

MER- MEDICAL EXAMINATION REPORT

Date of Examination	10/2/24		
NAME	RANUL YADAV		
AGE	38	Gender	M
HEIGHT(cm)	175	WEIGHT (kg)	76
B.P.	120/70		
ECG	Normal		
X Ray	Normal		
Vision Checkup	—		
Present Ailments	None		
Details of Past ailments (If Any)	No		
Comments / Advice : She /He is Physically Fit	Medicines Rx		


Dr. Smita Rastogi
 Signature with Stamp of Medical Examiner
 Reg. No. 37370

You have been informed that ent ,diet consultation facility is not available at our centre. If you are ready then your test can be start

2D echo test facility is not available at our center, instead we do TMT test.

Pyada



भारत सरकार
GOVERNMENT OF INDIA



राहुल यादव
Rahul Yadav
जन्म वर्ष / Year of Birth: 1985
पुरुष / Male



3516 6208 4550

आधार - आम आदमी का अधिकार

Ryada

भारतीय विशिष्ट पहचान प्राधिकरण
UNIQUE IDENTIFICATION AUTHORITY OF INDIA

पता: S/O संजीव यादव, गार्डन रोड,
एच 2 मोहन बुद्ध मार्ग, अमीनाबाद,
सबमंड, उत्तर प्रदेश, 226016

Address: S/O Sanjiv Yadav,
letouche road, 142 gautam
buddha marg, Aminabad,
Aminabad Park, Lucknow, Uttar
Pradesh, 226016

1947
1800 180 1947

help@uidai.gov.in

www.uidai.gov.in

P.O. Box No. 1947
Bangalore-560 001



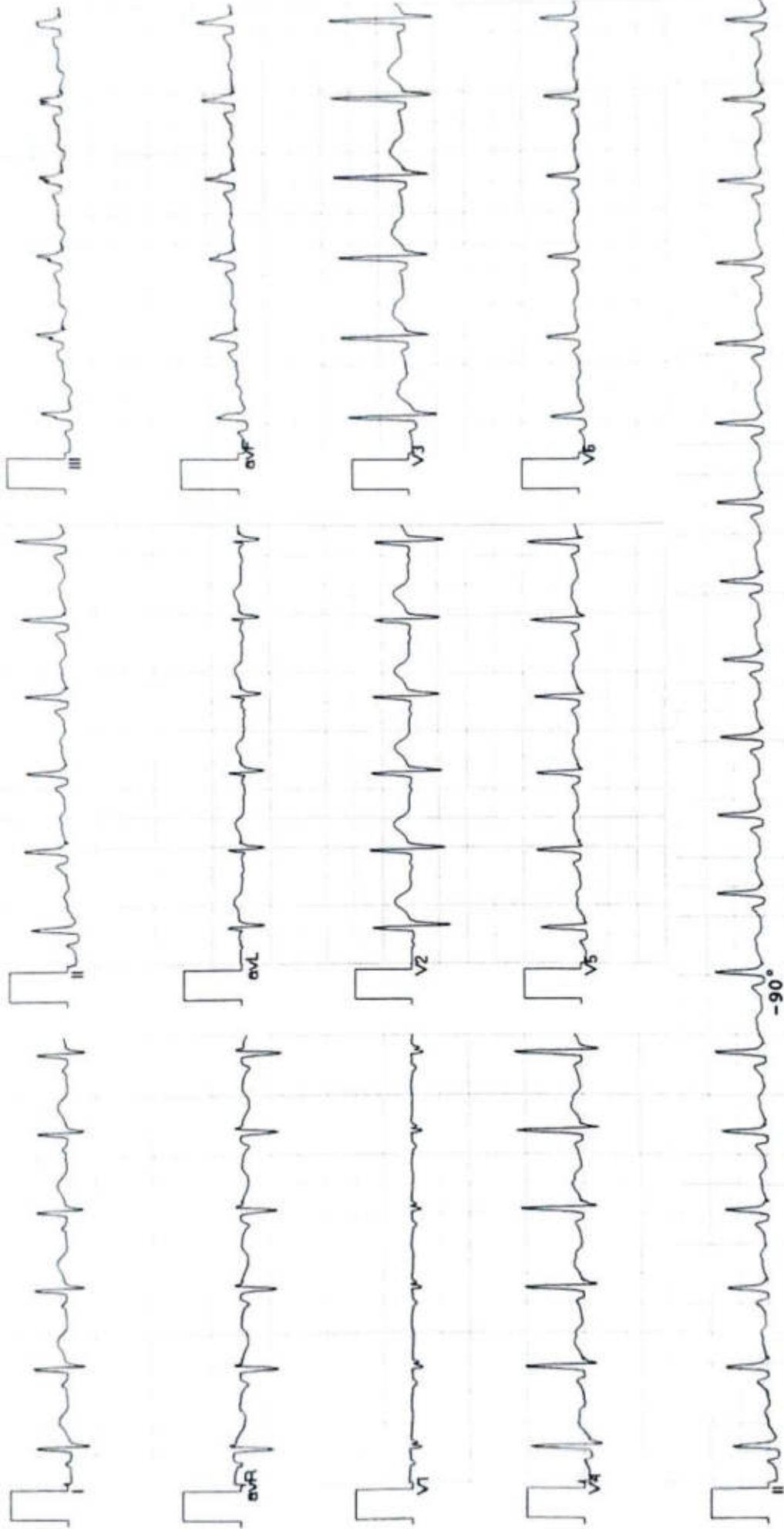
Modern Pathology And Diagnostic Centre

112 / RAHUL YADAV / 38 Yrs / M / 175Cms. / 76Kgs. / Non Smoker

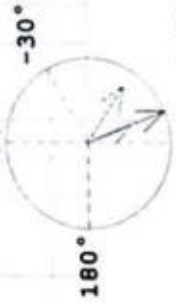
Heart Rate : 112 bpm / Tested On : 10-Feb-24 11:55:34 / HF 0.05 Hz · LF 100 Hz / Notch 50 Hz / Sn 1.00 Cm/mV / Sw 25 mm/s

/ Refd By : APOLLO HEALTH

ECG



Vent Rate : 112 bpm
 PR Interval : 100 ms
 QRS Duration: 86 ms
 QT/QTc Int : 310/401 ms
 P-QRS-T axis: 66.00 • 68.00 • 33.00 •



Normal ECG

Ryda

DR. AMIT MOHAN
 AID
 Reg No. 44559

Allergens ECG (Pisces)(PIS215191030)



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	: 10-Feb-2024	Age	: 38 Yrs.
Name	: Mr. RAHUL YADAV	Sex	: Male
Ref.By	: APOLLO HEALTH		

Haemoglobin	11.4	gm%	14 - 17
-------------	-------------	-----	---------

Total Leucocyte Count	5800	Cells/cumm.	4000-11000
-----------------------	-------------	-------------	------------

Differential Leucocyte Count			
Polymorphs	48	%	45 - 70
Lymphocytes	47	%	20 - 45
Eosinophils	01	%	0 - 6
Monocytes	04	%	0 - 8
Basophils	00	%	0 - 1

Erythrocyte Sedimentation Rate (Wintrobe)			
ESR	18	mm in 1st Hr.	0 - 9
PCV	34.7	cc%	40 - 52
Corrected ESR	04	mm in 1st Hr.	0 - 9

Platelet Count	1.77	lakh/cumm.	1.5 - 4.0
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Red Cells Count	3.07	million/cmm	3.90 to 5.80
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Absolute values			
MCV	113.0	fL	77 - 97
MCH	37.3	pg	27 - 31
MCHC	33.0	gm /dl	31 - 34

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

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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Report needs clinicopathological correlation ♦ Not for Medico Legal Purpose

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Date	: 10-Feb-2024		
Name	: Mr. RAHUL YADAV	Age	: 38 Yrs.
Ref.By	: APOLLO HEALTH	Sex	: Male

Plasma Glucose - F GOD-POD Method	110	mg/dl	70 - 110
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Plasma Glucose - PP GOD POD Method	140	mg/dl	110 - 170
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KFT			
UREA	24.1	mg %	15 - 50
CREATININE	1.01	mg %	0.5 - 1.5
URIC ACID	4.8	mg %	2 - 7
CALCIUM	9.3	mg %	8.8 - 10.0

