

MER- MEDICAL EXAMINATION REPORT

Date of Examination	22/1/24		
NAME	ABHISHEK KUMAR SINGH		
AGE	33	Gender	M
HEIGHT(cm)	175	WEIGHT (kg)	78 BMR 25.5
B.P.	120/78		
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 Piy		


 Dr. Abhishek Singh
 Medical Examiner
 Reg. No. 123456789
 Signature with Stamp of Medical Examiner





Ashok Singh



You have been informed that ent ophthal Dental 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.

Abhisek Singh



CLINIC :
1/4A, Vineet Khand, (Opp Jaipuria Management)
Gomti Nagar, Lucknow - 226 010
Ph : 0522-4008184, 4308184 • 8112323230
Mob : 7618884441, 9450389932, 8177063877

Date	: 22-Jan-2024		
Name	: Mr. ABHISHEK KUMAR SINGH	Age	: 33 Yrs.
Ref.By	: APOLLO HEALTH	Sex	: Male
Haemoglobin	19.1	gm%	14 - 17
Total Leucocyte Count	7900	Cells/cumm.	4000-11000
Differential Leucocyte Count			
Polymorphs	47	%	45 - 70
Lymphocytes	40	%	20 - 45
Eosinophils	06	%	0 - 6
Monocytes	07	%	0 - 8
Basophils	00	%	0 - 1
Erythrocyte Sedimentation Rate (Wintrobe)			
ESR	04	mm in 1st Hr.	0 - 9
PCV	58.7	cc%	40 - 52
Corrected ESR	00	mm in 1st Hr.	0 - 9
Platelet Count	2.26	lakh/cumm.	1.5 - 4.0
Red Cells Count	5.25	million/cmm	3.90 to 5.80
Absolute values			
MCV	110.7	fL	77 - 97
MCH	38.5	pg	27 - 31
MCHC	34.4	gm /dl	31 - 34

Dr. Sanjay Rastogi
Page 1 of 1 (End of Report)
M.B.B.S., DCP, CRAT (BARC)

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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MODERN PATHOLOGY & DIAGNOSTIC CENTRE

DIAGNOSTIC CENTRE

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



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Date : 22-Jan-2024

Name : **Mr. ABHISHEK KUMAR SINGH**

Age : 33 Yrs.

Ref.By : APOLLO HEALTH

Sex : Male

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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Date	: 22-Jan-2024			
Name	: Mr. ABHISHEK KUMAR SINGH		Age	: 33 Yrs.
Ref.By	: APOLLO HEALTH		Sex	: Male
Plasma Glucose - F GOD-POD Method	113	mg/dl	70 - 110	
Plasma Glucose - PP GOD-POD Method	100	mg/dl	110 - 170	
Blood Group & Rh	"B" Positive			
KFT				
UREA	19.4	mg %	15 - 50	
CREATININE	1.29	mg %	0.5 - 1.5	
URIC ACID	5.2	mg %	2 - 7	
CALCIUM	9.8	mg %	8.8 - 10.0	
LFT T&D				
Total Bilirubin	0.57	mg%	0.2 - 1.0	
Direct Bilirubin	0.21	mg%	0.0 to 0.40	
Indirect Bilirubin	0.36	mg%	0.10 to 0.90	
S.G.P.T	308	IU/L	5 - 40	
S.G.O.T	256	IU/L	5 - 50	
ALP	91	IU/L	40 to 129	

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Date	: 22-Jan-2024		
Name	: Mr. ABHISHEK KUMAR SINGH	Age	: 33 Yrs.
Ref.By	: APOLLO HEALTH	Sex	: Male

Serum Gamma G.T.	18	IU/L	11 - 50
------------------	----	------	---------

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

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

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

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Date	: 22-Jan-2024	Age	: 33 Yrs.
Name	: Mr. ABHISHEK KUMAR SINGH	Sex	: Male
Ref.By	: APOLLO HEALTH		

LIPID PROFILE

Triglycerids	365	mg%	70 - 190
S. Cholestrol S.	253	mg%	130 - 230
S. HDL Cholestrol	46.0	mg%	35 - 75
S. LDL Cholestrol	134	mg%	75 - 150
VLDL	73	mg%	0 - 34
Chol / HDL factor	5.5		
LDL / HDL Factor	2.91		

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. ABHISHEK KUMAR SINGH**
Ref.By : APOLLO HEALTH
Age : 33 Yrs.
Sex : Male

THYROID TEST

Tri-iodothyronine (T3)	1.26	nmol/L	0.50 to 2.50
Thyroxine (T4)	6.35	mcg/dL	5.0 to 12.5
Thyroid Stimulating Hormone (TSH)	1.89	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	: 22-Jan-2024	Age	: 33 Yrs.
Name	: Mr. ABHISHEK KUMAR SINGH	Sex	: Male
Ref.By	: APOLLO HEALTH		

Glycosylated Haemoglobin

5.6 % 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 : 22-Jan-2024

Name : **Mr. ABHISHEK KUMAR SINGH**

Age : 33 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	Occasional	/hpf
Red Blood Cells	Nil	/hpf
Casts	Nil	
Crystals	Nil	
Others	Nil	

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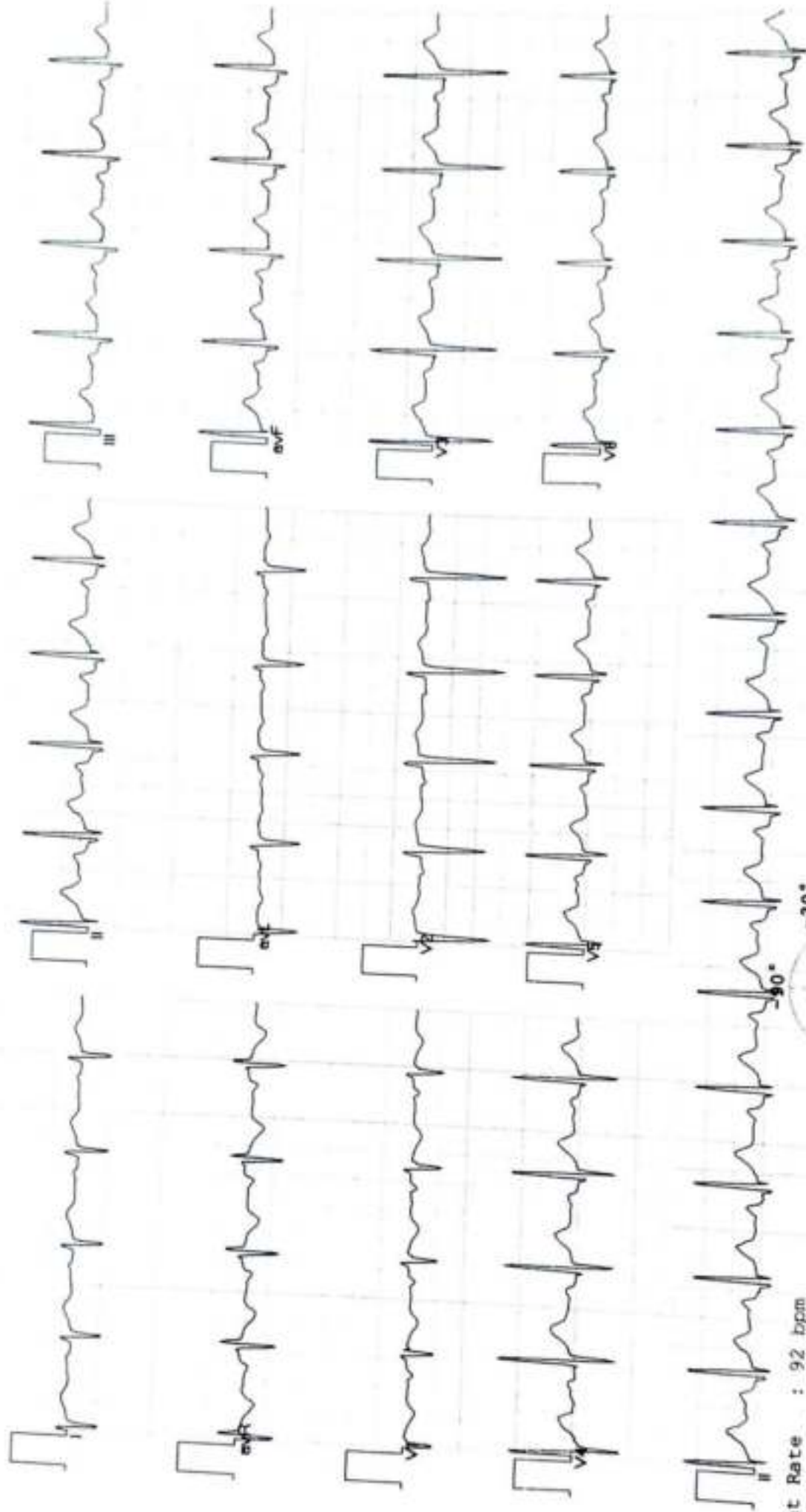
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Vent Rate : 92 bpm
PR Interval : 150 ms
QRS Duration: 78 ms
QT/QTc Int : 338/394 ms
P-QRS-T axis: 75.00• 103.00• 71.00•



