

MER- MEDICAL EXAMINATION REPORT

Date of Examination	23/3/24		
NAME	VIKAS SRIVASTAVA		
AGE	43	Gender	M
HEIGHT(cm)	178	WEIGHT (kg)	83 BME-281
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	Medicinesy Rip		



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

You have been informed that ent ,diet, ophthal 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.

A handwritten signature in blue ink, consisting of a large, stylized initial 'P' followed by a smaller, cursive signature.

भारतीय रिपब्लिक
भारत

विकास शीवास्त्व
Vikas Srivastava
जन्म तिथि / DOB : 23/04/1980
पुरुष / Male

Issue Date: 28/02/2011

8814 2434 6734

मेरा आधार, मेरी पहचान

Handwritten signature

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भारत

भारतीय विधिपट पहचान प्राधिकरण
National Identification Authority of India

पता: 108/बी रहेजा ग्रीन, रहेजा इस्टेट
कुलुपवादी मार्ग, राष्ट्रीय पार्क के पास,
बोरीवली ईस्ट, मुंबई, मुंबई सुबुरबान,
महाराष्ट्र, 400066

Print Date: 05/11/2012

Address: 108/B Raheja Green, Raheja
Estate Kulupwadi Road, Near national
Park, Borivall East, Mumbai, Mumbai
Suburban, Maharashtra, 400066

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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 : 23-Mar-2024
Name : **Mr. VIKAS SRIVASTAVA**
Ref.By : APOLLO HEALTH
Age : 43 Yrs.
Sex : Male

Haemoglobin 15.3 gm% 14 - 17

Total Leucocyte Count 6000 Cells/cumm. 4000-11000

Differential Leucocyte Count

Polymorphs	62	%	45 - 70
Lymphocytes	30	%	20 - 45
Eosinophils	03	%	0 - 6
Monocytes	05	%	0 - 8
Basophils	00	%	0 - 1

Erythrocyte Sedimentation Rate (Wintrobe)

ESR	06	mm in 1st Hr.	0 - 9
PCV	45.9	cc%	40 - 52
Corrected ESR	02	mm in 1st Hr.	0 - 9

Platelet Count 1.83 lakh/cumm. 1.5 - 4.0

Red Cells Count 5.09 million/cmm 3.90 to 5.80

Absolute values

MCV	90.1	fL	77 - 97
MCH	30.1	pg	27 - 31
MCHC	33.4	gm /dl	31 - 34

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Dr. Smriti 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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Date : 23-Mar-2024

Name : **Mr. VIKAS SRIVASTAVA**

Age : 43 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 : 23-Mar-2024
Name : **Mr. VIKAS SRIVASTAVA** Age : 43 Yrs.
Ref.By : APOLLO HEALTH Sex : Male

Urine Sugar (Fasting) NIL

Urine Sugar (PP) NIL

KFT			
UREA	19.1	mg %	15 - 50
CREATININE	0.88	mg %	0.5 - 1.5
URIC ACID	5.5	mg %	2 - 7
CALCIUM	9.6	mg %	8.8 - 10.0

Blood Group & Rh "B" Positive

Plasma Glucose - F
GOD-POD Method 114 mg/dl 70 - 110

Plasma Glucose - PP
GOD POD Method 161 mg/dl 110 - 170

LFT T&D			
Total Bilirubin	0.63	mg%	0.2 - 1.0
Direct Bilirubin	0.25	mg%	0.0 to 0.40
Indirect Bilirubin	0.38	mg%	0.10 to 0.90
S.G.P.T	34	IU/L	5 - 40
S.G.O.T	31	IU/L	5 - 50
ALP	102	IU/L	40 to 129

Serum Gamma G.T. 26 IU/L 11 - 50

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Date : 23-Mar-2024
Name : **Mr. VIKAS SRIVASTAVA**
Ref.By : APOLLO HEALTH
Age : 43 Yrs.
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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Date : 23-Mar-2024
Name : **Mr. VIKAS SRIVASTAVA**
Ref.By : APOLLO HEALTH
Age : 43 Yrs.
Sex : Male

LIPID PROFILE		
Triglycerids	217	
S. Cholestrol S.	147	mg%
S. HDL Cholestrol	43.6	mg%
S. LDL Cholestrol	60	mg%
VLDL	43.4	mg%
Chol / HDL factor	3.37	mg%
LDL / HDL Factor	1.38	

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. Gestrogen 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	: 23-Mar-2024	Age	: 43 Yrs.
Name	: Mr. VIKAS SRIVASTAVA	Sex	: Male
Ref.By	: APOLLO HEALTH		

PSA Electro CLIA	PSA 0.74	ng/ml
<p>Expected values and Comments</p> <p>NORMAL : 0.00 to 4.0</p> <p>Less than 40 years 0.6 to 1.3</p> <p>41 to 50 Years 0.6 to 2.0</p> <p>51 to 60 Years 0.8 to 3.0</p> <p>61 to 70 Years 1.0 to 4.0</p> <p>Over 70 years 1.6 to 4.5</p>		
<ul style="list-style-type: none"> PSA is a reliable Tumor Marker for already diagnosed Prostatic Carcinomas. Though present in many tissues including breast, salivary glands etc., PSA production is the glandular epithelium of the prostate gland. PSA is, therefore, remarkably specific for the prostate. Baseline levels measured prior to therapeutic intervention and followed later by serial, periodical measurements will predict the outcome of the therapy. It also helps in early discovery of recurrences, relapses and metastases. In general, Tumour Marker levels are directly related to the tumour mass and the stage of the cancer. However, it is the rate of change of the tumour marker level which is more important, rather than its absolute value. A 50 % change may be considered clinically significant. It must be emphasized that PSA may also be elevated in Benign Prostatic Hyperplasia and Inflammatory conditions of the surrounding Genito-Urinary Tract. PSA may be done along with Free PSA that provides additional information 		

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Date	: 23-Mar-2024	Age	: 43 Yrs.
Name	: Mr. VIKAS SRIVASTAVA	Sex	: Male
Ref.By	: APOLLO HEALTH		

	THYROID TEST		
Tri-iodothyronine (T3)	1.90	nmol/L	0.50 to 2.50
Thyroxine (T4)	6.10	mcg/dL	5.0 to 12.5
Thyroid Stimulating Hormone (TSH)	4.16	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 : 23-Mar-2024

Name : **Mr. VIKAS SRIVASTAVA**

Ref.By : APOLLO HEALTH

Age : 43 Yrs.

Sex : Male

Glycosylated Haemoglobin

Glycosylated Haemoglobin

6.7

%

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



TEST REQUEST ID :012403230041	SAMPLE DATE	:23/Mar/2024 09:50AM
NAME :Mr. VIKAS SRIVASTAVA	SAMPLE REC. DATE	:23/Mar/2024 09:50AM
AGE/SEX :43 YRS/MALE	REPORTED DATE	:23/Mar/2024 12:39PM
REFERRED BY : Apollo Health and Lifestyle Limited,	BARCODE NO	:01230041

USG WHOLE ABDOMEN-MALE

Liver: is enlarged in size (166 mm). Parenchymal echogenicity is increased. No focal echovariant lesion is seen. Intrahepatic biliary radicles are not dilated.

Gall Bladder: is not seen (H/O surgical removal)

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 (105 mm), shape and echotexture. No focal echovariant lesion is seen. Splenic vein is normal.