Blood Group & Rh	"O" Positive		
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LFT T&D			
Total Bilirubin	0.66	mg%	0.2 - 1.0
Direct Bilirubin	0.14	mg%	0.0 to 0.40
Indirect Bilirubin	0.52	mg%	0.10 to 0.90
S.G.P.T	50	IU/L	5 - 40
S.G.O.T	44	IU/L	5 - 50
ALP	82	IU/L	40 to 129

Serum Gamma G.T.	38	IU/L	11 - 50
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Urine Sugar (Fasting)	NIL		
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Urine Sugar (PP)	NIL		
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Date	: 10-Feb-2024	Age	: 38 Yrs.
Name	: Mr. RAHUL YADAV	Sex	: Male
Ref.By	: APOLLO HEALTH		

LIPID PROFILE

Triglycerids	143	mg%	70 - 190
S. Cholestrol S.	132	mg%	130 - 230
S. HDL Cholestrol	48.1	mg%	35 - 75
S. LDL Cholestrol	55.3	mg%	75 - 150
VLDL	28.6	mg%	0 - 34
Chol / HDL factor	2.74		
LDL / HDL Factor	1.15		

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 : 10-Feb-2024

Name : **Mr. RAHUL YADAV**

Age : 38 Yrs.

Ref.By : APOLLO HEALTH

Sex : Male

THYROID TEST

Tri-iodothyronine (T3)	1.16	nmol/L	0.50 to 2.50
Thyroxine (T4)	8.40	mcg/dL	5.0 to 12.5
Thyroid Stimulating Hormone (TSH)	2.45	mIU/ ml	0.3 to 6.0

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COMMENTS

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

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Contd... M.B.B.S., DCP

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Date : 10-Feb-2024	Age : 38 Yrs.
Name : Mr. RAHUL YADAV	Sex : Male
Ref.By : APOLLO HEALTH	

Glycosylated Haemoglobin

Glycosylated Haemoglobin	6.1	%	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.

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Date	: 10-Feb-2024		
Name	: Mr. RAHUL YADAV	Age	: 38 Yrs.
Ref.By	: APOLLO HEALTH	Sex	: Male

Urine Examination

PHYSICAL			
Colour	Straw		
Turbidity	Nil		
Deposit	Nil		
Reaction	Acidic		
*Specific Gravity	1.030		
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 51 End of Report
M.B.B.S., DCP, CRIAT (BARC)

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Gomti Nagar Lucknow

Report



RAHUL YADAV / 38 Yrs / M / 175 Cms / 76 Kg

Date: 10 - 02 - 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	107	59 %	120/70	128	00	
Standing	00:08	0:05	00.0	00.0	01.0	107	59 %	120/70	128	00	
HV	00:13	0:05	00.0	00.0	01.0	110	60 %	120/70	132	00	
ExStart	00:24	0:11	00.0	00.0	01.0	110	60 %	120/70	132	00	
BRUCE Stage 1	03:24	3:00	02.7	10.0	04.7	152	84 %	124/80	188	00	
BRUCE Stage 2	06:24	3:00	04.0	12.0	07.1	171	94 %	136/86	232	00	
PeakEx	06:28	0:04	00.0	00.0	07.2	173	95 %	140/90	242	00	
Recovery	07:28	1:00	00.0	00.0	01.2	152	84 %	138/88	209	00	
Recovery	08:28	2:00	00.0	00.0	01.0	140	77 %	134/84	187	00	
Recovery	09:28	3:00	00.0	00.0	01.0	132	73 %	130/82	171	00	
Recovery	09:34	3:06	00.0	00.0	01.0	132	73 %	130/82	171	00	

FINDINGS :

Exercise Time : 06:04
Max HR Attained : 173 bpm 95% of Target 182
Max BP Attained : 140/90 (mm/Hg)
Max WorkLoad Attained : 7.2 Fair response to induced stress
Test End Reasons : Test Complete

REPORT :

CONCLUSIONS:

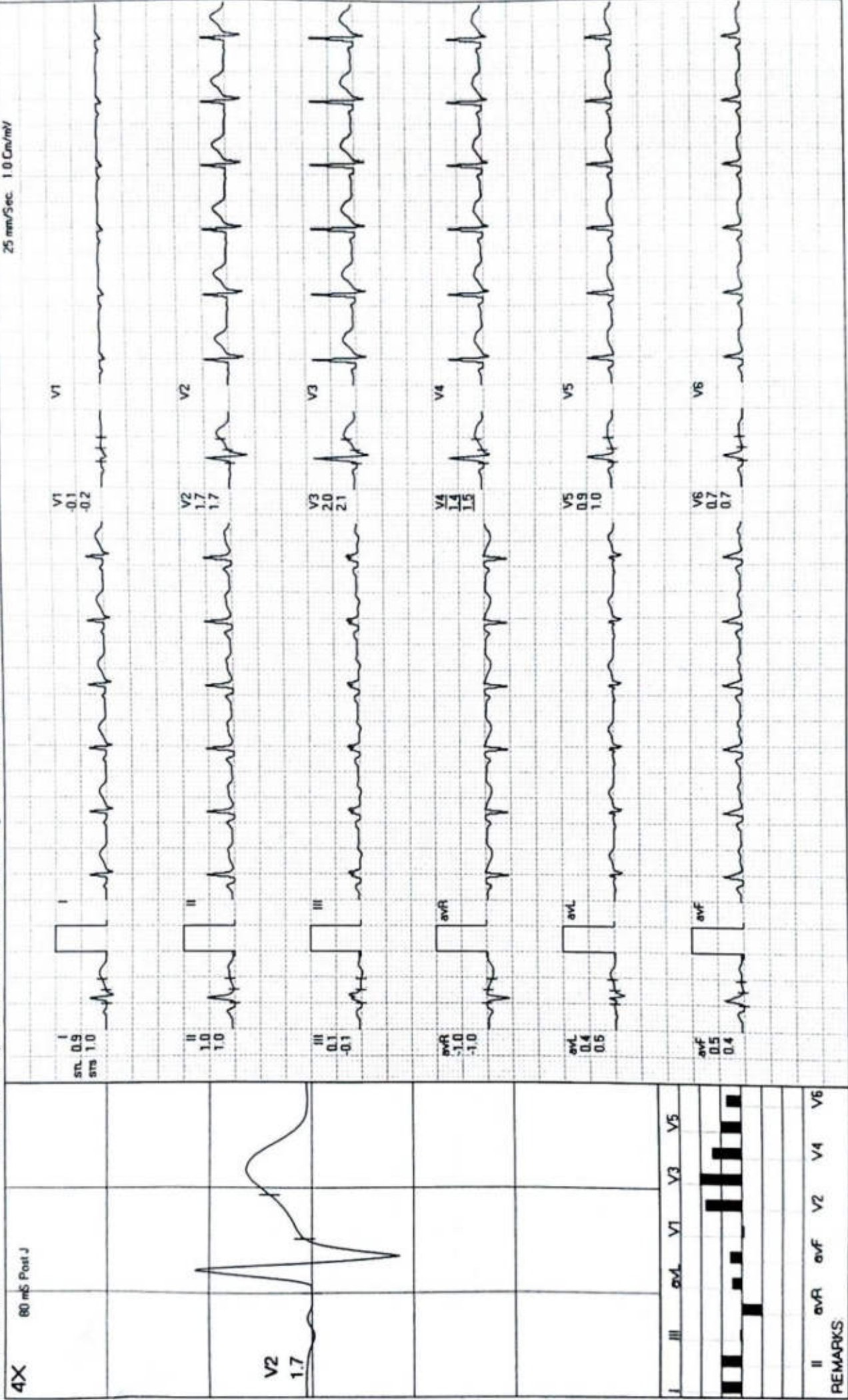
1. STRESS TEST IS NEGATIVE FOR EXERCISE INDUCED ISCHAEMIC HEART DISEASE.