Allergens ECG (Pisces)(PIS215191030)

Normal ECG
ANIL MOHAN
10/1/2024

Atkande Sind

Axis
90° R 103° T 71° P 75°

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Gomti Nagar Lucknow

Report

ABHISHEK KUMAR SINGH / 33 Yrs / M / 175 Cms / 78 Kg

Date: 22 - 01 - 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	096	51 %	120/78	115	00	
Standing	00:07	0:04	00.0	00.0	01.0	096	51 %	120/78	115	00	
HV	00:12	0:05	00.0	00.0	01.0	097	52 %	120/78	116	00	
ExStart	00:18	0:06	00.0	00.0	01.0	097	52 %	120/78	116	00	
BRUCE Stage 1	03:18	3:00	02.7	10.0	04.7	126	67 %	132/84	166	00	
BRUCE Stage 2	06:18	3:00	04.0	12.0	07.1	146	78 %	140/90	204	00	
PeakEx	07:23	1:05	05.5	14.0	08.2	161	86 %	144/92	231	00	
Recovery	08:23	1:00	00.0	00.0	01.2	142	76 %	142/90	201	00	
Recovery	09:23	2:00	00.0	00.0	01.0	123	66 %	136/86	167	00	
Recovery	10:23	3:00	00.0	00.0	01.0	117	63 %	132/82	154	00	
Recovery	10:29	3:06	00.0	00.0	01.0	118	63 %	128/80	151	00	

FINDINGS :

Exercise Time : 07:05
Max HR Attained : 161 bpm 86% of Target 187
Max BP Attained : 144/92 (mm/Hg)
Max WorkLoad Attained : 8.2 Fair response to induced stress
Test End Reasons : Test Complete

REPORT :

CONCLUSIONS:

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


 Dr. AMIT MOHAN
 RCP (C)

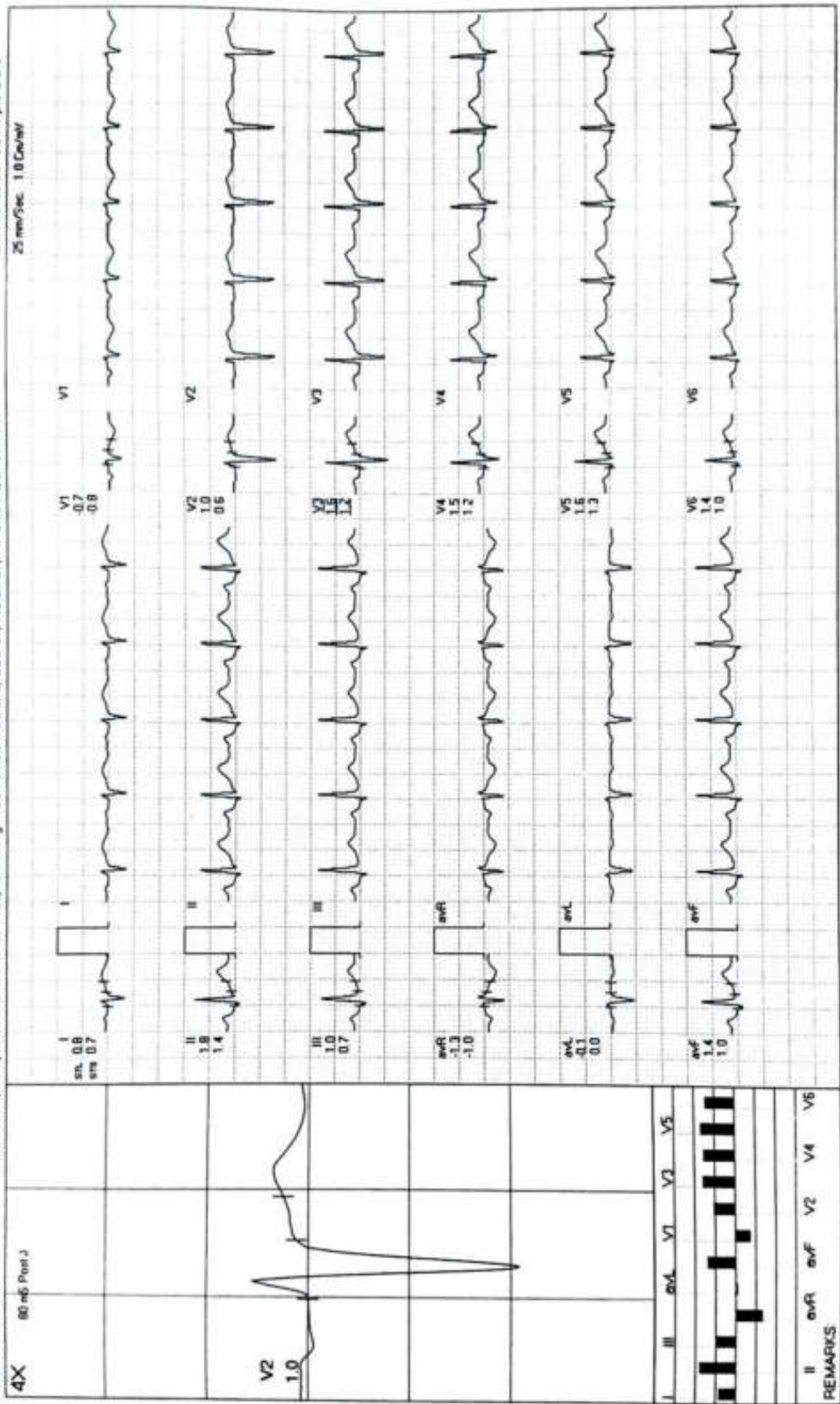
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ABHISHEK KUMAR SINGH / 33 Yrs / M / 175 Cms / 78 Kg / HR : 96