Both Kidneys: are normal in size (RK- 95 x 47 mm & LK -108 x 44 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 enlarged in size (40 x 36 x 36 mms, wt = 27.3 gms), with normal 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-II FATTY LIVER
- GRADE-I BPH

*** End Of Report ***

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Dr. Smita Rastogi
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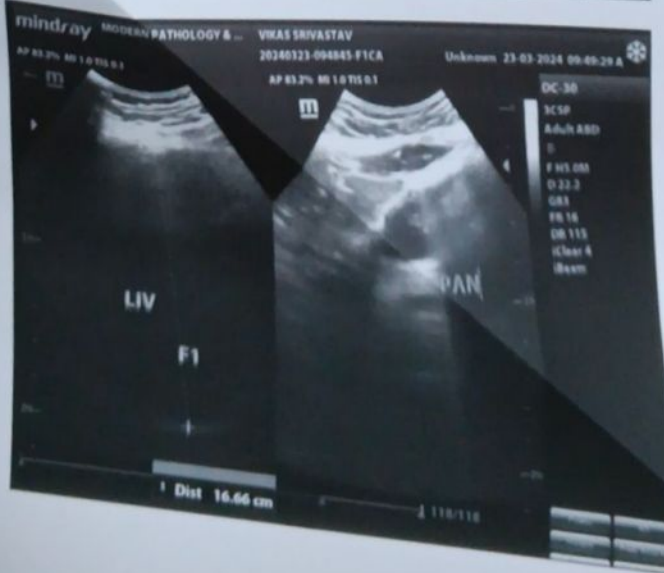
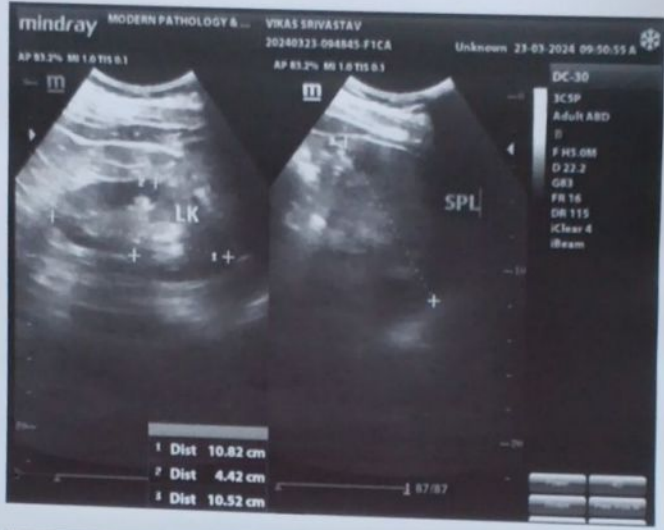
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TEST REQUEST ID :012403230041	SAMPLE DATE	:23/Mar/2024 09:50AM
NAME :Mr. VIKAS SRIVASTAVA	SAMPLE REC. DATE	:23/Mar/2024 09:50AM
AGE/SEX :43 YRS/MALE	REPORTED DATE	:23/Mar/2024 11:35AM
REFERRED BY : Apollo Health and Lifestyle Limited,	BARCODE NO	:01230041

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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D.M.R.D.
Consultant Radiologist

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MODERN PATHOLOGY AND DIAGNOSTIC CENTER

Gomti Nagar Lucknow

Report



VIKAS SRIVASTAVA / 43 Yrs / M / 172 Cms / 83 Kg
 Date: 23 - 03 - 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	078	44 %	120/78	093	00	
Standing	00:07	0:04	00.0	00.0	01.0	078	44 %	120/78	093	00	
HV	00:11	0:04	00.0	00.0	01.0	088	50 %	120/78	105	00	
ExStart	00:17	0:06	00.0	00.0	01.0	088	50 %	120/78	105	00	
BRUCE Stage 1	03:17	3:00	02.7	10.0	04.7	113	64 %	128/84	144	00	
BRUCE Stage 2	06:17	3:00	04.0	12.0	07.1	137	77 %	136/90	186	00	
PeakEx	07:25	1:08	05.5	14.0	08.3	150	85 %	140/94	210	00	
Recovery	08:25	1:00	00.0	00.0	01.2	120	68 %	138/90	165	00	
Recovery	09:25	2:00	00.0	00.0	01.0	109	62 %	134/86	146	00	
Recovery	10:25	3:00	00.0	00.0	01.0	103	58 %	130/82	133	00	
Recovery	10:36	3:11	00.0	00.0	01.0	100	56 %	124/80	124	00	

FINDINGS :

Exercise Time : 07:08
 Max HR Attained : 150 bpm 85% of Target 177
 Max BP Attained : 140/94 (mm/Hg)
 Max WorkLoad Attained : 8.3 Fair response to induced stress
 Test End Reasons : Test Complete

REPORT :

CONCLUSIONS:

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

Dr. AMIT MOHAN
 MID
 Reg. No. 44559



BRUCE:Supine(0:05)

MODERN PATHOLOGY AND DIAGNOSTIC CENTER

VIKAS SRIVASTAVA / 43 Yrs / M / 172 Cms / 83 Kg / HR : 78

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

METS. 1.0/78 bpm 44% of THR BP 120/78 mmHg Combined Medians/BLC On/ Natch On/HF 0.05 Hz/LF 35 Hz



REMARKS:

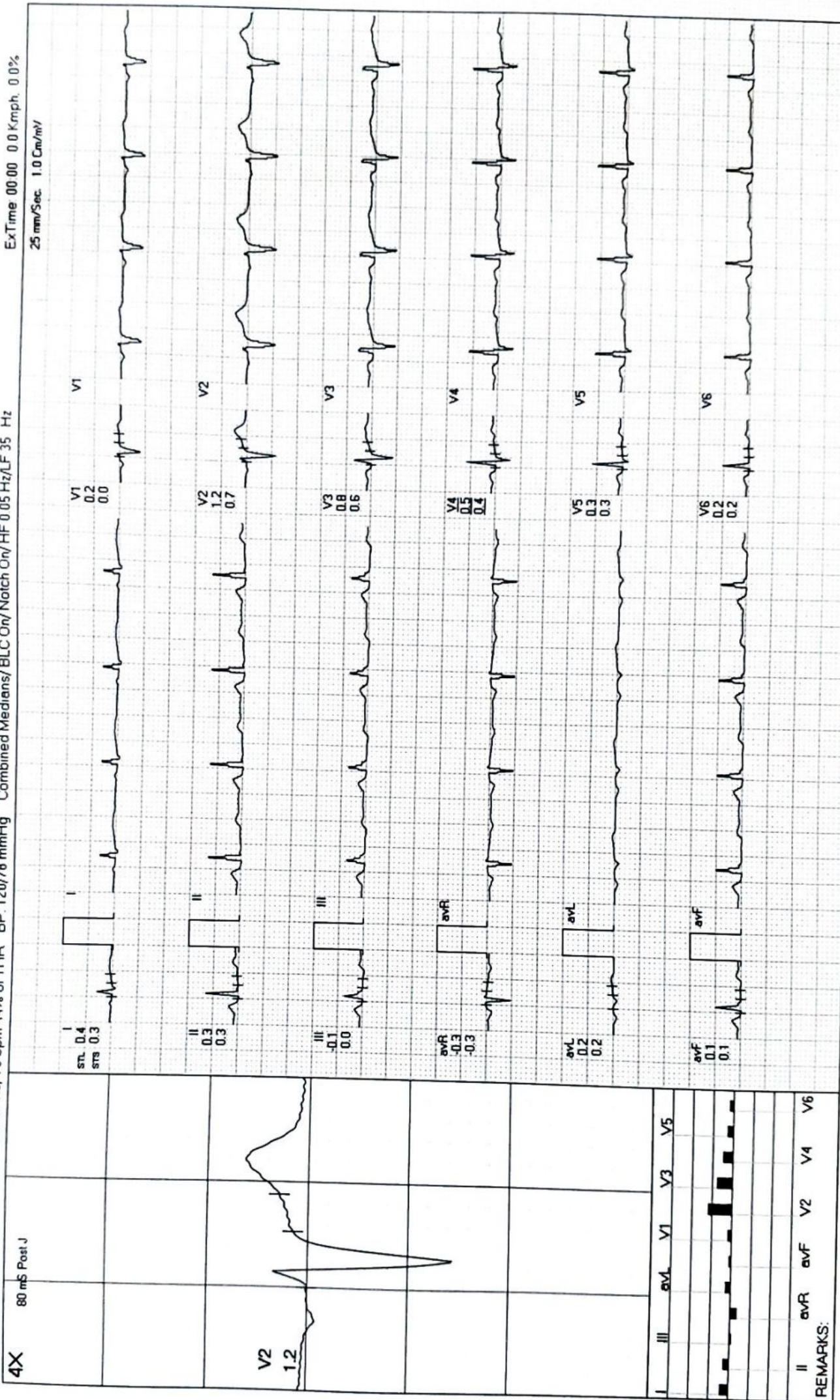
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VIKAS SRINIVASTAVA / 43 Yrs / M / 172 Cms / 83 Kg / HR : 78