Dr. ANANT MOHAN
 Reg. No: 44559



RAHUL YADAV / 38 Yrs / M / 175 Cms / 76 Kg / HR : 107

Date 10-02-2024 METS 1.0/107 bpm 59% of THR BP 120/70 mmHg Combined Medians/ BLC On/ Notch 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



BRUCE: Standing(0:05)

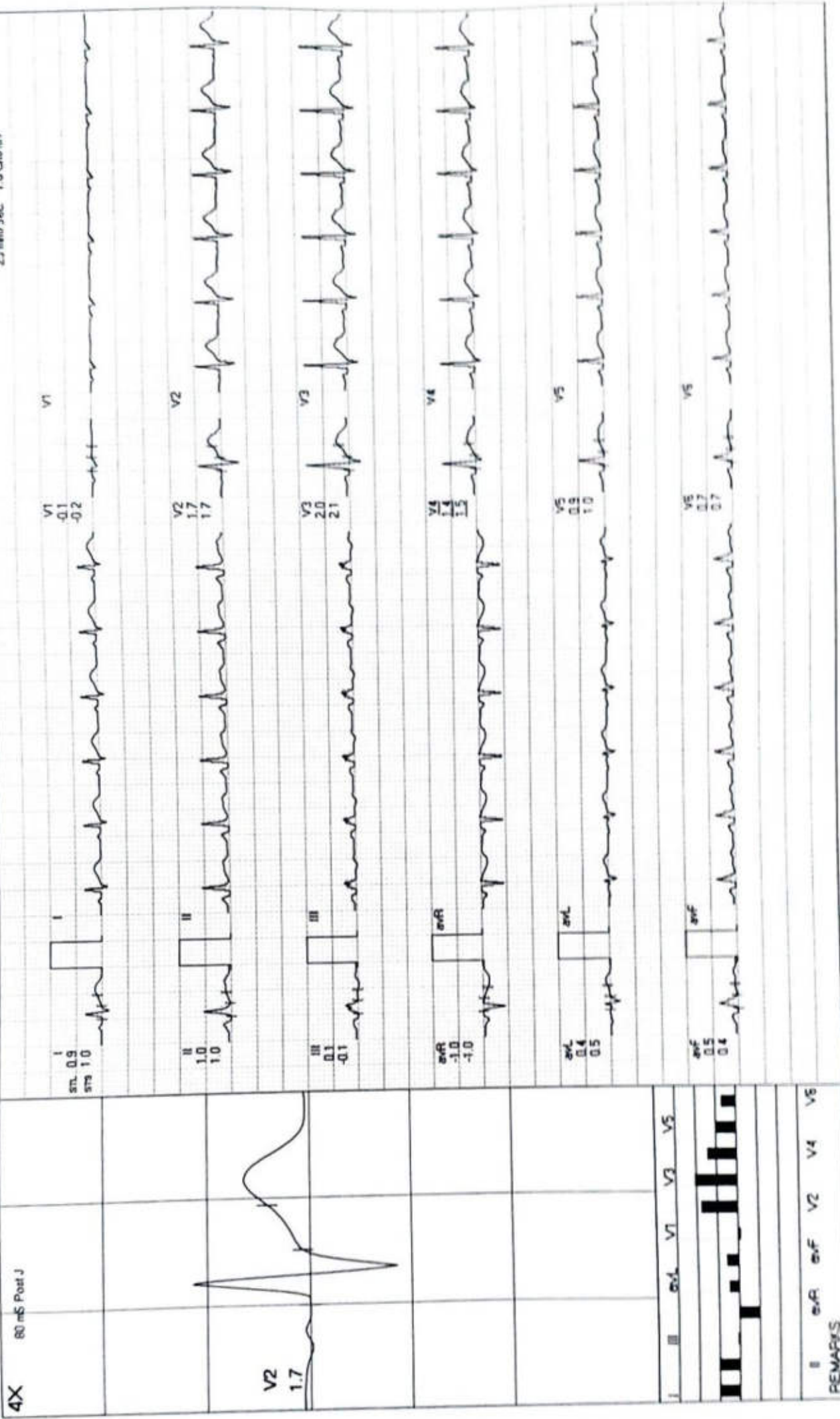
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RAHUL YADAV / 38 Yrs / M / 175 Cms / 76 Kg / HR : 107

ExTime 00:00 0.0 Kmph 0.0%

METS 1.0 / 107 bpm 59% of THR BP 120/70 mmHg Combined Medians/BLC On/Notch On/HF 0.05 Hz/LF 35 Hz

Date 10-02-2024



REMARKS

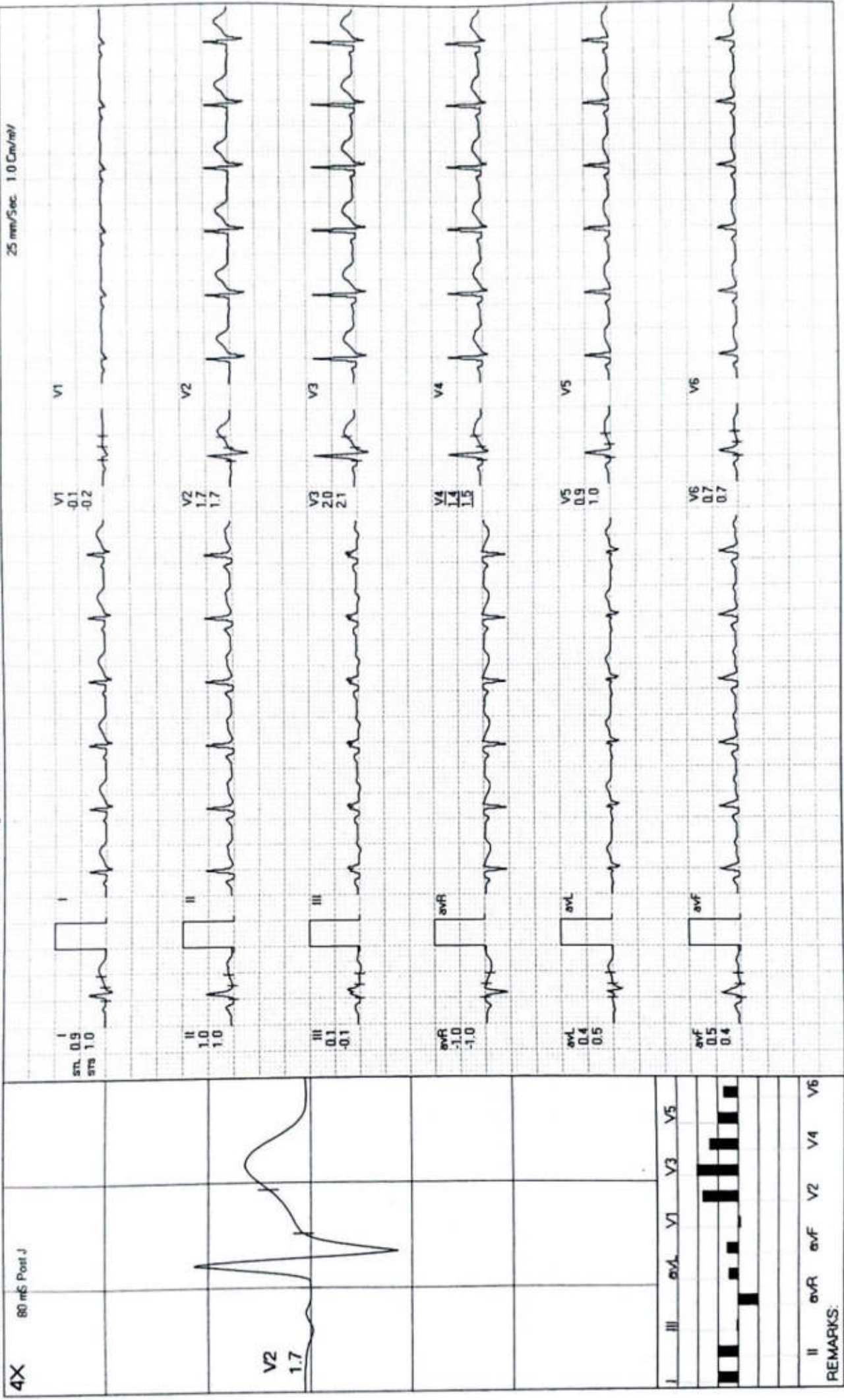
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RAHUL YADAV / 38 Yrs / M / 175 Cms / 76 Kg / HR : 110

