

MER- MEDICAL EXAMINATION REPORT

Date of Examination	9/3/24		
NAME	RAJAN KR. JAINWAR		
AGE	39	Gender	M
HEIGHT(cm)	161	WEIGHT (kg)	74 Bmf. 28.2
B.P.	120/70		
ECG	normal		
X Ray	normal		
Vision Checkup	-		
Present Ailments	No		
Details of Past ailments (If Any)	No		
Comments / Advice : She /He is Physically Fit	medicinesy fit		



Dr. Shilpa Rastogi  
MBBS, DCP  
REG. NO. 37370

*[Handwritten Signature]*

Signature with Stamp of Medical Examiner

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, appearing to read 'Rajni'.



*Raja*





# MODERN PATHOLOGY & DIAGNOSTIC CENTRE

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

Date	: 09-Mar-2024		
Name	: Mr. RAJAN KUMAR JAISWAR	Age	: 39 Yrs.
Ref.By	: APOLLO HEALTH	Sex	: Male

Haemoglobin	13.3	gm%	14 - 17
Total Leucocyte Count	7600	Cells/cumm.	4000-11000
<b>Differential Leucocyte Count</b>			
Polymorphs	49	%	45 - 70
Lymphocytes	39	%	20 - 45
Eosinophils	05	%	0 - 6
Monocytes	07	%	0 - 8
Basophils	00	%	0 - 1
<b>Erythrocyte Sedimentation Rate (Wintrobe)</b>			
ESR	06	mm in 1st Hr.	0 - 9
PCV	40.4	cc%	40 - 52
Corrected ESR	02	mm in 1st Hr.	0 - 9
Platelet Count	1.10	lakh/cumm.	1.5 - 4.0
Red Cells Count	4.57	million/cmm	3.90 to 5.80
<b>Absolute values</b>			
MCV	92.4	fL	77 - 97
MCH	29.0	pg	27 - 31
MCHC	31.4	gm /dl	31 - 34

Page 1 of 1 (End of Report)  
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**Dr. Smija 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 : 09-Mar-2024

Name : **Mr. RAJAN KUMAR JAISWAR**

Ref.By : APOLLO HEALTH

Age : 39 Yrs.

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 reduced in number and morphology.

**OTHERS** No haemoparasites are seen.

**IMPRESSION** THROMBOCYTOPENIA

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Name	: <b>Mr. RAJAN KUMAR JAISWAR</b>		Age	: 39 Yrs.
Ref.By	: APOLLO HEALTH		Sex	: Male
Plasma Glucose - F GOD-POD Method	101	mg/dl	70 - 110	
Plasma Glucose - PP GOD POD Method	113	mg/dl	110 - 170	
Blood Group & Rh	"B" Positive			
<b>LFT T&amp;D</b>				
Total Bilirubin	0.75	mg%	0.2 - 1.0	
Direct Bilirubin	0.31	mg%	0.0 to 0.40	
Indirect Bilirubin	0.44	mg%	0.10 to 0.90	
S.G.P.T	71	IU/L	5 - 40	
S.G.O.T	56	IU/L	5 - 50	
ALP	100	IU/L	40 to 129	
Serum Gamma G.T.	21	IU/L	11 - 50	
<b>KFT</b>				
UREA	24.0	mg %	15 - 50	
CREATININE	1.41	mg %	0.5 - 1.5	
URIC ACID	5.8	mg %	2 - 7	
CALCIUM	9.6	mg %	8.8 - 10.0	
Urine Sugar (Fasting)	NIL			
Urine Sugar (PP)	NIL			

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Date : 09-Mar-2024  
Name : **Mr. RAJAN KUMAR JAISWAR**  
Ref.By : APOLLO HEALTH  
Age : 39 Yrs.  
Sex : Male

### LIPID PROFILE

Triglycerids	233	mg%	70 - 190
S. Cholestrol S.	440	mg%	130 - 230
S. HDL Cholestrol	46.4	mg%	35 - 75
S. LDL Cholestrol	347	mg%	75 - 150
VLDL	46.6	mg%	0 - 34
Chol / HDL factor	9.48		
LDL / HDL Factor	7.48		

### 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

Page 2. **Dr. Sanjay Rastogi**  
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Date : 09-Mar-2024  
Name : **Mr. RAJAN KUMAR JAISWAR**  
Ref. By : APOLLO HEALTH  
Age : 39 Yrs.  
Sex : Male