BRUCE: Standing(0:04)



Date: 23-03-2024
 METS 1 0/78 bpm 44% of THR BP: 120/78 mmHg Combined Medians/BLC On/ Natch On/ HF 0.05 Hz/LF 35 Hz
 ExTime 00:00 0.0 Kmph 0.0%
 25 mm/Sec. 1.0 Cm/mV

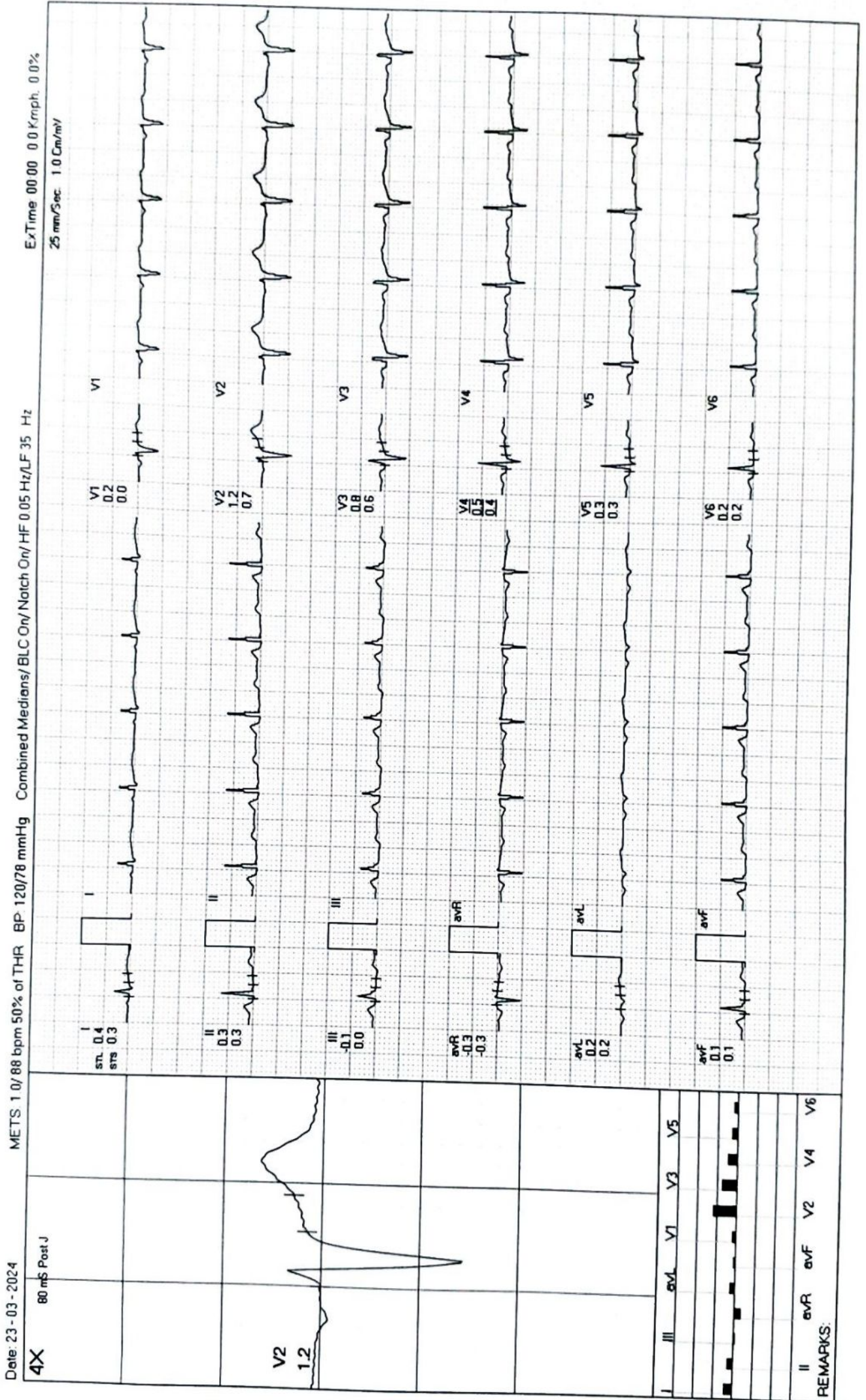


REMARKS:

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VIKAS SRIVASTAVA / 43 Yrs / M / 172 Cms / 83 Kg / HR : 88

BRUCE:HV(0:06)



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VIKAS SRINIVASTAVA / 43 Yrs / M / 172 Cms / 83 Kg / HR : 88