BRUCE:HV(0:06)



Date 10-02-2024 METS 1.0/110 bpm 60% of THR BP 120/70 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



REMARKS:

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RAHUL YADAV / 38 Yrs / M / 175 Cms / 76 Kg / HR : 110

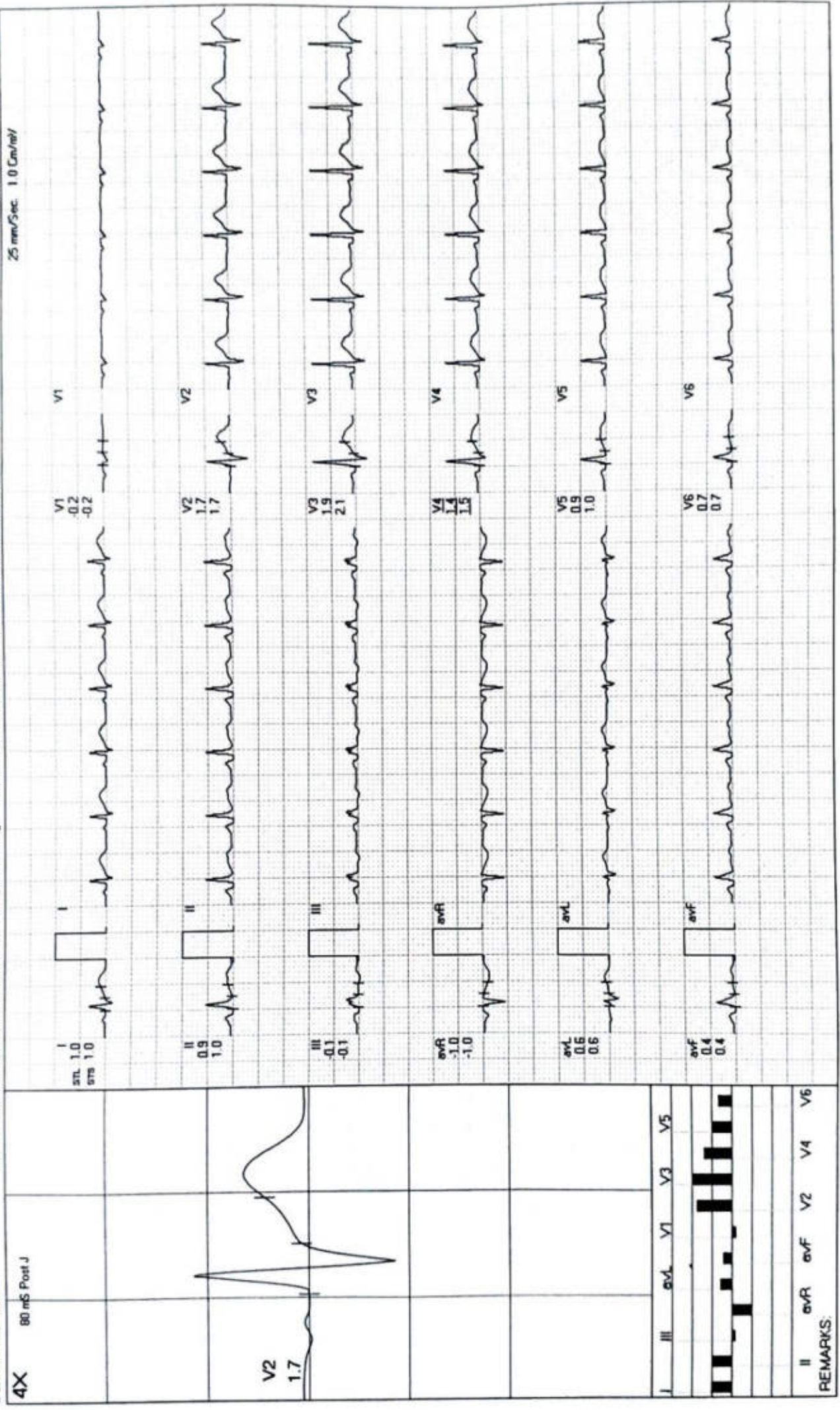
ExStart



ExTime 00:00 0.0 Kmph. 0.0%

METS 1.0 / 110 bpm 60% of THR BP 120/70 mmHg Combined Medions/ BLC On/ Notch On/ HF 0.05 Hz/ LF 35 Hz

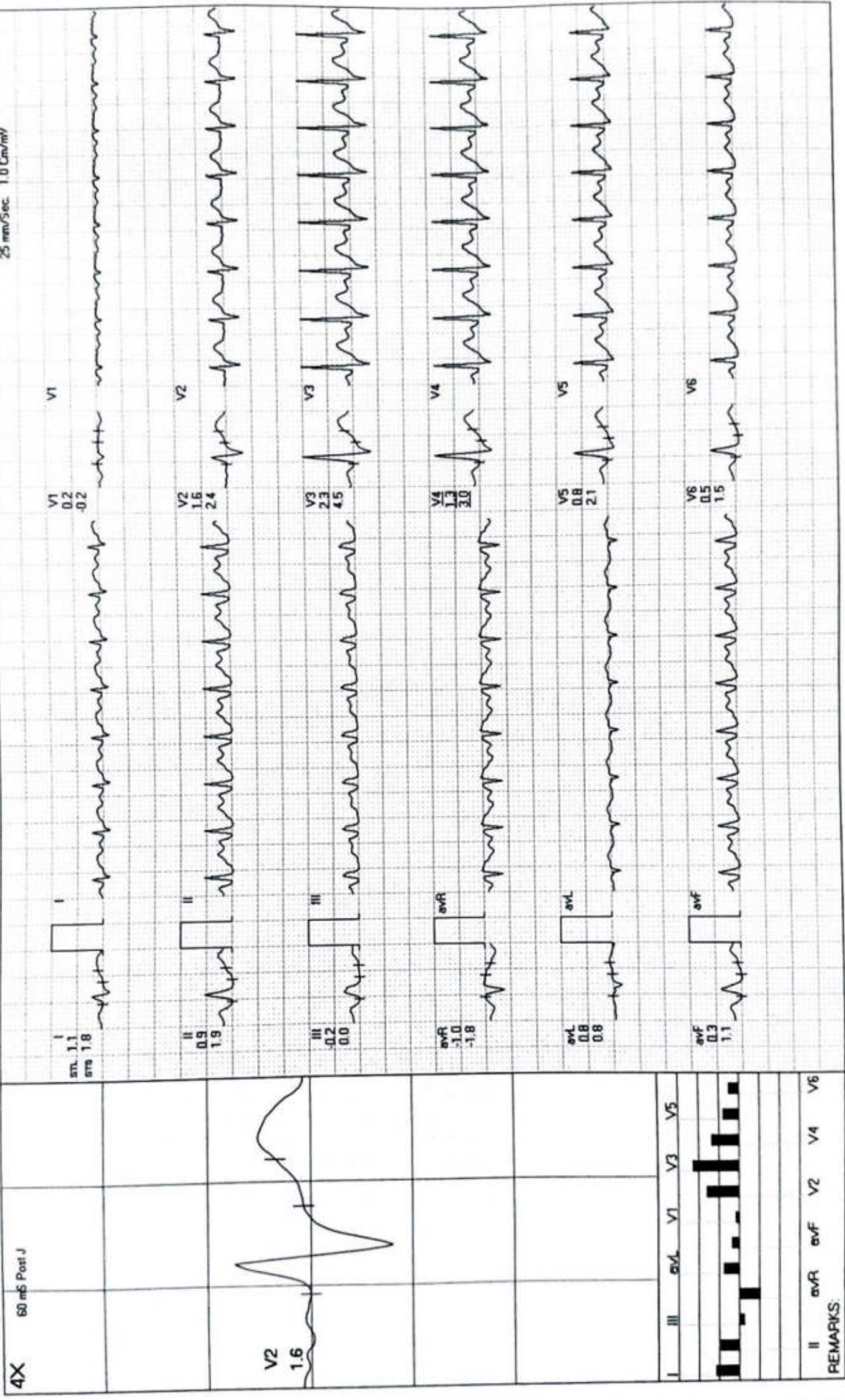
Date 10-02-2024





RAHUL YADAV / 38 Yrs / M / 175 Cms / 76 Kg / HR : 152

Date: 10-02-2024 METS 4.7/152 bpm 84% of THR BP 124/80 mmHg Combined Mediens/BLC On/ HF 0.05 Hz/LF 35 Hz ExTime 03:00 2.7 Kmph. 10.0%
 25 mm/Sec. 1.0 Cm/mV