## THYROID TEST

Tri-iodothyronine (T3)	1.90	nmol/L	0.50 to 2.50
Thyroxine (T4)	7.40	mcg/dL	5.0 to 12.5
Thyroid Stimulating Hormone (TSH)	3.48	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 maybe 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	: 09-Mar-2024	Age	: 39 Yrs.
Name	: <b>Mr. RAJAN KUMAR JAISWAR</b>	Sex	: Male
Ref.By	: APOLLO HEALTH		

Glycosylated Haemoglobin	5.9	%	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	: 09-Mar-2024		
Name	: Mr. RAJAN KUMAR JAISWAR	Age	: 39 Yrs.
Ref.By	: APOLLO HEALTH	Sex	: Male

## Urine Examination

<b>PHYSICAL</b>			
Colour	Straw		
Turbidity	Nil		
Deposit	Nil		
Reaction	Acidic		
*Specific Gravity	1.015		
<b>CHEMICAL</b>			
Protein	Nil		
Sugar	Nil		
*Bile Salts	Nil		
*Bile Pigments	Nil		
Phosphate	Nil		
<b>MICROSCOPIC</b>			
Pus Cells	Nil	/hpf	
Epithelial Cells	0-1	/hpf	
Red Blood Cells	Nil	/hpf	
Casts	Nil		
Crystals	Nil		
Others	Nil		

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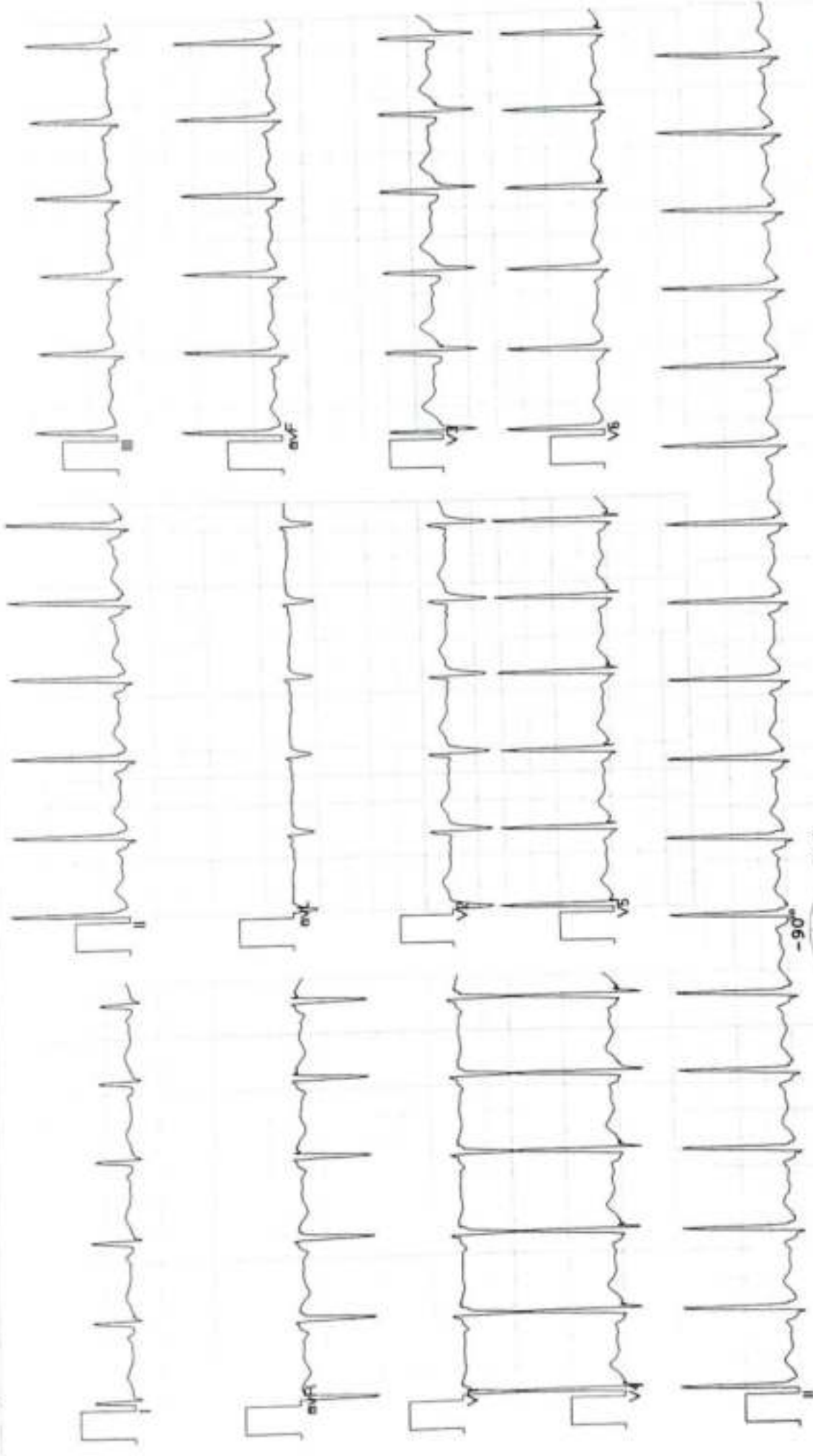
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ECG