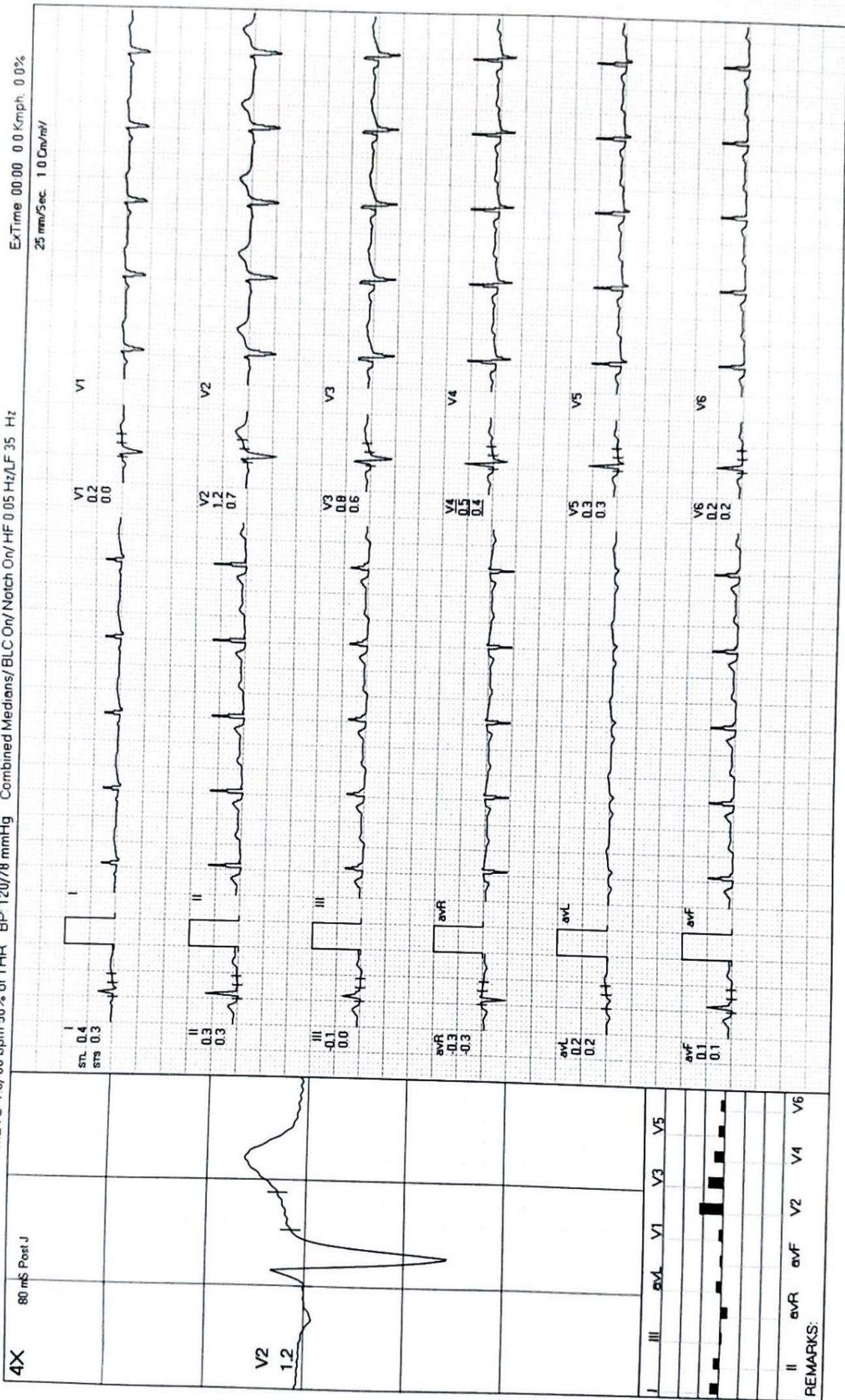
ExStart



Date 23-03-2024

METS 1.0/88 bpm 50% of THR BP- 120/78 mmHg Combined Medians/BLC On/ HF 0.05 Hz/LF 35 Hz

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



REMARKS:
II aVR aVL V1 V2 V3 V4 V5 V6

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VIKAS SRIVASTAVA / 43 Yrs / M / 172 Cms / 83 Kg / HR : 113

BRUCE: Stage 1(3:00)

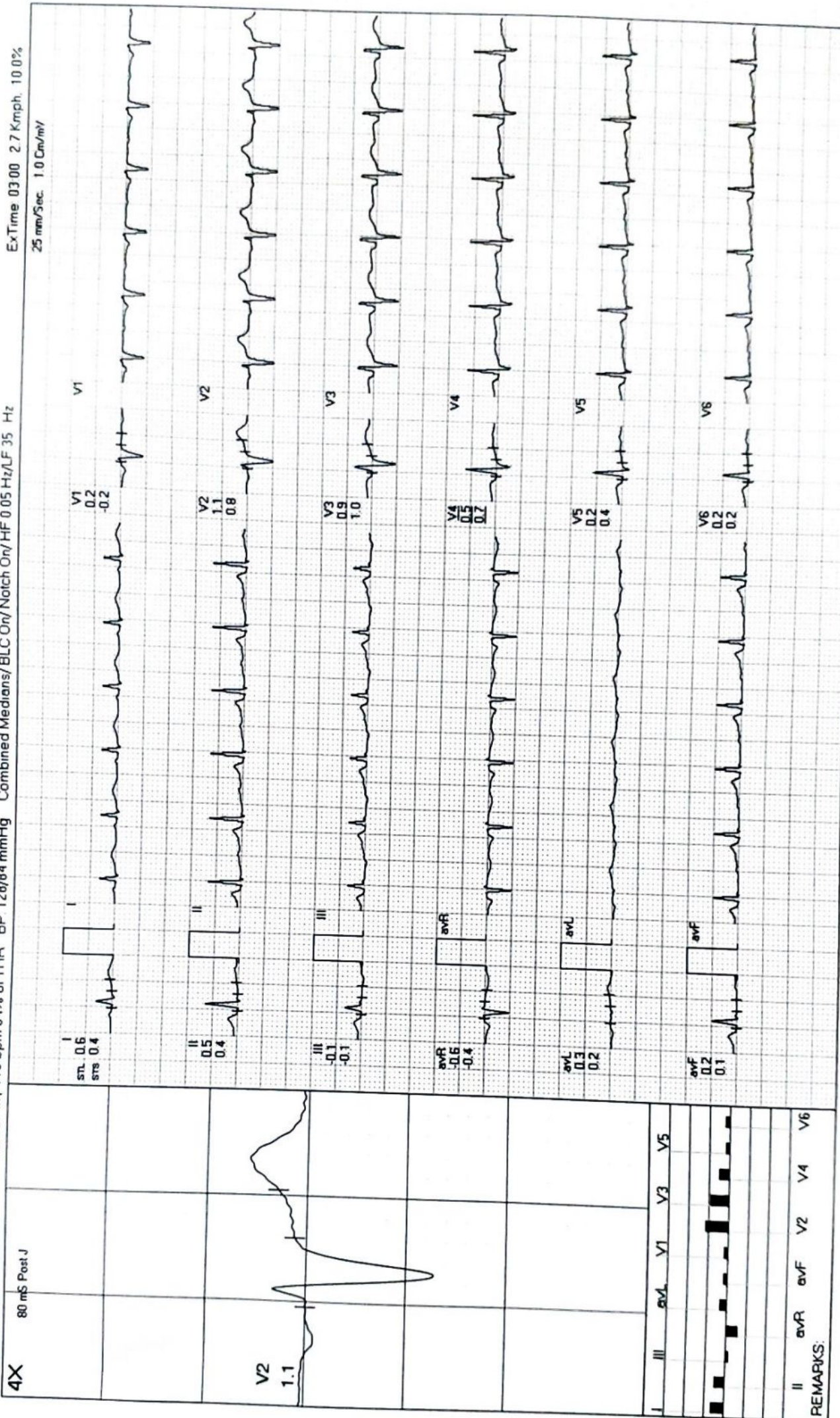


Date 23-03-2024

METS 4.7/113 bpm 64% of THR BP 128/84 mmHg Combined Medians/BLC On/ Notch On/HF 0.05 Hz/LF 35 Hz

ExTime 03:00 2.7 Kmph. 10.0%

25 mm/Sec. 1.0 Cm/mV



REMARKS:

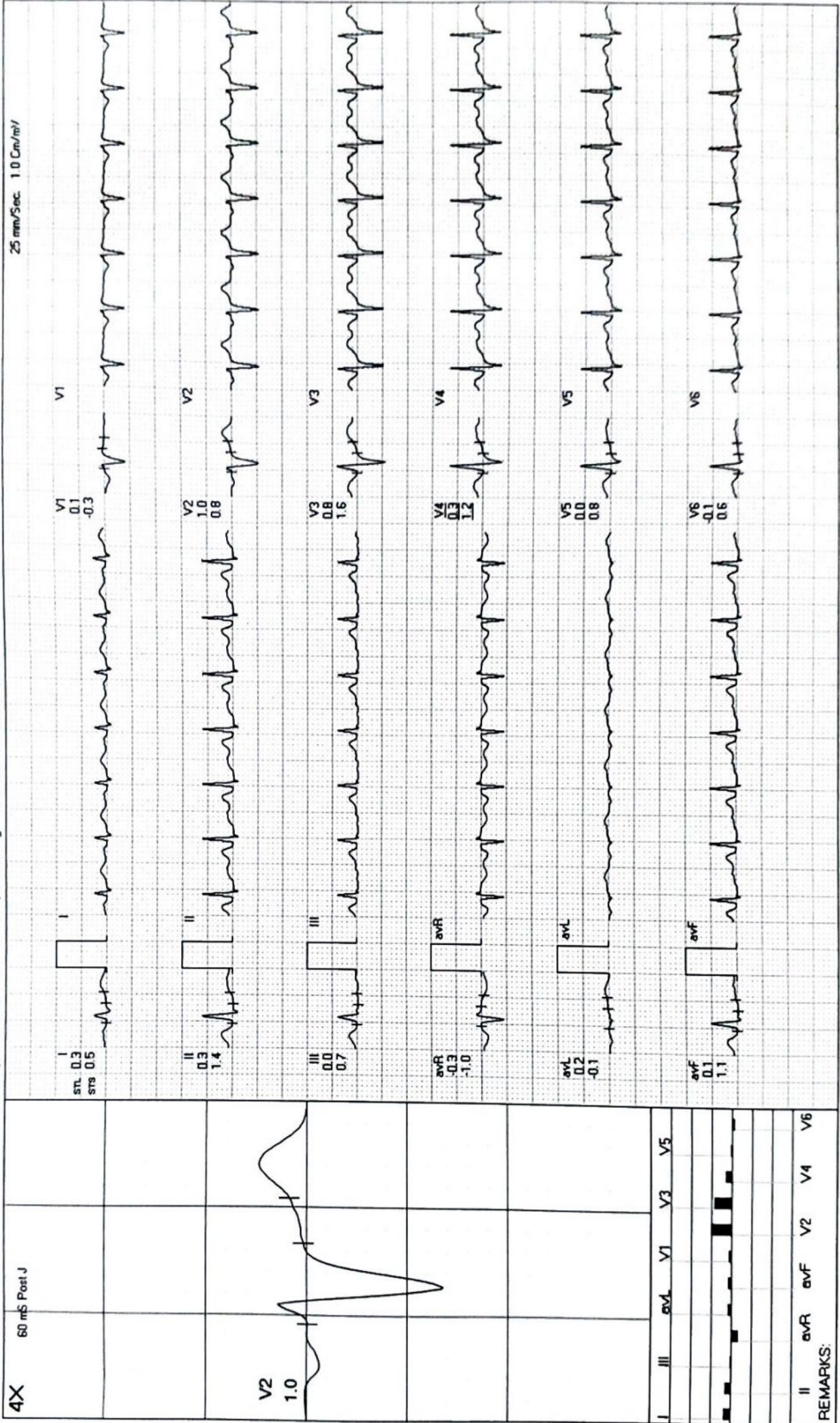
MODERN PATHOLOGY AND DIAGNOSTIC CENTER

VIKAS SRINIVASTAVA / 43 Yrs / M / 172 Cms / 83 Kg / HR : 137

BRUCE: Stage 2(3:00)



Date: 23-03-2024 METS: 7.1/137 bpm 77% of THR BP: 136/90 mmHg Combined Medians/BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz ExTime: 06:00 4.0 Kmph 12.0%



REMARKS:

MODERN PATHOLOGY AND DIAGNOSTIC CENTER

VIKAS SRIVASTAVA / 43 Yrs / M / 172 Cms / 83 Kg / HR : 150

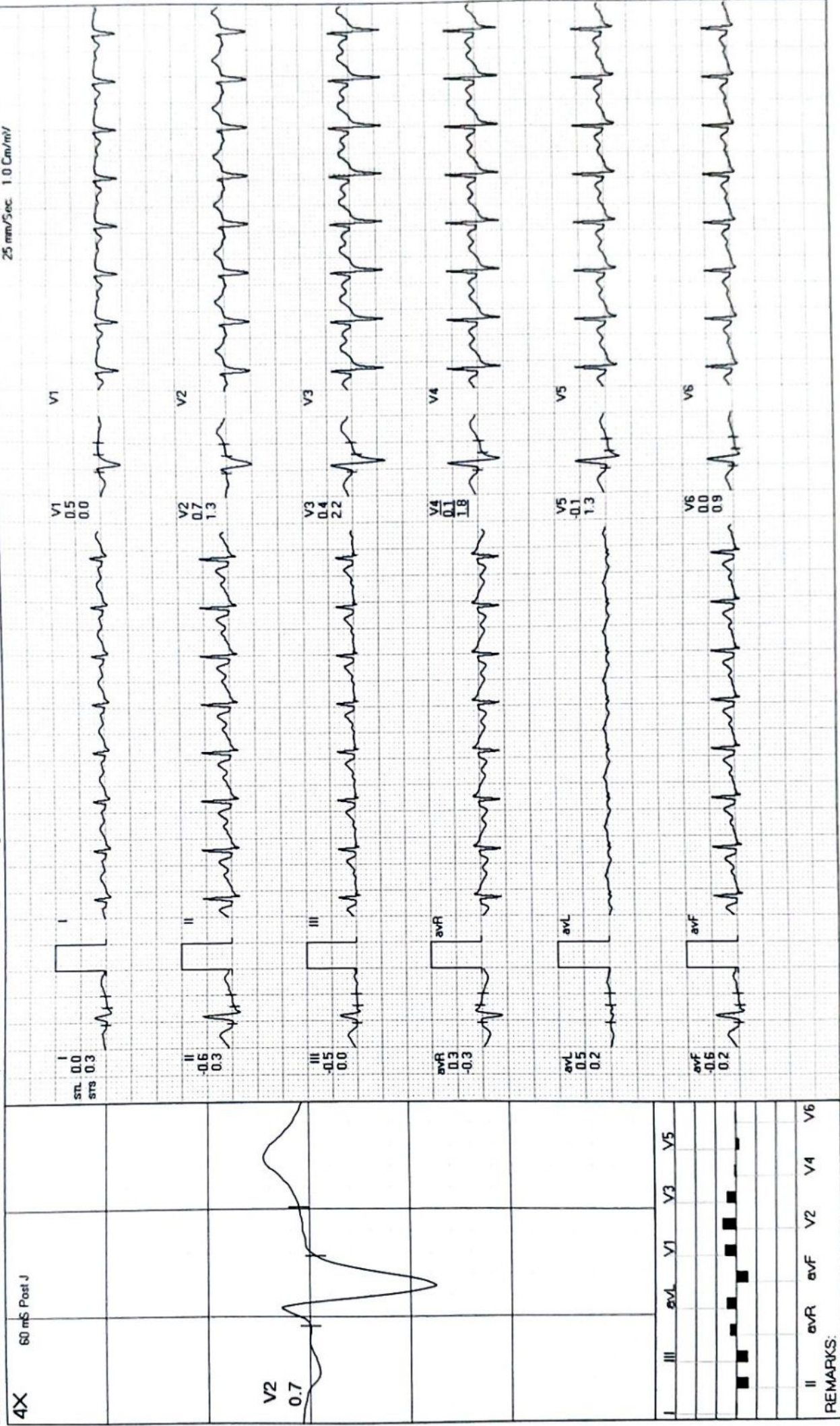
PeakEx



ExTime 07:08 5.5 Km/h. 14.0%

METS 8.3/150 bpm 85% of THR BP: 140/94 mmHg Combined Mediens/BLC On/Notch On/HF 0.05 Hz/LF 35 Hz