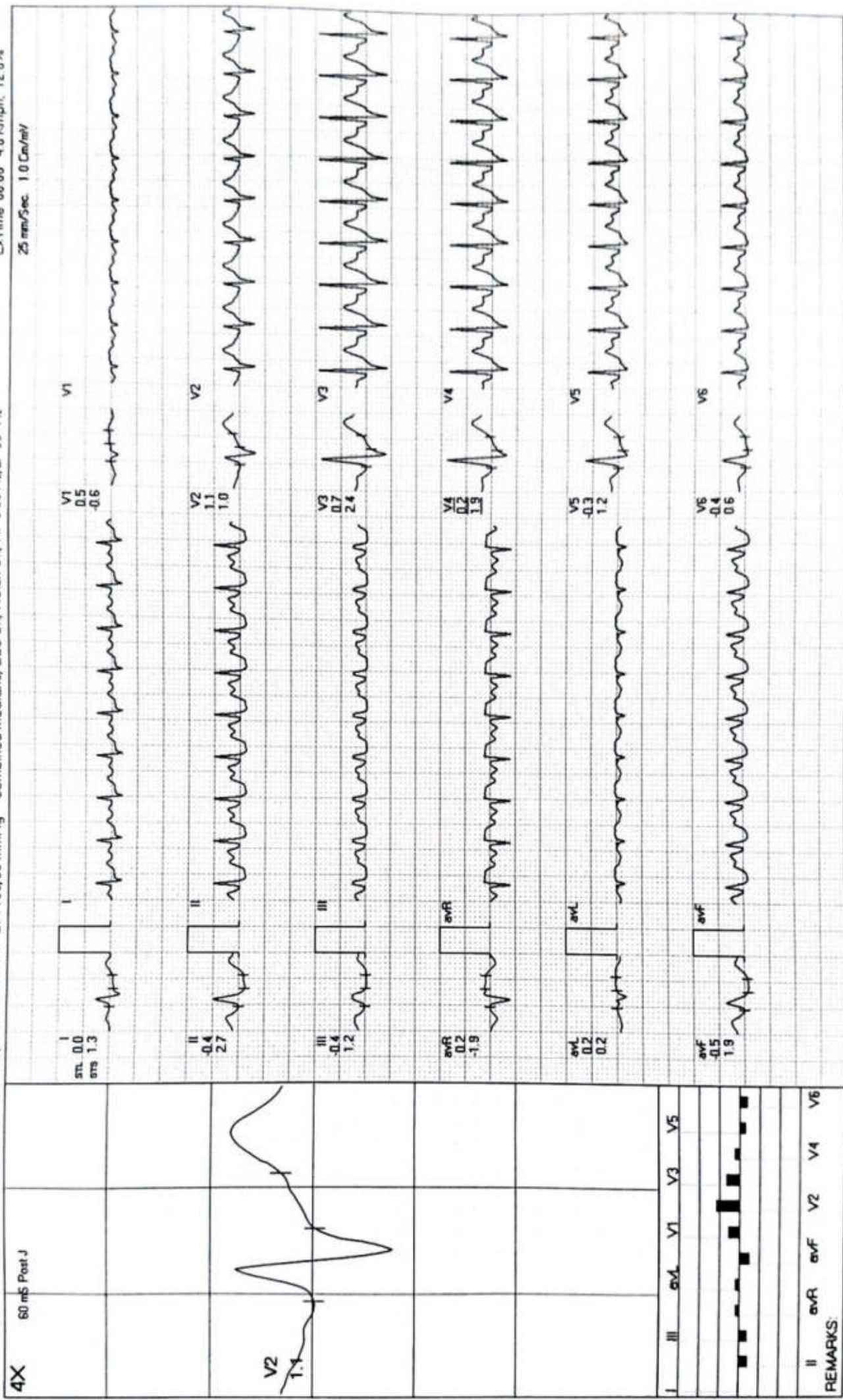
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RAHUL YADAV / 38 Yrs / M / 175 Cms / 76 Kg / HR : 171

BRUCE: Stage 2(3:00)



Date: 10-02-2024 METS 7.1/171 bpm 94% of THR BP: 136/86 mmHg Combined Medians/BLC-On/Notch On/HF 0.05 Hz/LF 35 Hz ExTime 06:00 4.0 Kmph. 12.0%
 4X 60 mS Post J 25 mm/Sec. 1.0 Cm/mt



REMARKS:

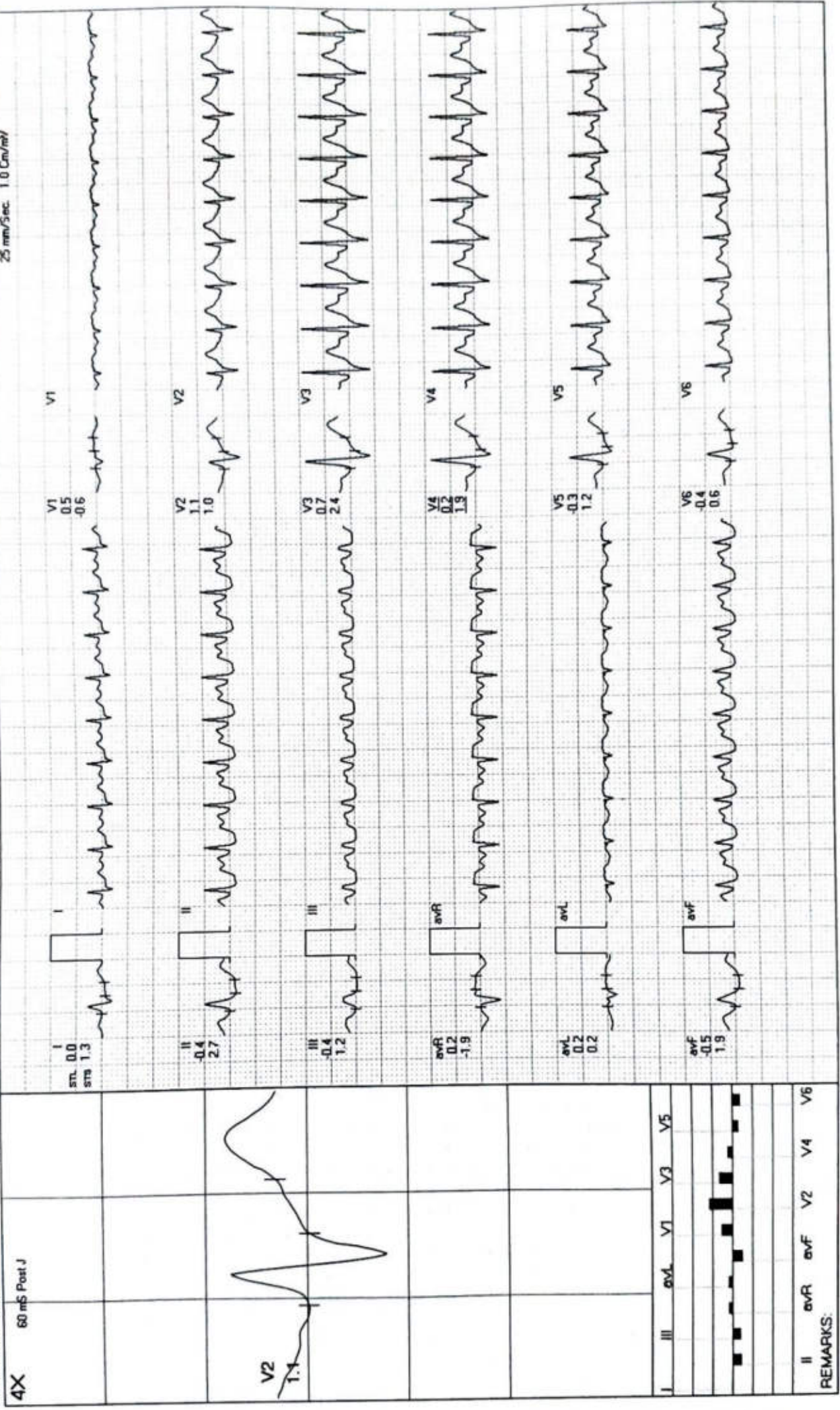


PeakEx

MODERN PATHOLOGY AND DIAGNOSTIC CENTER

RAHUL YADAV / 38 Yrs / M / 175 Cms / 76 Kg / HR : 173

Date: 10 - 02 - 2024 METS 7.2/173 bpm 95% of THR BP 140/90 mmHg Combined Medians/ BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz ExTime 06:05 0.0 Kmph 0.0%