BRUCE:Supine(0:05)



Date 22-01-2024 METS 1.0/96 bpm 51% of ThR BP 120/78 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
 II aVR aVF V2 V4 V6

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ABHISHEK KUMAR SINGH / 33 Yrs / M / 175 Cms / 78 Kg / HR : 96

BRUCE: Standing(0:05)

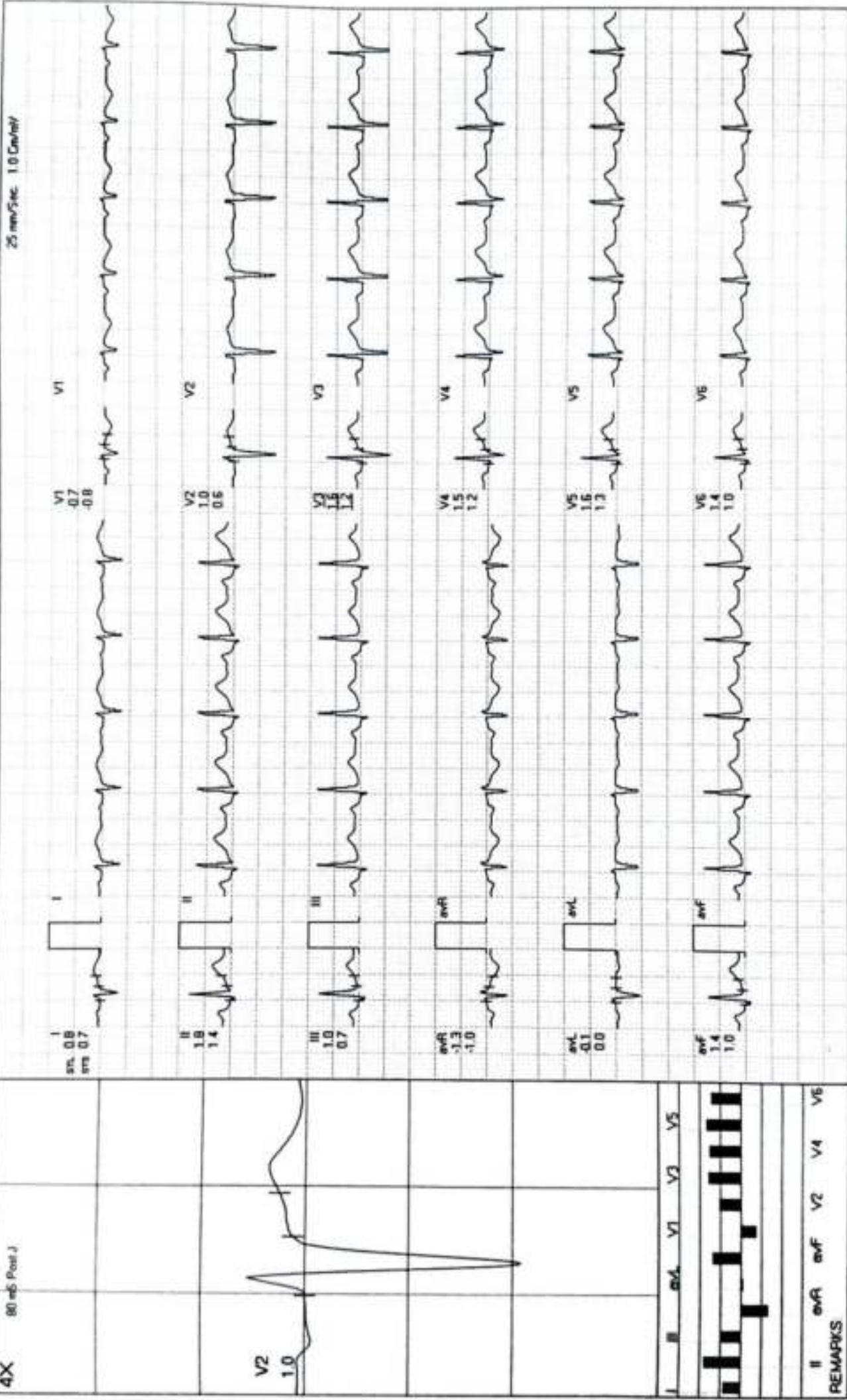


Date 22-01-2024

METS 1.0/96 bpm 51% of THR BP 120/78 mmHg Combined Medians/ BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

ExTime 00:00 0.0 Kmph 0.0%

4X 80 mV Post J



REMARKS

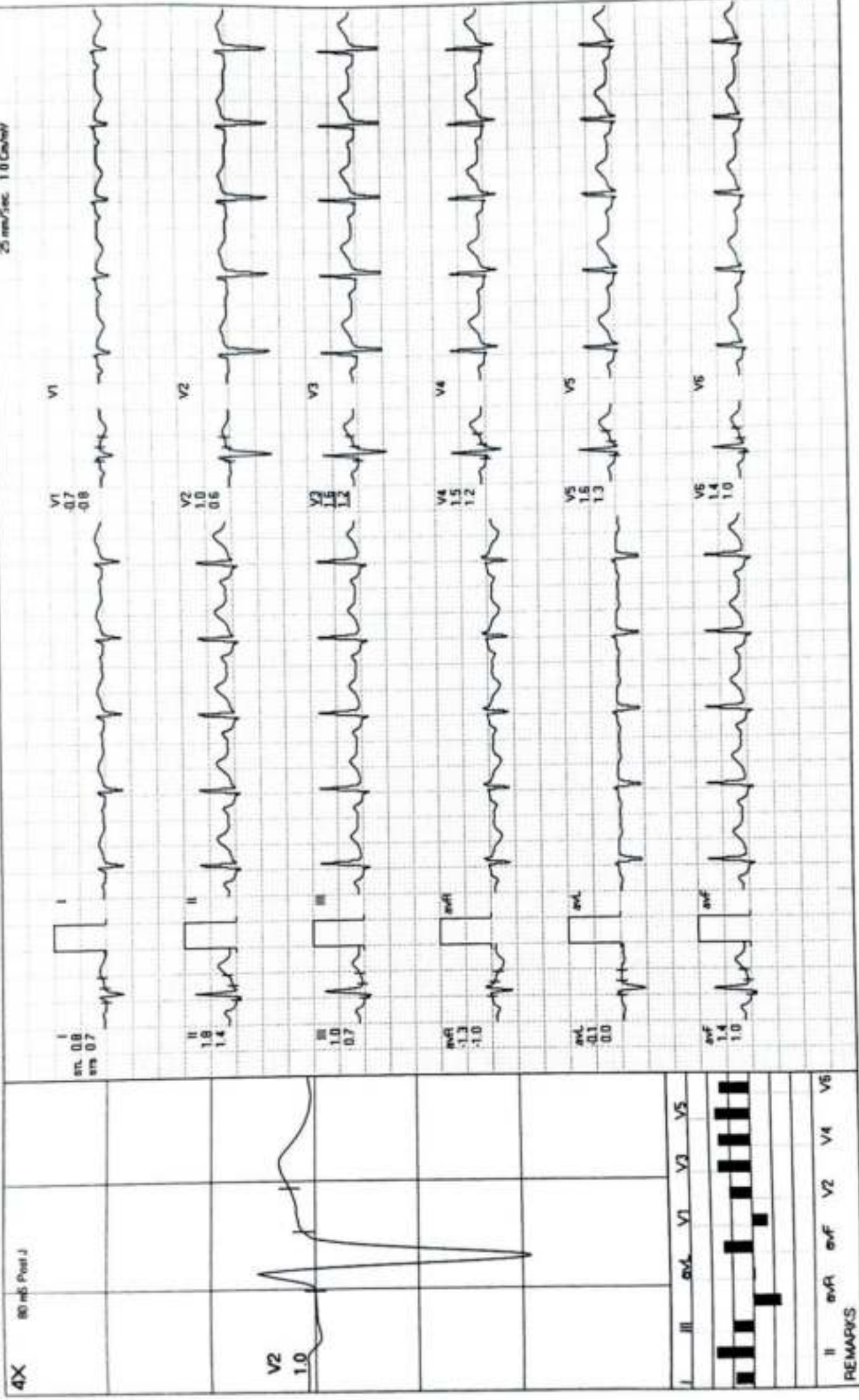
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ABHISHEK KUMAR SINGH / 33 Yrs / M / 175 Cms / 78 Kg / HR : 97