25 mm/Sec 1.0 Cm/mV



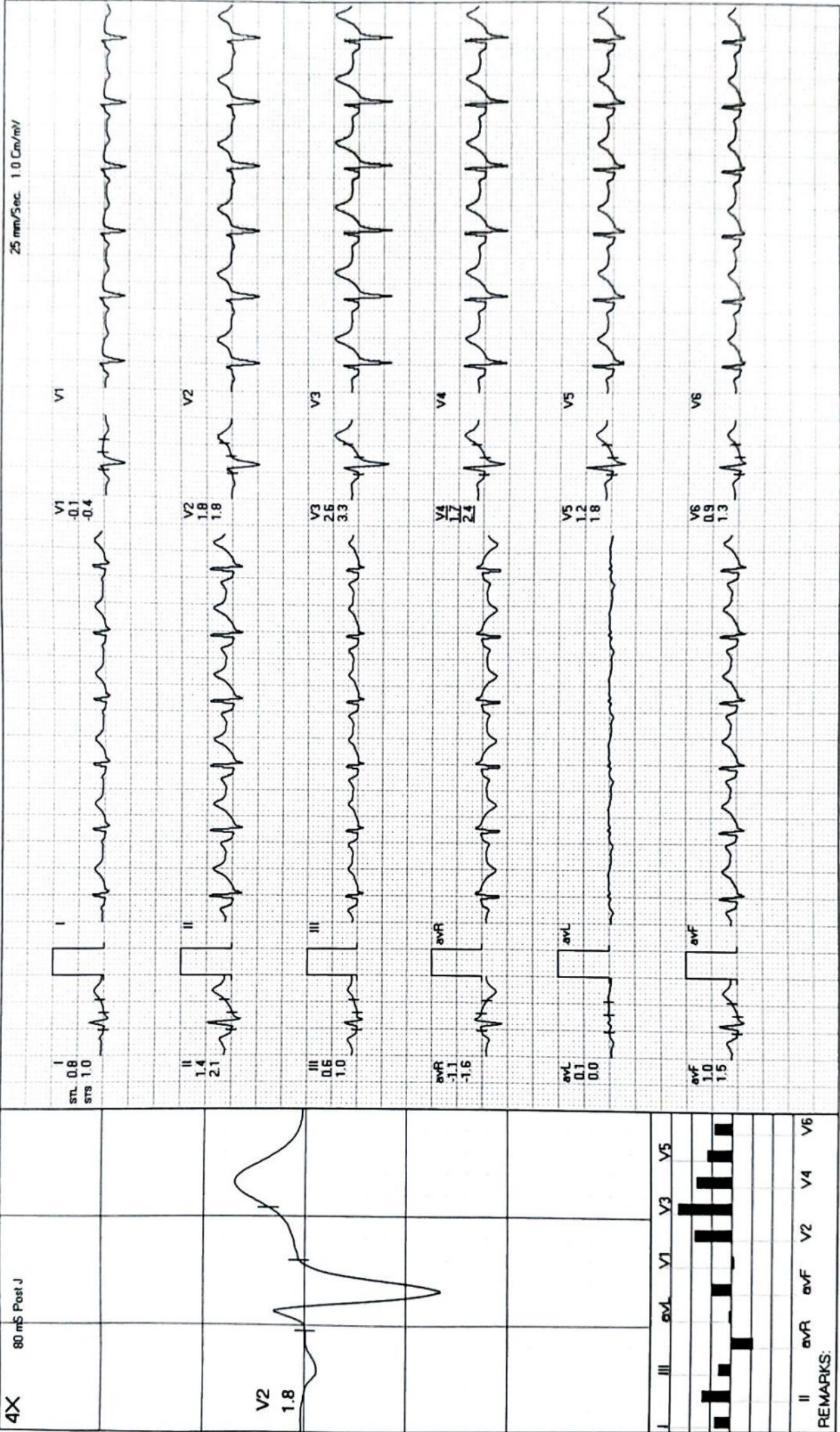
MODERN PATHOLOGY AND DIAGNOSTIC CENTER

VIKAS SRINAVASTAVA / 43 Yrs / M / 172 Cms / 83 Kg / HR : 120

Recovery(1:00)



Date: 23 - 03 - 2024 METS 1 2/120 bpm 68% of THR BP: 138/90 mmHg Combined Medians/ BLC On/ HF 0.05 Hz/LF 35 Hz ExTime 07:08 0.0 Kmph, 0.0%



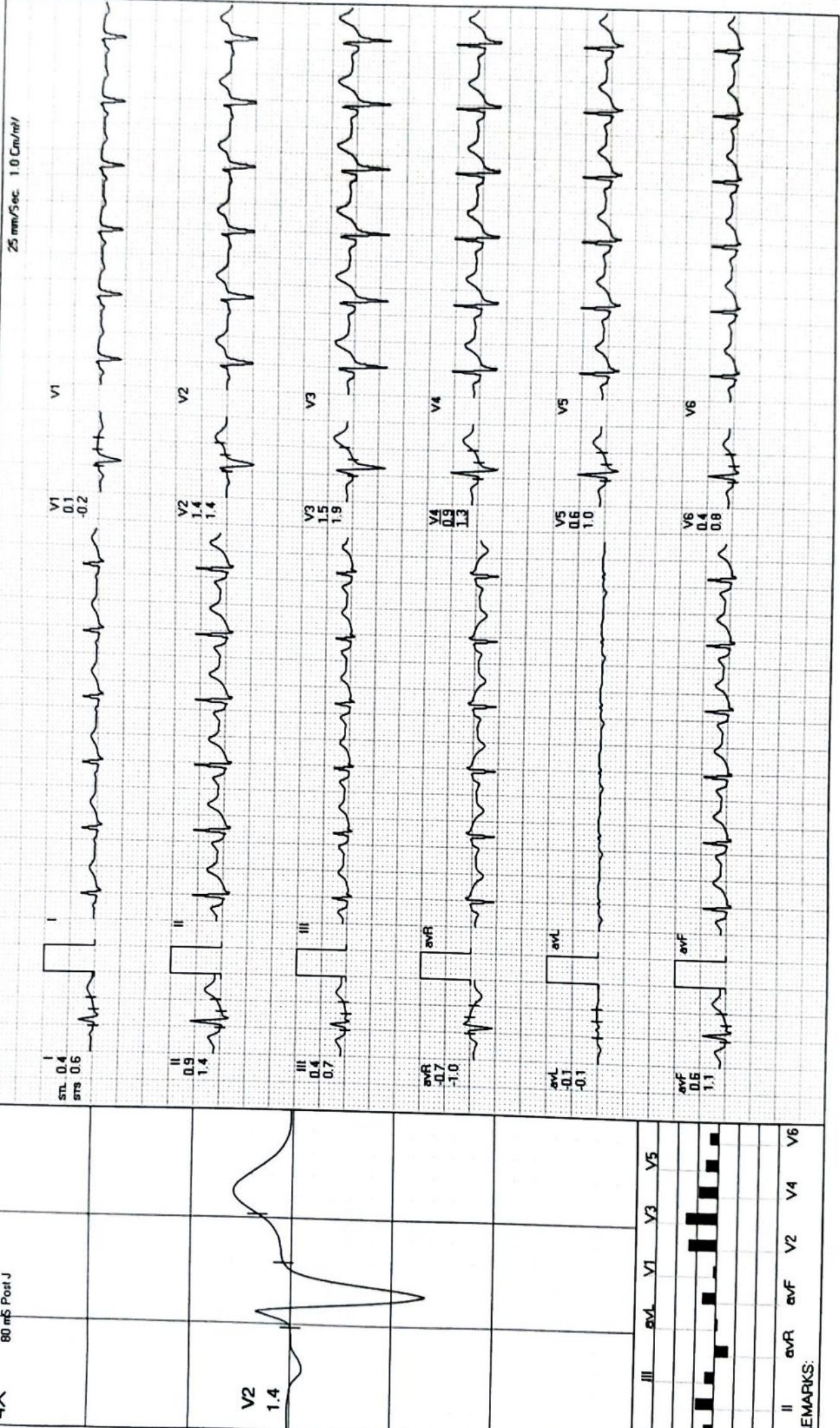
MODERN PATHOLOGY AND DIAGNOSTIC CENTER

VIKAS SRIVASTAVA / 43 Yrs / M / 172 Cms / 83 Kg / HR : 109

Recovery(2:00)



Date: 23-03-2024 METS: 1.0 / 109 bpm 62% of THR BP: 134/86 mmHg Combined Medians/BLC On/Match On/HF 0.05 Hz/LF 35 Hz ExTime: 07:08 0.0 Kmph, 0.0%