REMARKS:

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RAHUL YADAV / 38 Yrs / M / 175 Cms / 76 Kg / HR : 152

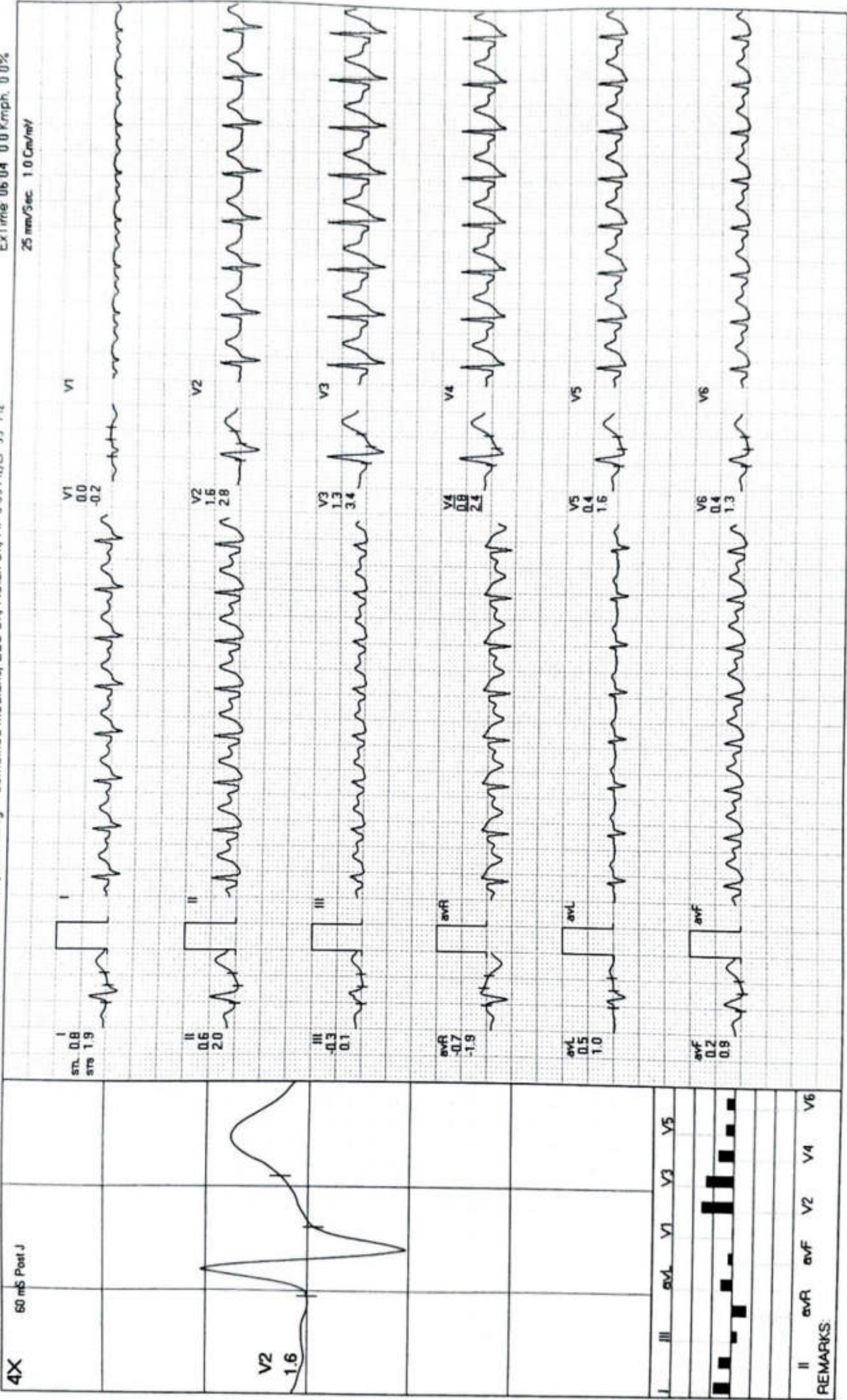
Recovery(1:00)



Date 10-02-2024

METS 1 2/152 bpm 84% of THR BP 139/88 mmHg Combined Medians/BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

ExTime 06:04 0.0 Kmph. 0.0%



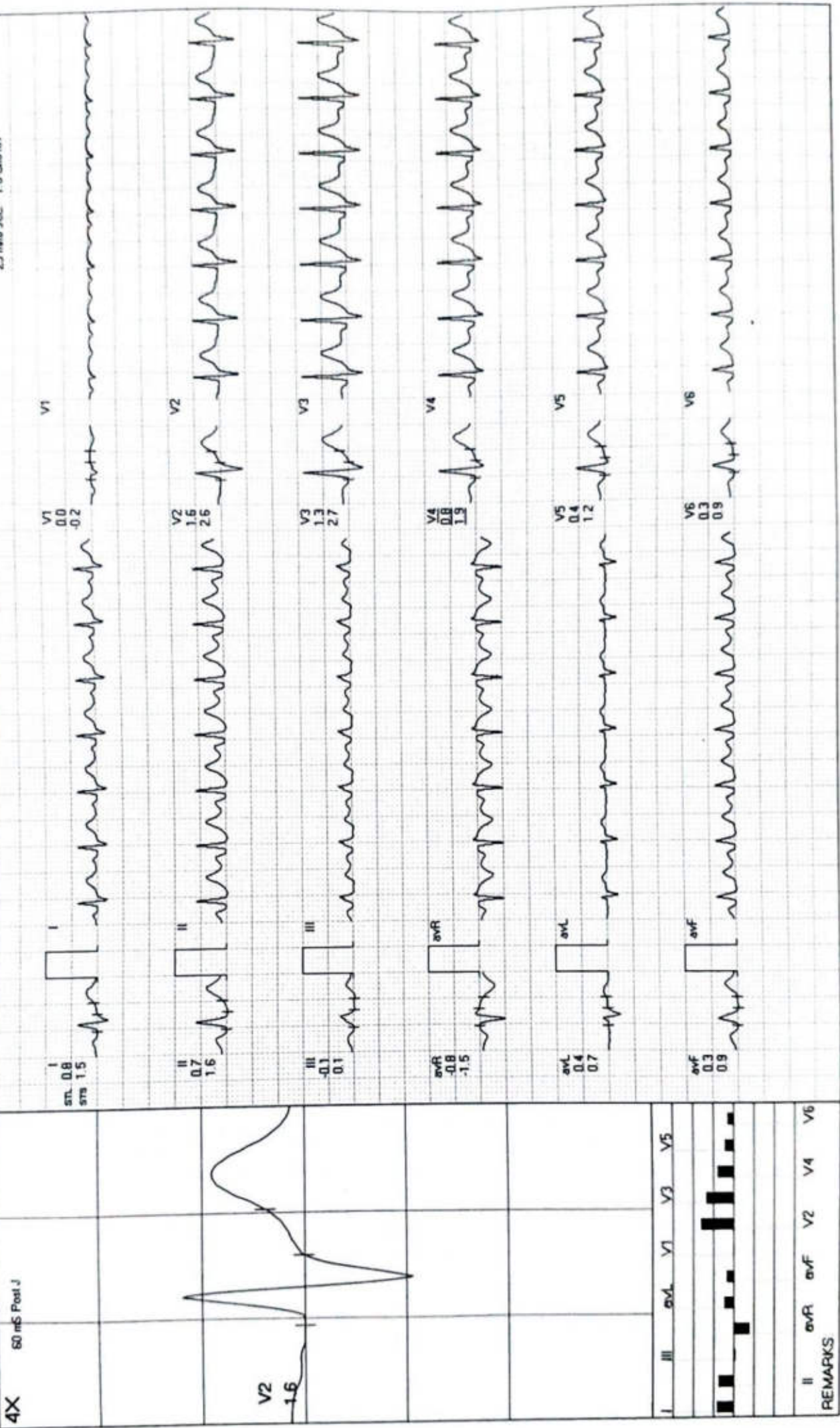
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RAHUL YADAV / 38 Yrs / M / 175 Cms / 76 Kg / HR : 140