BRUCE:HV(0:06)



Date: 22-01-2024 METS 1.0/ 97 bpm 52% of THR. BP 120/78 mmHg Combined Medians/ BLC On/ H/F 0.05 Hz/LF 35 Hz
 E-Time 00:00 0.0 Kmph 0.0%
 25 mm/Sec 1.0 Cm/Div



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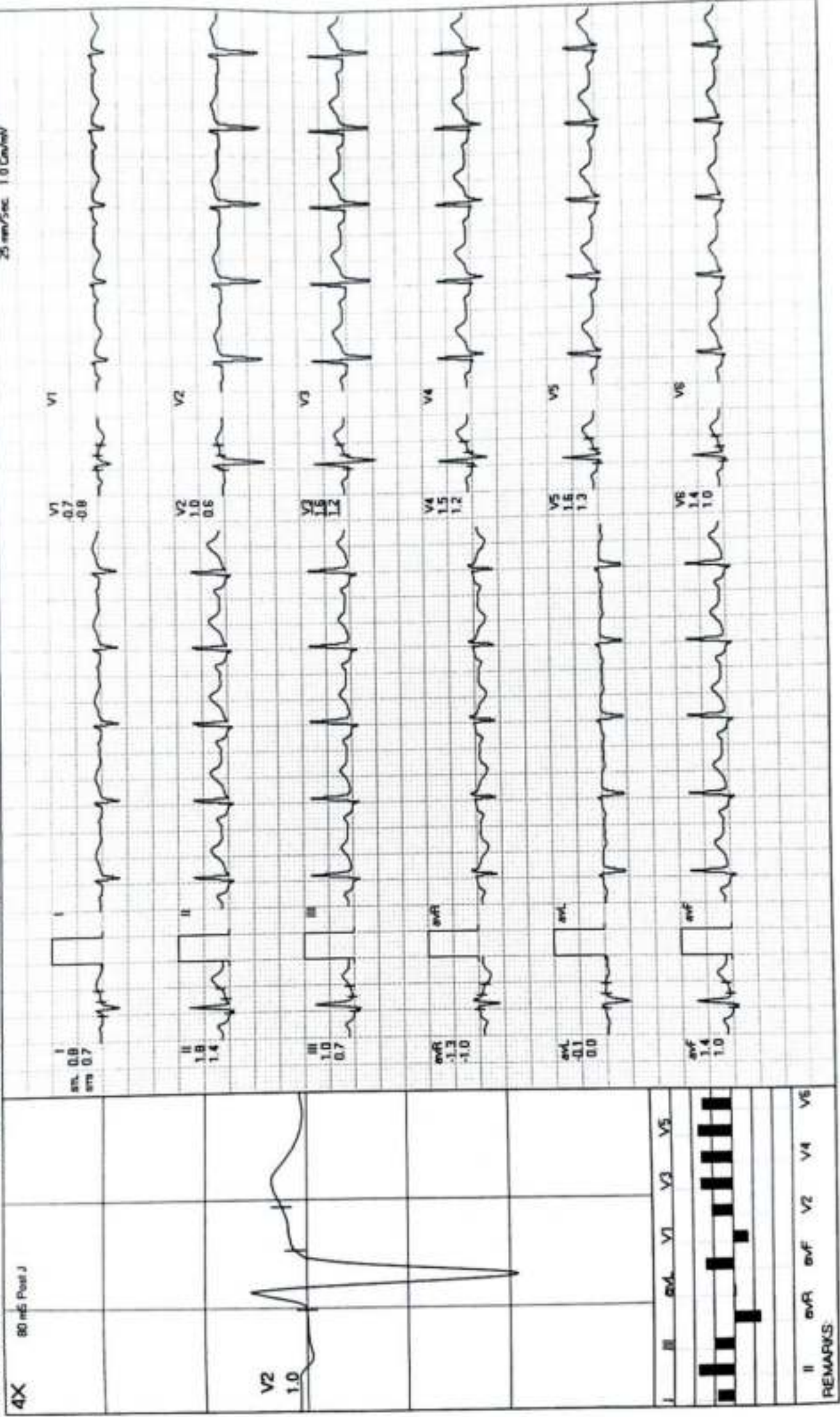
ABHISHEK KUMAR SINGH / 33 Yrs / M / 175 Cms / 78 Kg / HR : 97

ExStart



Date: 22-01-2024 METS: 1.0/97 bpm 52% of THR BP: 120/78 mmHg Combined Medians/BLC On/Notch On/HF 0.05 Hz/LF 35 Hz