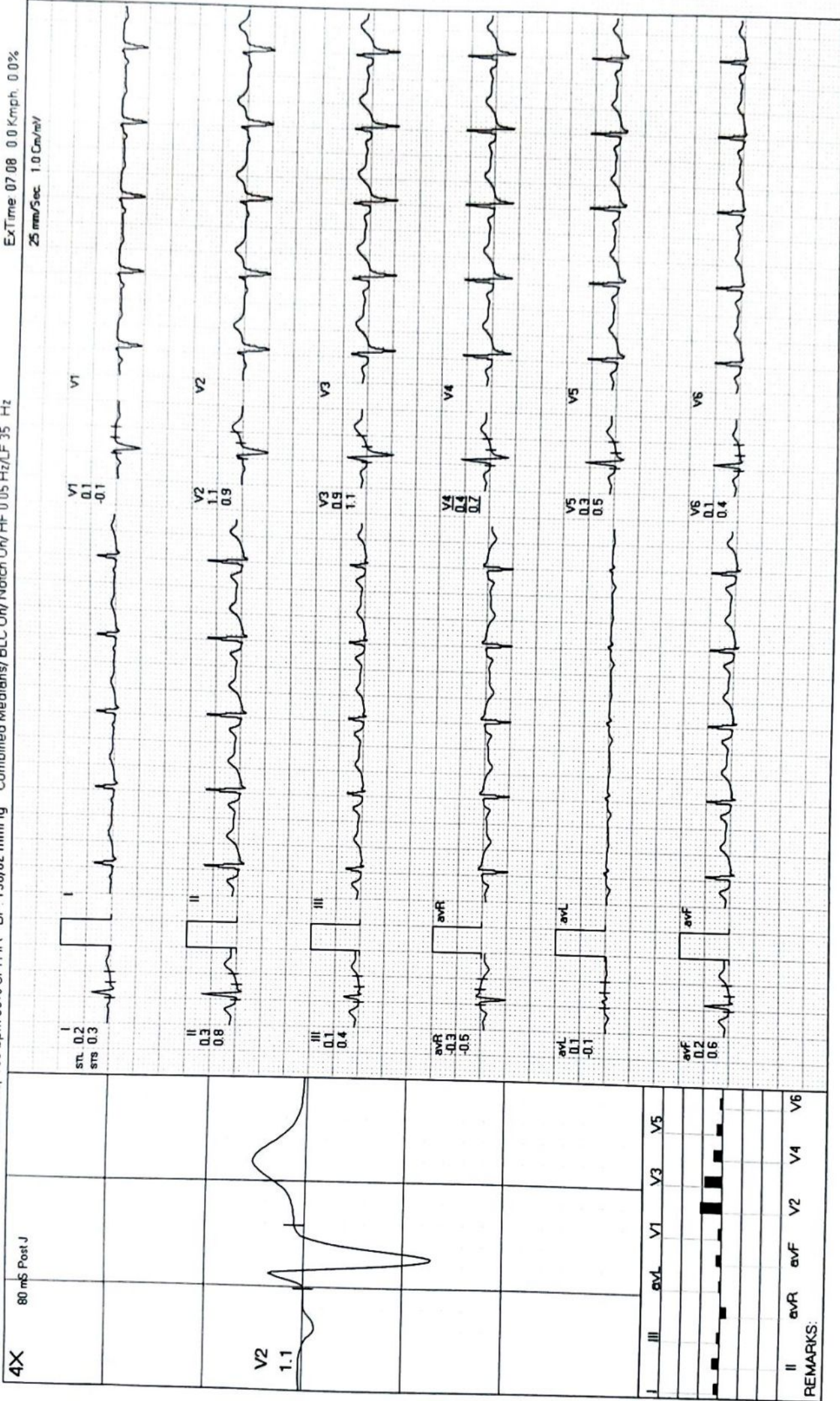
MODERN PATHOLOGY AND DIAGNOSTIC CENTER

VIKAS SRIVASTAVA / 43 Yrs / M / 172 Cms / 83 Kg / HR : 103

Recovery(3:00)



Date: 23-03-2024 METS 1.0 / 103 bpm 58% of THR BP: 130/82 mmHg Combined Medians/BLC On/ HF 0.05 Hz/LF 35 Hz ExTime: 07:08 0.0 Kmph, 0.0%



REMARKS:

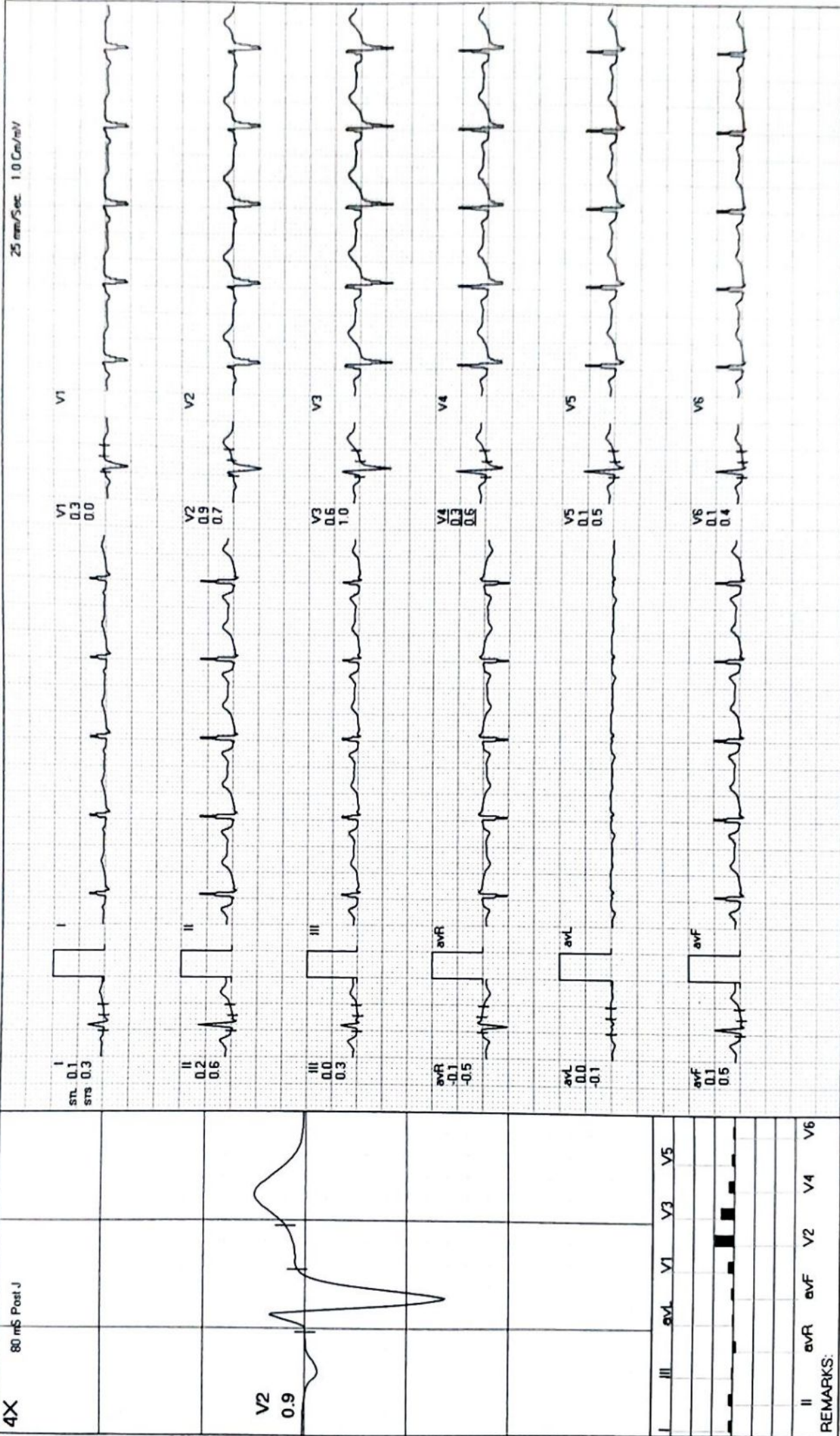
MODERN PATHOLOGY AND DIAGNOSTIC CENTER

VIKAS SRIVASTAVA / 43 Yrs / M / 172 Cms / 83 Kg / HR : 100

Recovery(3:11)



Date: 23 - 03 - 2024 METS: 1.0/ 100 bpm 56% of THR BP: 124/80 mmHg Combined Medians/BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz ExTime 07:08 0.0 Kmph 0.0%





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

Patient name: Mr Vikas Srivastava
Ref By. Apollo Health

Age/Sex 43/M
23/03/2024

E.C.G. REPORT

1. Rhythm	:	Sinus, Regular
2. Atrial Rate	:	68/mt
3. Ventricular Rate	:	68/mt
4. P – Wave	:	Normal
5. P R Interval	:	Normal
6. Q R S	:	
Axis	:	Normal
R/S Ratio	:	Normal
Configuration	:	Normal
7. Q T c Interval	:	Normal
8. S-T Segment	:	Normal
9. T-Wave	:	Normal

FINAL IMPRESSION

E.C.G. is within normal limits.