Recovery(2:00)



Date 10-02-2024 METS 1.0 / 140 bpm 77% of THR BP 134/84 mmHg Combined Medians/BLC On/ HF 0.05 Hz/LF 35 Hz ExTime 06:04 0.0 Kmph. 0.0%

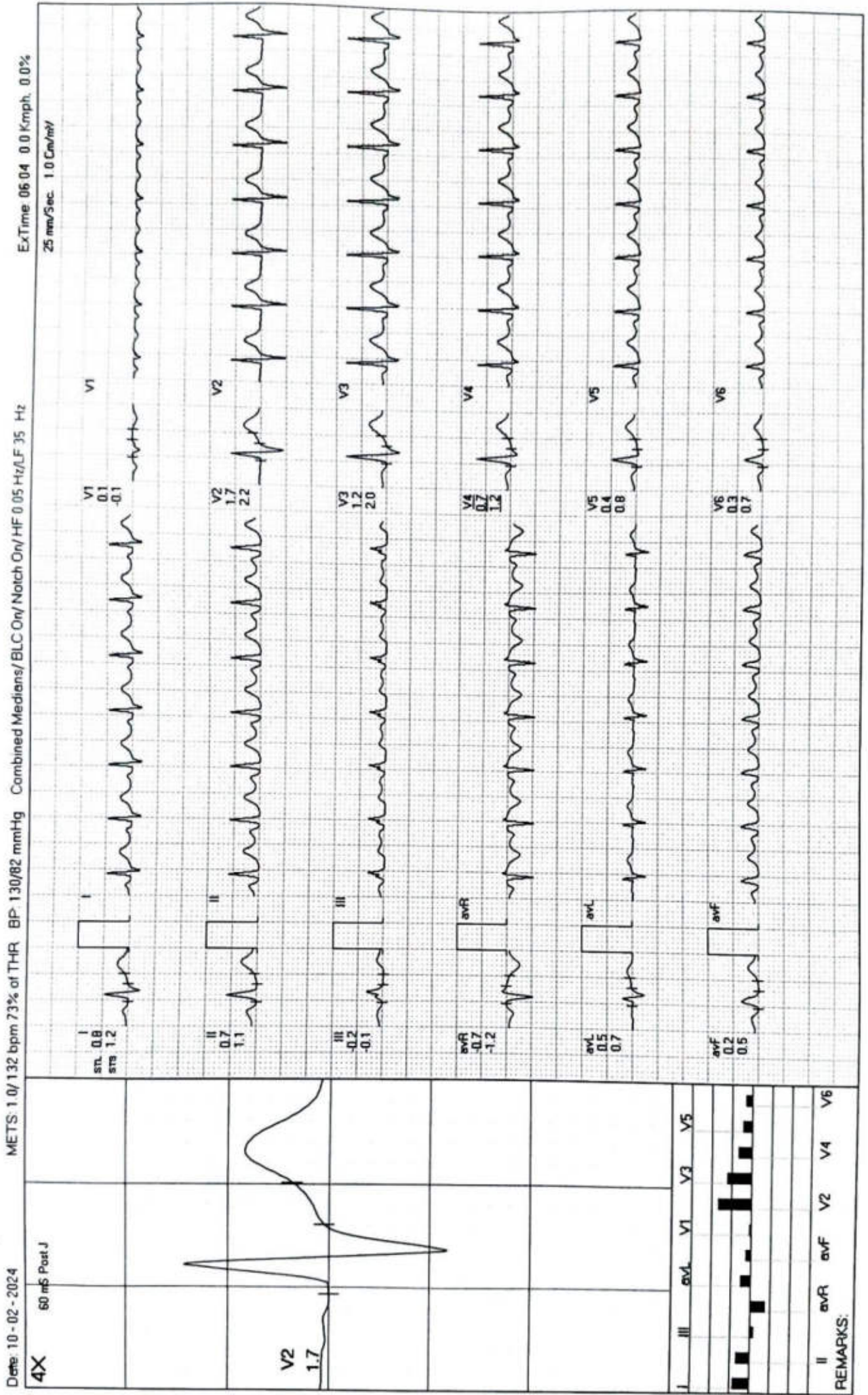


REMARKS

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RAHUL YADAV / 38 Yrs / M / 175 Cms / 76 Kg / HR : 132

Recovery(3:00)



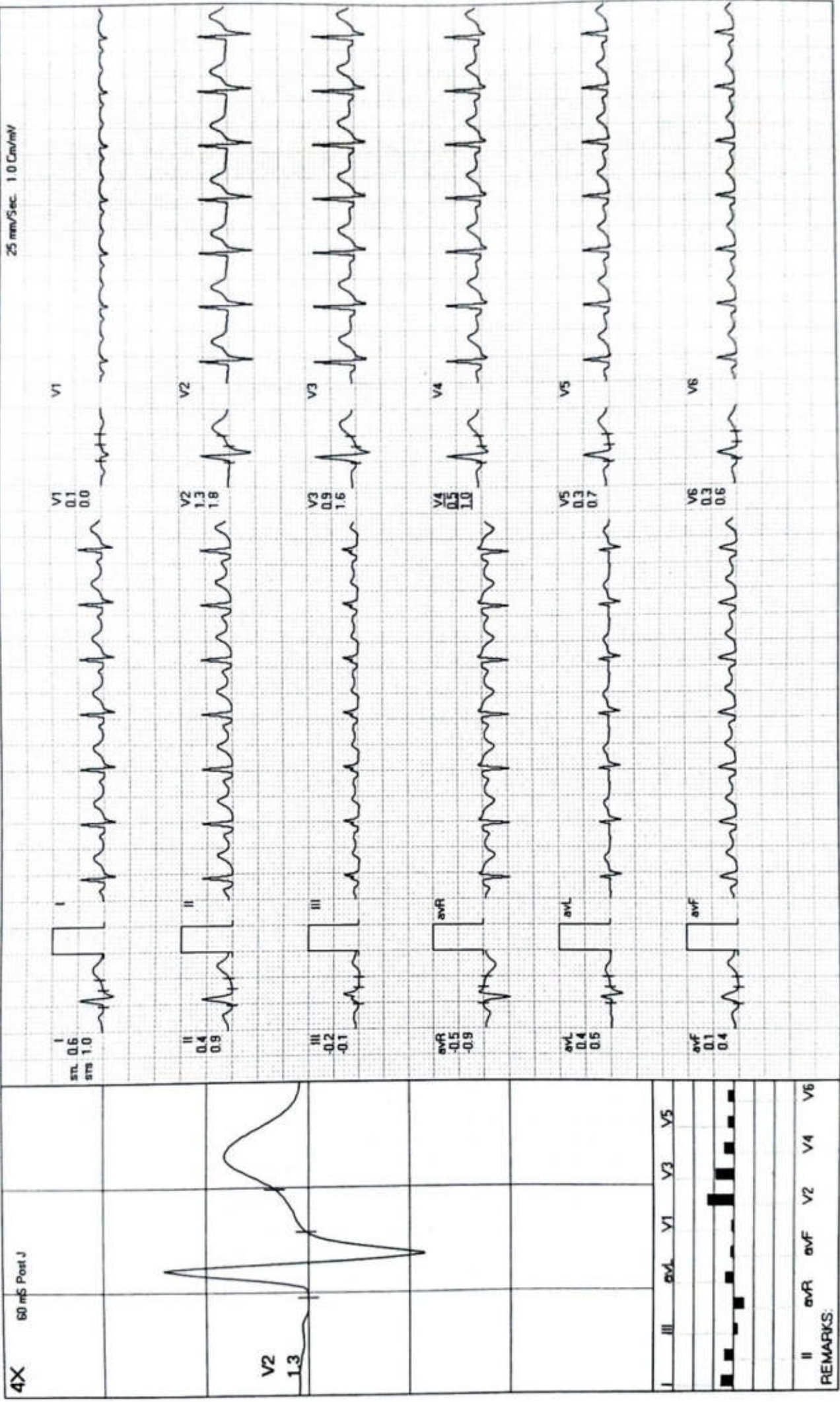
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Recovery(3:06)