ExTime: 00:00 0.0 Fmph 0.0%
25 mm/Sec 1.0 Cal/cmV



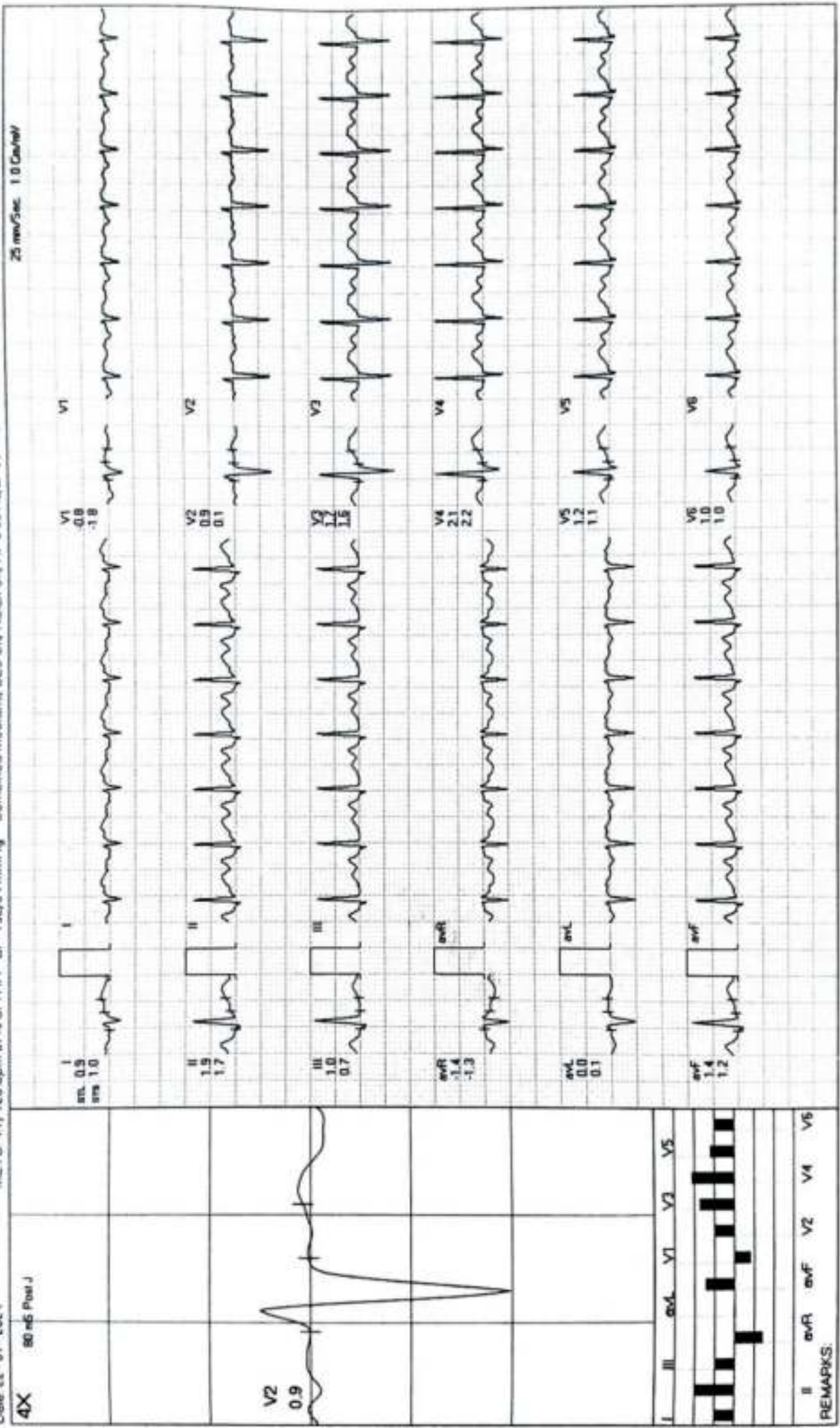
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ABHISHEK KUMAR SINGH / 33 Yrs / M / 175 Cms / 78 Kg / HR : 126

BRUCE: Stage 1(3:00)



Date 22-01-2024 METS 4.7/126 bpm 67% of THR BP 132/84 mmHg Combined Medians/ BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz Ex Time 03:00 2.7 Kmph 10.0%
 4X 80 mS Post J 25 mm/Sec 1.0 Cm/mV



REMARKS: II aVR aVF V2 V4 V6

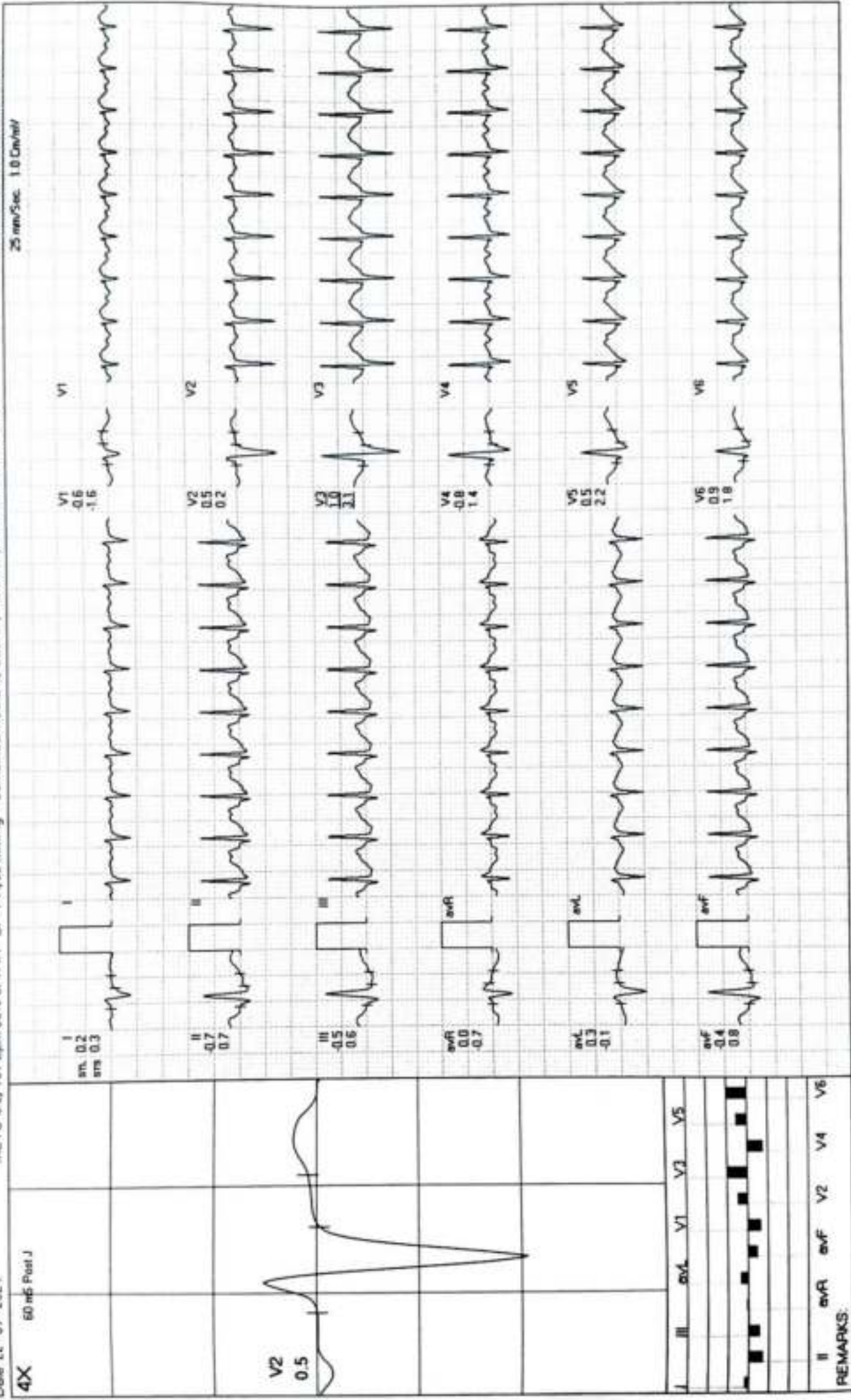
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ABHISHEK KUMAR SINGH / 33 Yrs / M / 175 Cms / 78 Kg / HR : 161

PeakEx



Date: 22-01-2024 METS: 8.2/161 bpm 86% of THR BP: 144/92 mmHg Combined Medians/BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz ExTime 07:05 5.5 Km/ph 14.0%



