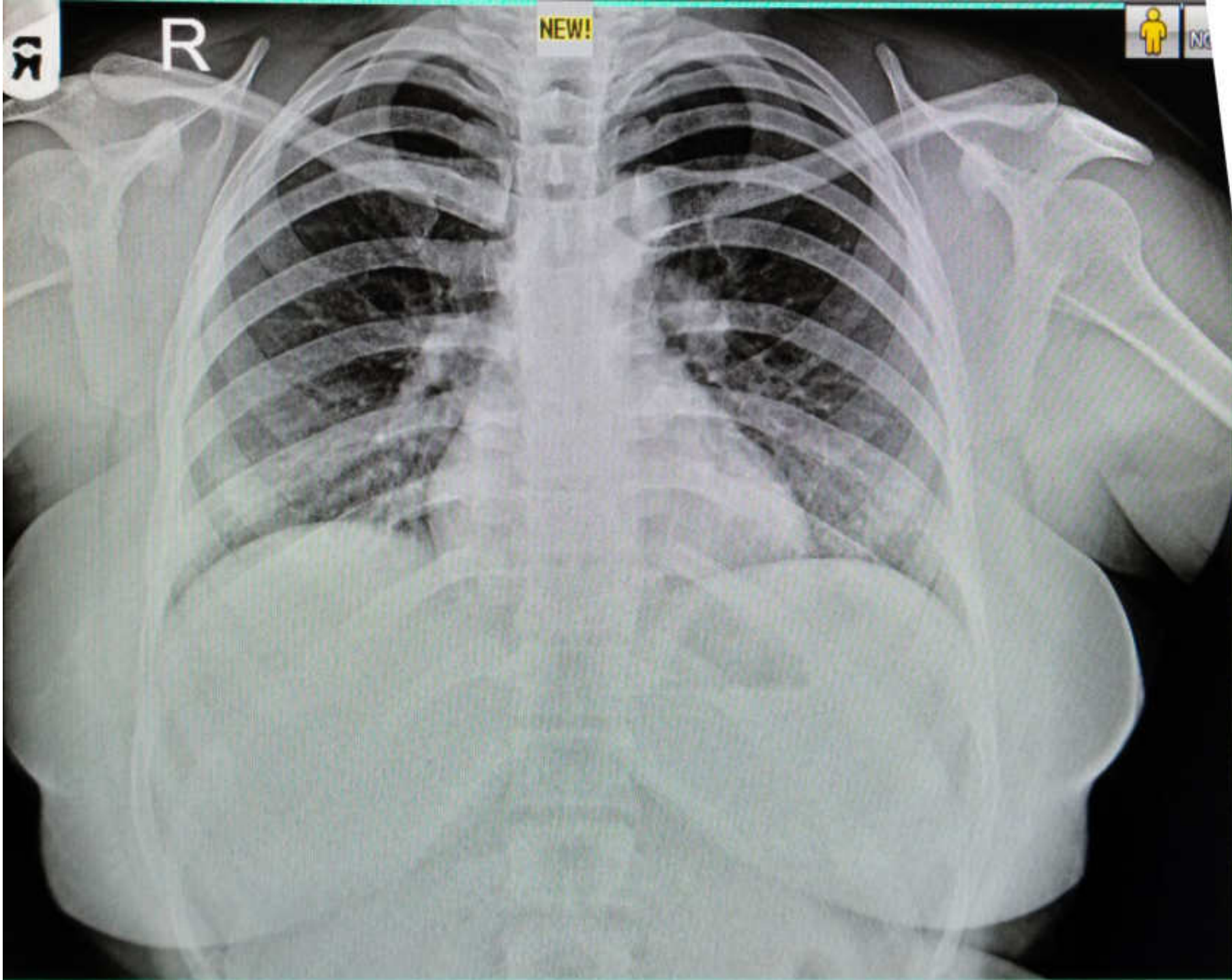


REMARKS:









24080305371 MRS RAKHI VERMA 26YRS F SELF CHEST PA  
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