RAHUL YADAV / 38 Yrs / M / 175 Cms / 76 Kg / HR : 132

Date: 10-02-2024 METS 1.0/132 bpm 73% of THR BP: 130/82 mmHg Combined Medians/BLC On/Notch On/HF 0.05 Hz/LF 35 Hz ExTime 06:04 0.0 Kmph 0.0%
 25 mm/Sec 1.0 Cm/mV



REMARKS:



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

TEST REQUEST ID :012402100020	SAMPLE DATE	:10/Feb/2024 09:17AM
NAME :Mr. RAHUL YADAV	SAMPLE REC. DATE	:10/Feb/2024 09:17AM
AGE/SEX :38 YRS/MALE	REPORTED DATE	:10/Feb/2024 12:44PM
REFERRED BY : Apollo Health and Lifestyle Limited.	BARCODE NO	:01100020

USG WHOLE ABDOMEN-MALE

Liver: is normal in size (131 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 enlarged in size (132 mm), shape and echotexture. No focal echovariant lesion is seen. Splenic vein is normal.

Both Kidneys: are normal in size (RK- 94 x 46 mm & LK -103 x 53 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.

Prostate: is normal in size (33 x 31 x 29 mms, wt = 16.2 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:

- GRADE-I FATTY LIVER
- SPLEENOMEGALY

*** End Of Report ***

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


DR. PANKAJ UPADHYAYA
Consultant Radiologist

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

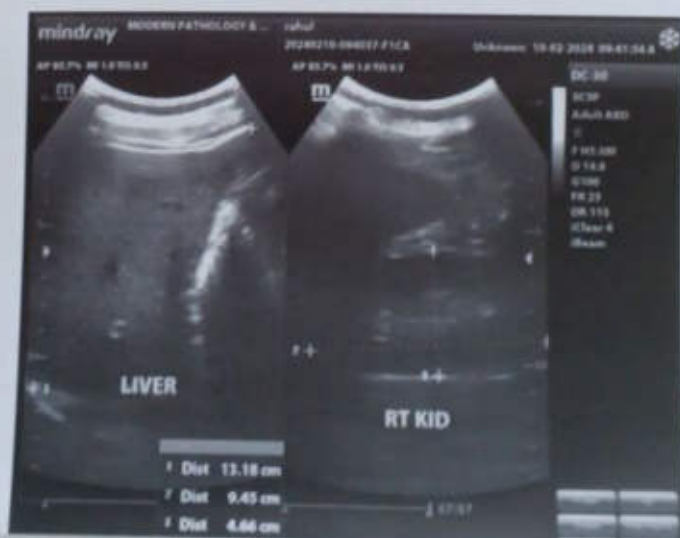
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TEST REQUEST ID :012402100020	SAMPLE DATE	:10/Feb/2024 09:17AM
NAME :Mr. RAHUL YADAV	SAMPLE REC. DATE	:10/Feb/2024 09:22AM
AGE/SEX :38 YRS/MALE	REPORTED DATE	:10/Feb/2024 11:17AM
REFERRED BY : Apollo Health and Lifestyle Limited,	BARCODE NO	:01100020

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

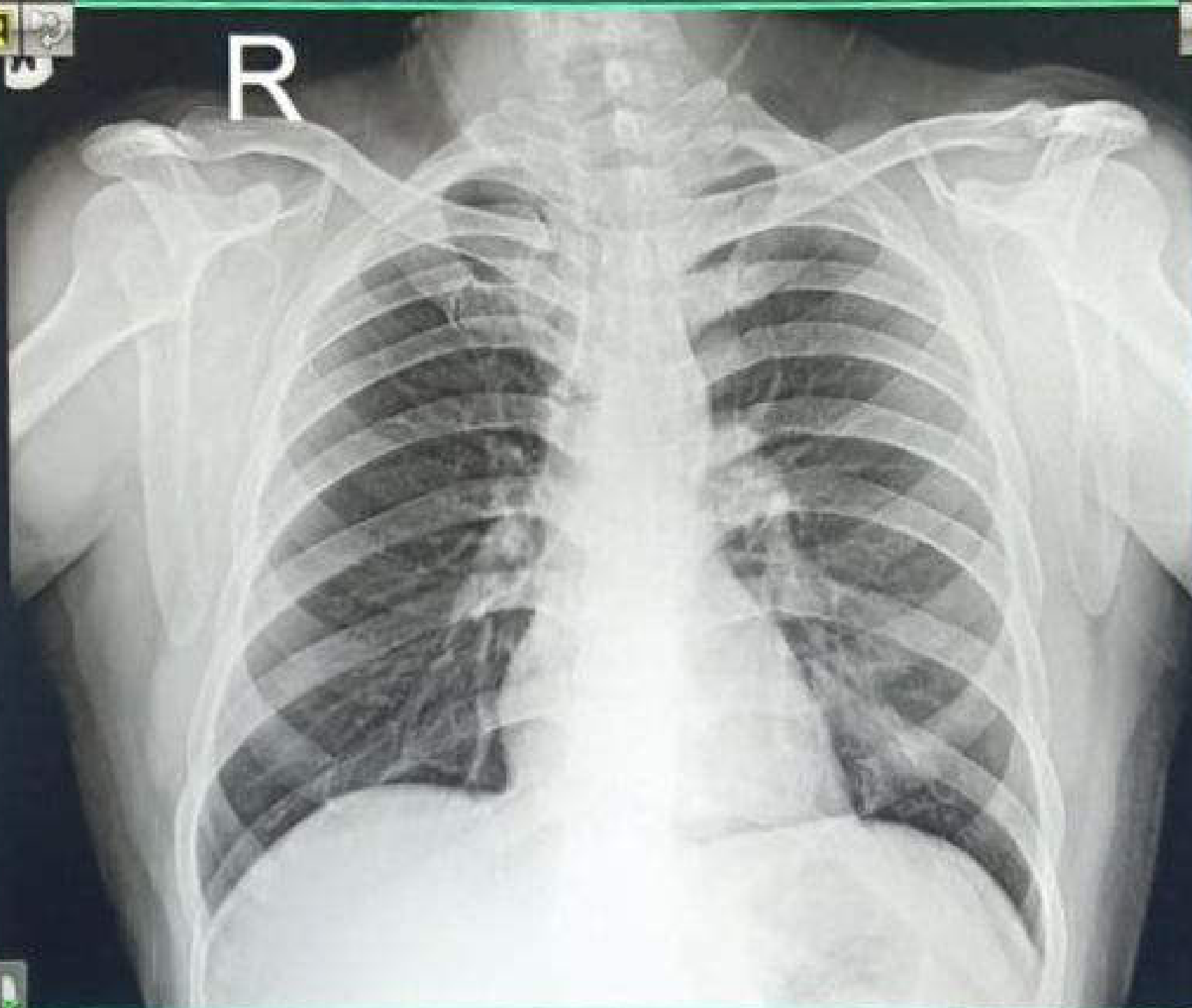
Results, adhering to W.H.O. and International Federation of Clinical Chemists Quality Control Standards.

DR. PANKAJ UPADHYAYA
SAMRAT COLLECTION FACILITY AVAILABLE

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Checked By: FAISHAL



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