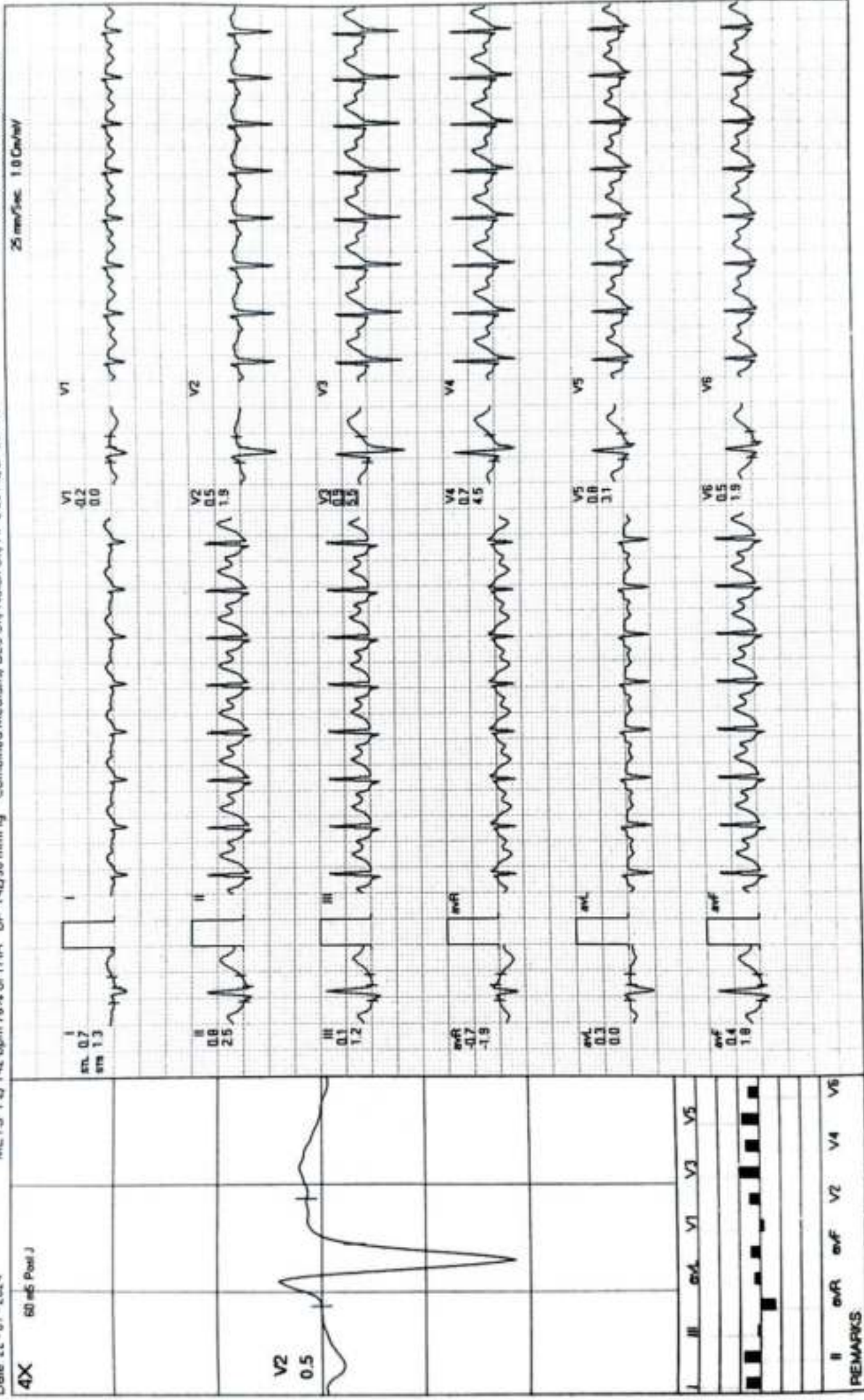
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Recovery(1:00)



ABHISHEK KUMAR SINGH / 33 Yrs / M / 175 Cms / 78 Kg / HR : 142

Date: 22-01-2024 METS: 1.2/142 bpm 76% of THR BP: 142/90 mmHg Combined Meds: B/C On/ N/A Off/ HF 0.05 Hz/ LF 35 Hz Ex-Time: 07:05 0.0 Kmph 0.0%



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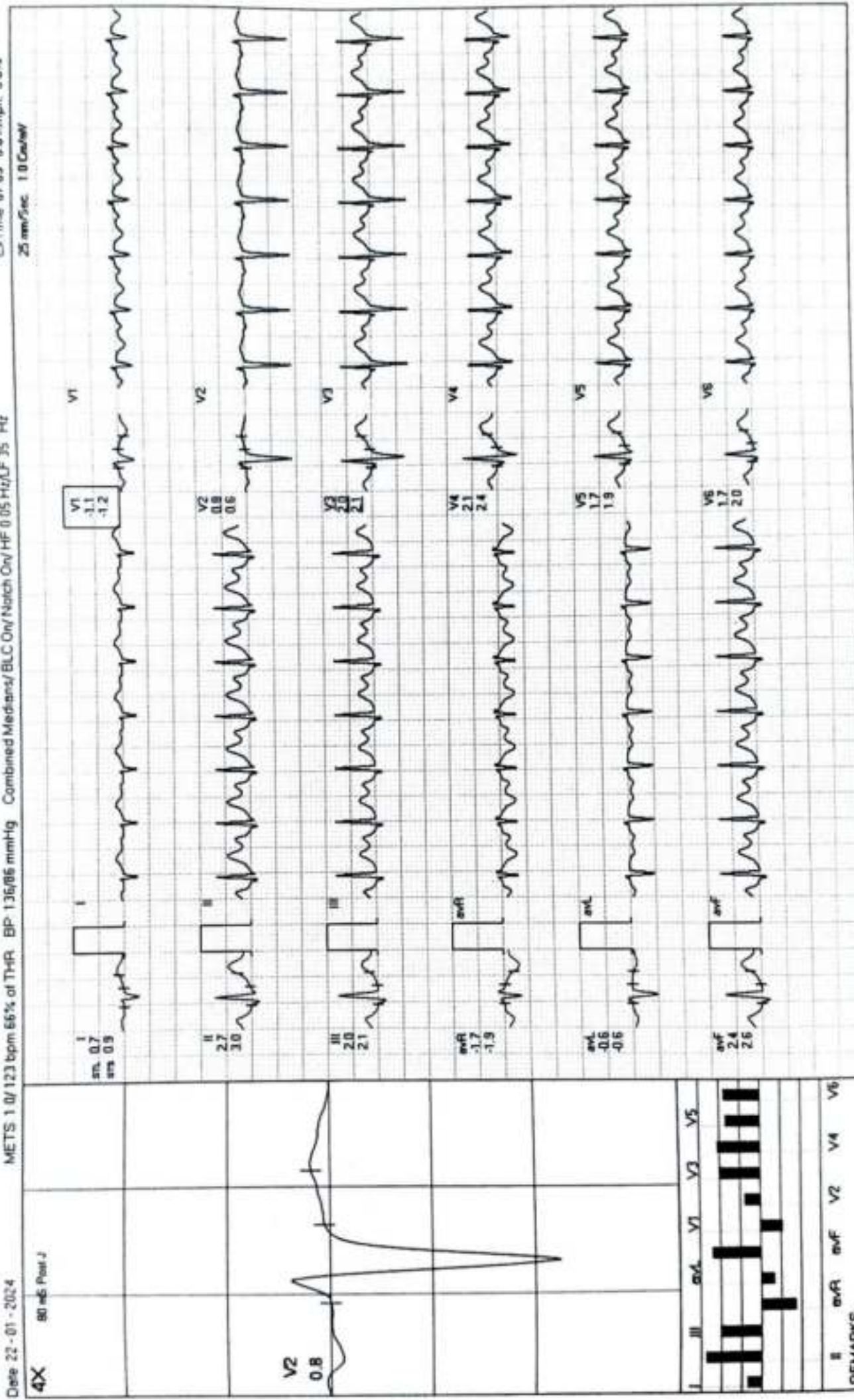
ABHISHEK KUMAR SINGH / 33 Yrs / M / 175 Cms / 78 Kg / HR : 123