Signature of Doctor
DRAMIT MOHAN MD
Reg. No. 44559

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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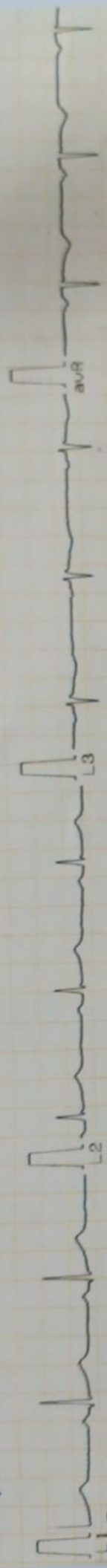
Name Vikash Kumar

Age ___ Yrs M/F

10mm/mV

25mm/s

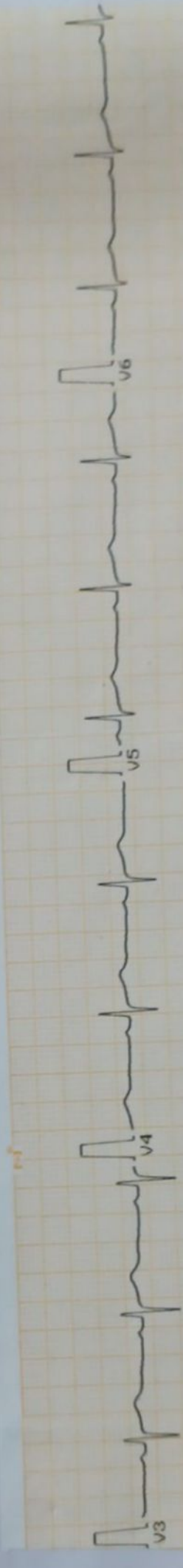
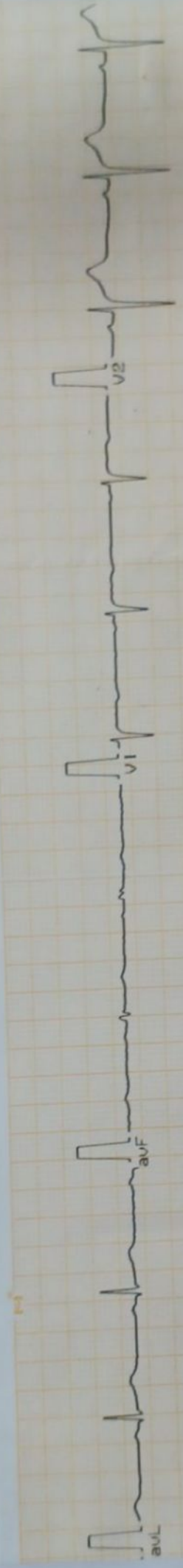
0.1-35 Hz BLC



[Signature]

LaculiuMed_ECG50-1CH

Dr.:

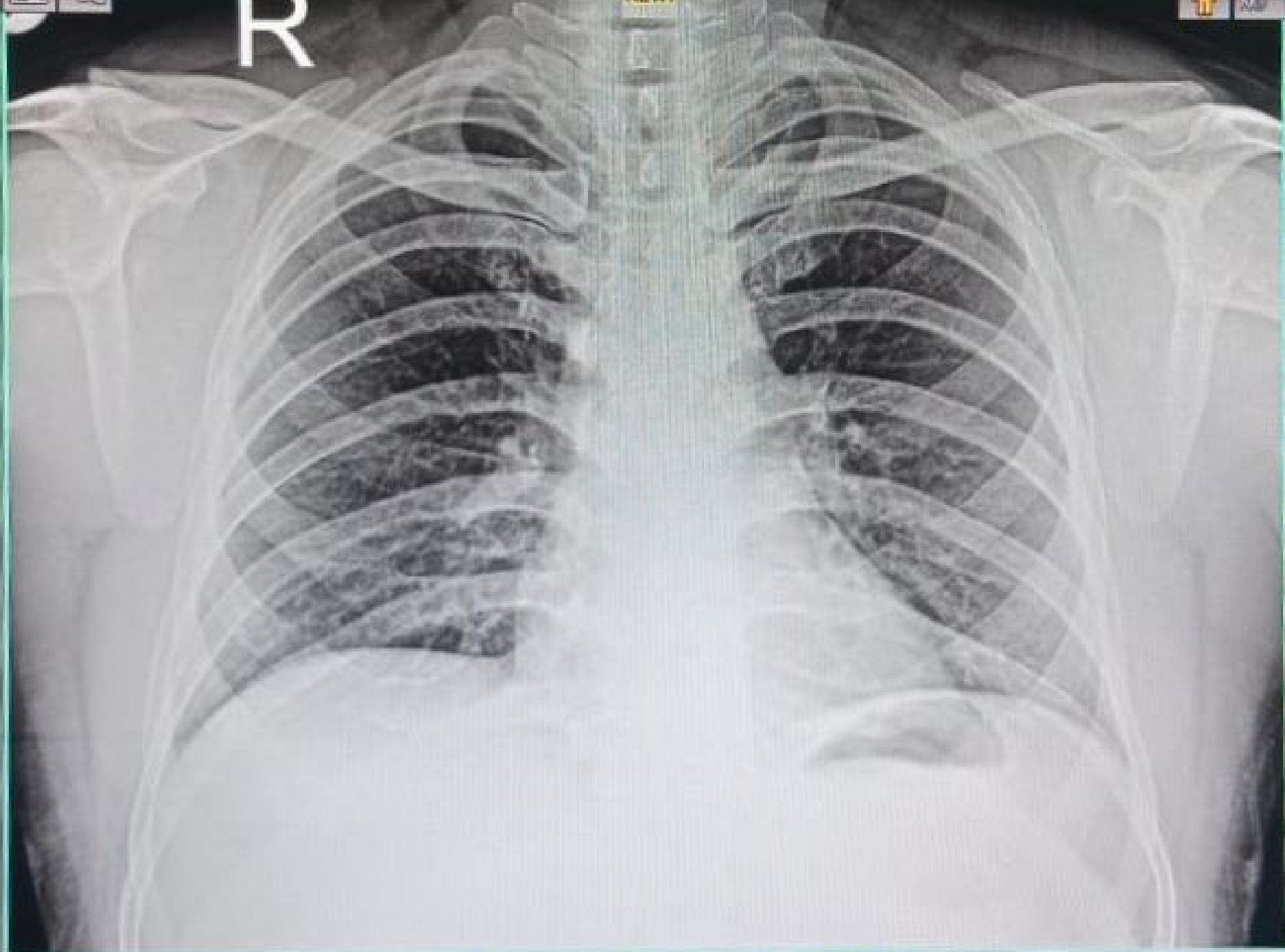


Dr. AMIT MOHAN
MD
Reg. No. 44359



R

NEW!



24032303918 MR VIKASH SRIVASTAVA 00 YRS M DR SELF CHEST PA
03/23/2024 MODERN PATHOLOGY & DIAGNOSTIC CENTRE GOMTI NAGAR LUCKNOW