Recovery(2:00)



ExTime 07:05 0.0 KmPh. 0.0%

METS 1.0/123 bpm 66% of THR BP: 136/86 mmHg Combined Medians/ BLC On/ Natch On/ HF 0.05 Hz/LF 35 Hz



4X 80 mV Post-J

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

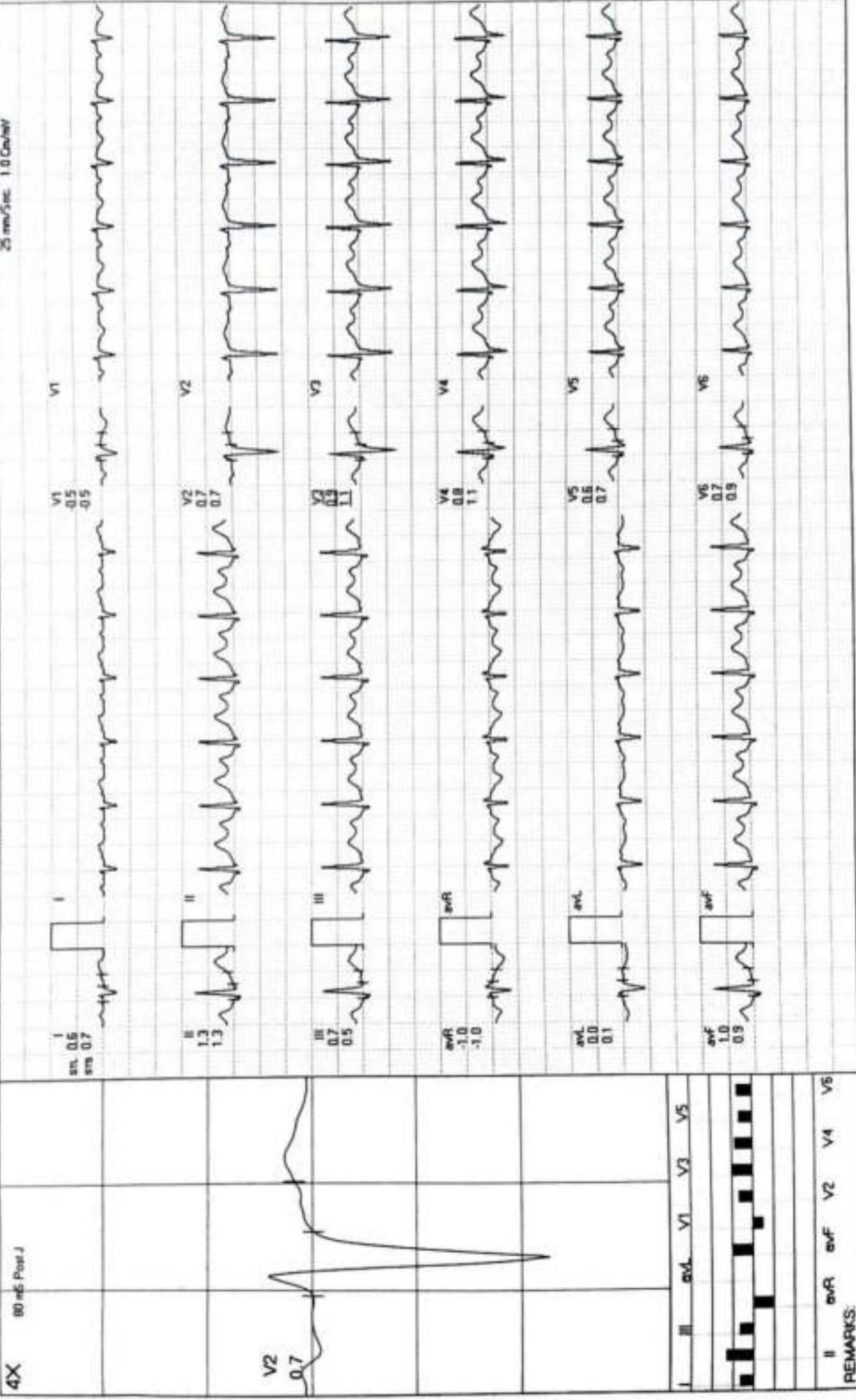
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ABHISHEK KUMAR SINGH / 33 Yrs / M / 175 Cms / 78 Kg / HR : 117

Recovery(3:00)



Date 22-01-2024 METS 1 0/117 bpm 63% of THR BP 132/82 mmHg Combined Medians/BLC On/Notch On/HF 0.05 Hz/LF 35 Hz Ex Time 07:05 0.0 Kmph 0.0%
 25 mm/Sec 1.0 Cal/mV



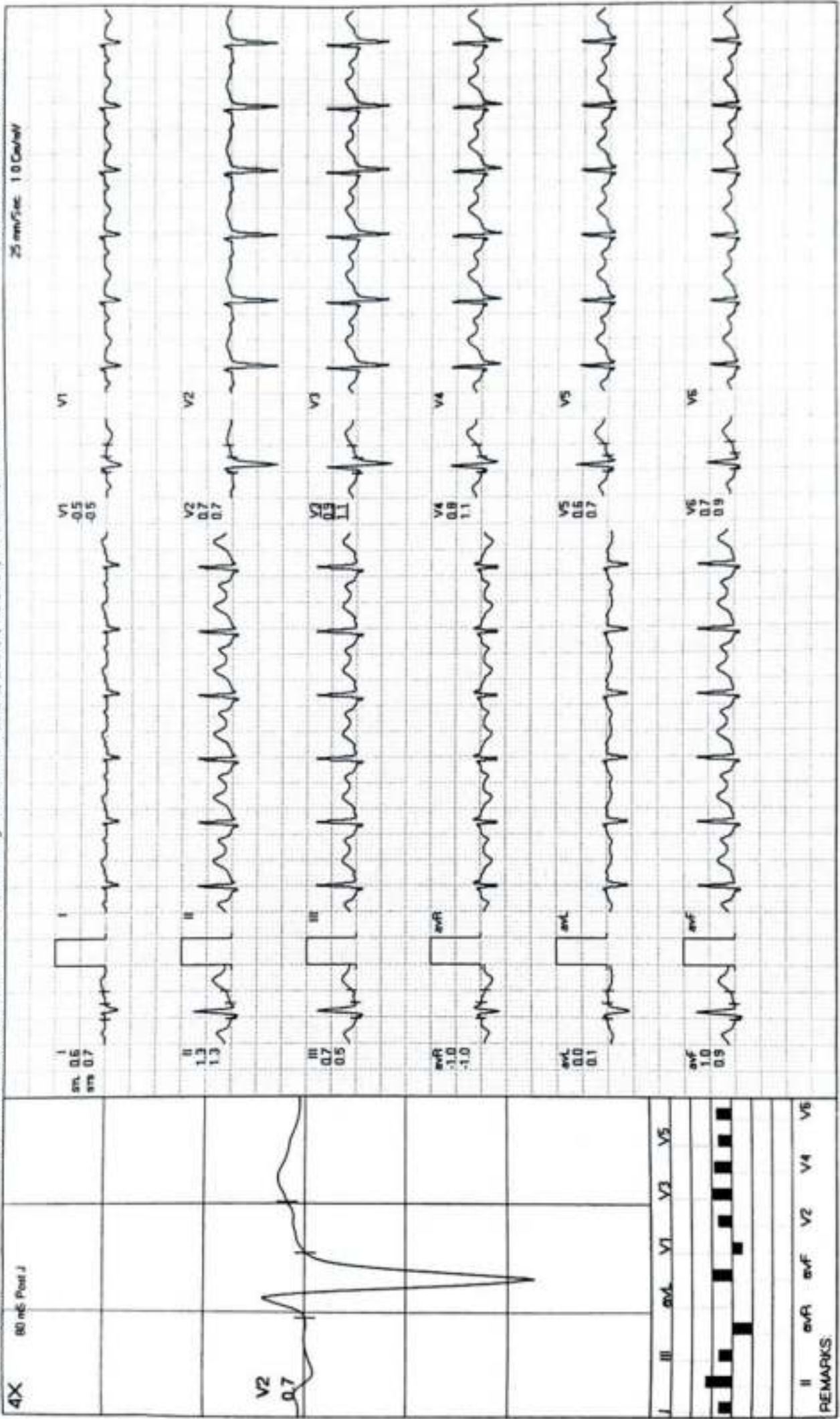
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ABHISHEK KUMAR SINGH / 33 Yrs / M / 175 Cms / 78 Kg / HR : 118

Recovery(3:06)



Date: 22-01-2024 METS: 1.0/118 bpm 63% of THR BP: 128/80 mmHg Combined Medians/ BLC-Only/ HF 0.05 Hz/ LF 35 Hz Ex Time: 07:05 0.0 Kmph 0.0%



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TEST REQUEST ID	:012401230011	SAMPLE DATE	:22/Jan/2024 09:17AM
NAME	:Mr. ABHISHEK KUMAR SINGH	SAMPLE REC. DATE	:22/Jan/2024 09:17AM
AGE/SEX	:33 YRS/MALE	REPORTED DATE	:22/Jan/2024 12:39PM
REFERRED BY	: Apollo Health and Lifestyle Limited,	BARCODE NO	:01220011

USG WHOLE ABDOMEN-MALE

Liver: is *enlarged in size (162 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 (116 mm), shape and echotexture. No focal echovariant lesion is seen. Splenic vein is normal.

Both Kidneys: are normal in size (RK- 94 x 49 mm & LK -110 x 56 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 (38 x 30 x 22 mms, wt = 13.7 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: HEPATOMEGALY WITH GRADE-III FATTY LIVER

*** 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

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

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NAME :Mr. ABHISHEK KUMAR SINGH	SAMPLE REC. DATE	:22/Jan/2024 09:17AM
AGE/SEX :33 YRS/MALE	REPORTED DATE	:22/Jan/2024 04:45PM
REFERRED BY : Apollo Health and Lifestyle Limited,	BARCODE NO	:01220011

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

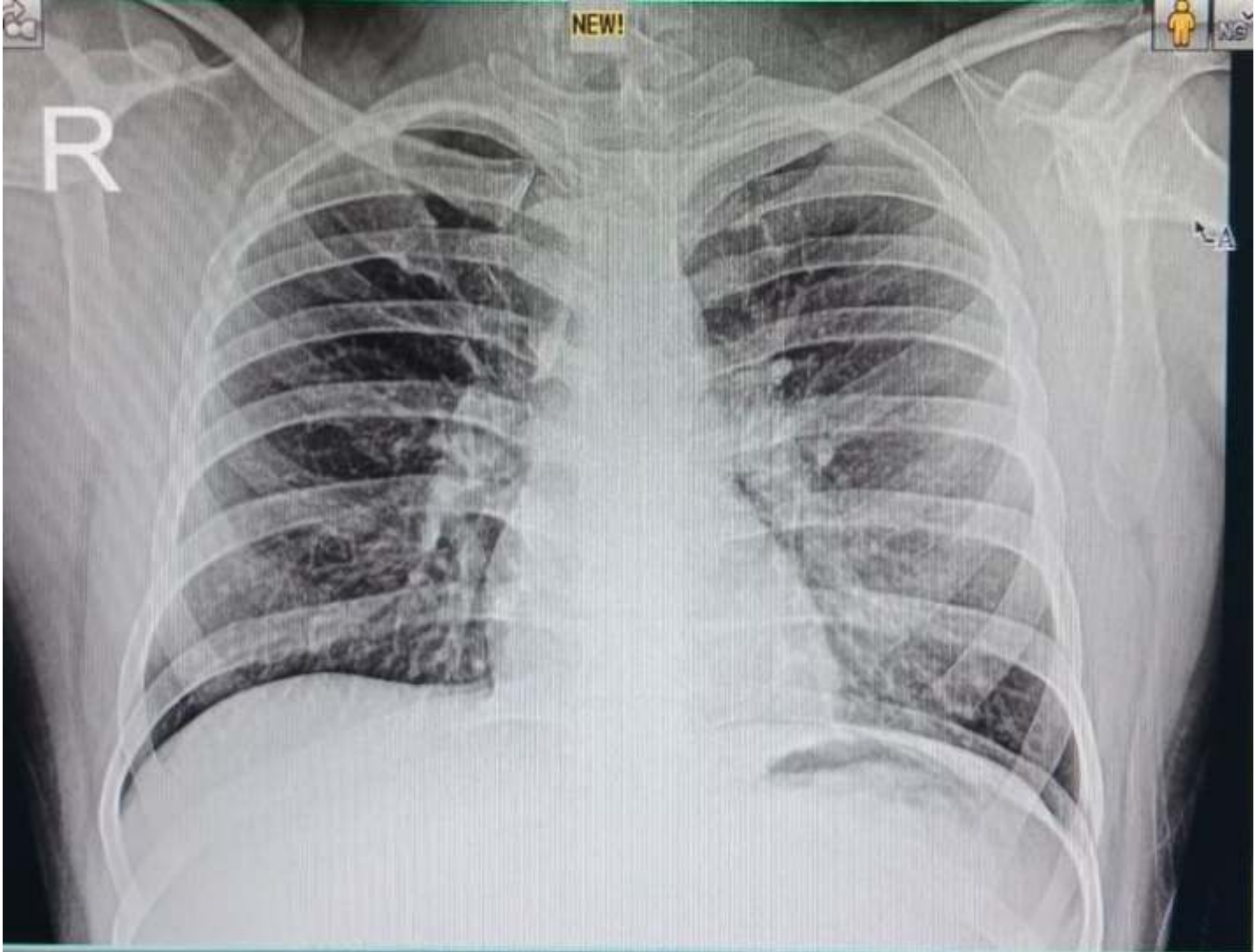
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