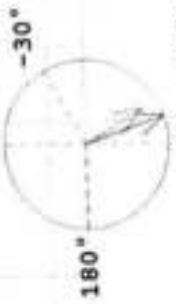


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139 / RAJAN KUMAR JAISWAR / 39 Yrs / M / 161Cms. / 74Kgs. / Non Smoker  
Heart Rate : 106 bpm / Tested On : 09-Mar-24 13:15:18 / HF 0.05 Hz - LF 100 Hz / Notch 50 Hz / Sn 1.00 Cm/mV / Sw 25 mm/s  
/ Refd By : APOLLO HEALTH



Vent Rate : 106 bpm  
PR Interval : 98 ms  
QRS Duration: 82 ms  
QT/QTc Int : 302/383 ms  
P-QRS-T axis: 64.00° 71.00° 59.00°  
Allergers ECG (Pisces)(PIS215191030)



Normal ECG  
Dr. MIT MISHAN MD  
Reg. No. 44559



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TEST REQUEST ID :012403090021	SAMPLE DATE	:09/Mar/2024 09:20AM
NAME :Mr. RAJAN KUMAR JAISAR	SAMPLE REC. DATE	:09/Mar/2024 09:20AM
AGE/SEX :39 YRS/MALE	REPORTED DATE	:09/Mar/2024 12:01PM
REFERRED BY : Apollo Health and Lifestyle Limited,	BARCODE NO	:01090021

## USG WHOLE ABDOMEN-MALE

**Liver:** is enlarged in size (165 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 (104 mm), shape and echotexture. No focal echovariant lesion is seen. Splenic vein is normal.

**Both Kidneys:** are normal in size (RK- 91 x 39 mm & LK – 104 x 42 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 borderline enlarged in size (38 x 34 x 33 mms, wt = 22.9 gms), with normal shape and echotexture. No focal echovariant lesion is seen. Prostatic capsule

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Print Date/Time: 09/03/2024 3:03 PM

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Checked By: Ashish Singh

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AGE/SEX :39 YRS/MALE	REPORTED DATE	:09/Mar/2024 12:01PM
REFERRED BY : Apollo Health and Lifestyle Limited,	BARCODE NO	:01090021

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
- BORDERLINE GRADE-I BPH

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

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NAME	:Mr. RAJAN KUMAR JAISAR	SAMPLE REC. DATE	:09/Mar/2024 09:20AM
AGE/SEX	:39 YRS/MALE	REPORTED DATE	:09/Mar/2024 03:02PM
REFERRED BY	: Apollo Health and Lifestyle Limited,	BARCODE NO	:01090021

## 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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Gomti Nagar Lucknow

Report



**RAJAN KUMAR JAISWAR / 39 Yrs / M / 161 Cms / 74 Kg**

**Date: 09 - 03 - 2024      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	108	60 %	120/70	129	00	
Standing	00:09	0:04	00.0	00.0	01.0	108	60 %	120/70	129	00	
HV	00:13	0:04	00.0	00.0	01.0	108	60 %	120/70	129	00	
ExStart	00:31	0:18	00.0	00.0	01.0	108	60 %	120/70	129	00	
BRUCE Stage 1	03:31	3:00	02.7	10.0	04.7	158	87 %	136/84	214	00	
PeakEx	05:28	1:57	04.0	12.0	06.3	174	96 %	142/90	247	00	
Recovery	06:28	1:00	00.0	00.0	01.0	144	80 %	140/86	201	00	
Recovery	07:28	2:00	00.0	00.0	01.0	125	69 %	136/82	170	00	
Recovery	08:28	3:00	00.0	00.0	01.0	115	64 %	130/80	149	00	
Recovery	08:35	3:07	00.0	00.0	01.0	114	63 %	124/80	141	00	

**FINDINGS :**

**Exercise Time** : 04:57  
**Max HR Attained** : 174 bpm 96% of Target 181  
**Max BP Attained** : 142/90 (mm/Hg)  
**Max WorkLoad Attained** : 6.3 Fair response to induced stress  
**Test End Reasons** : Test Complete, Fatigue

**REPORT :**

**CONCLUSIONS:**

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



**DR. ANANTHAN**  
MD

Reg. No. 44559



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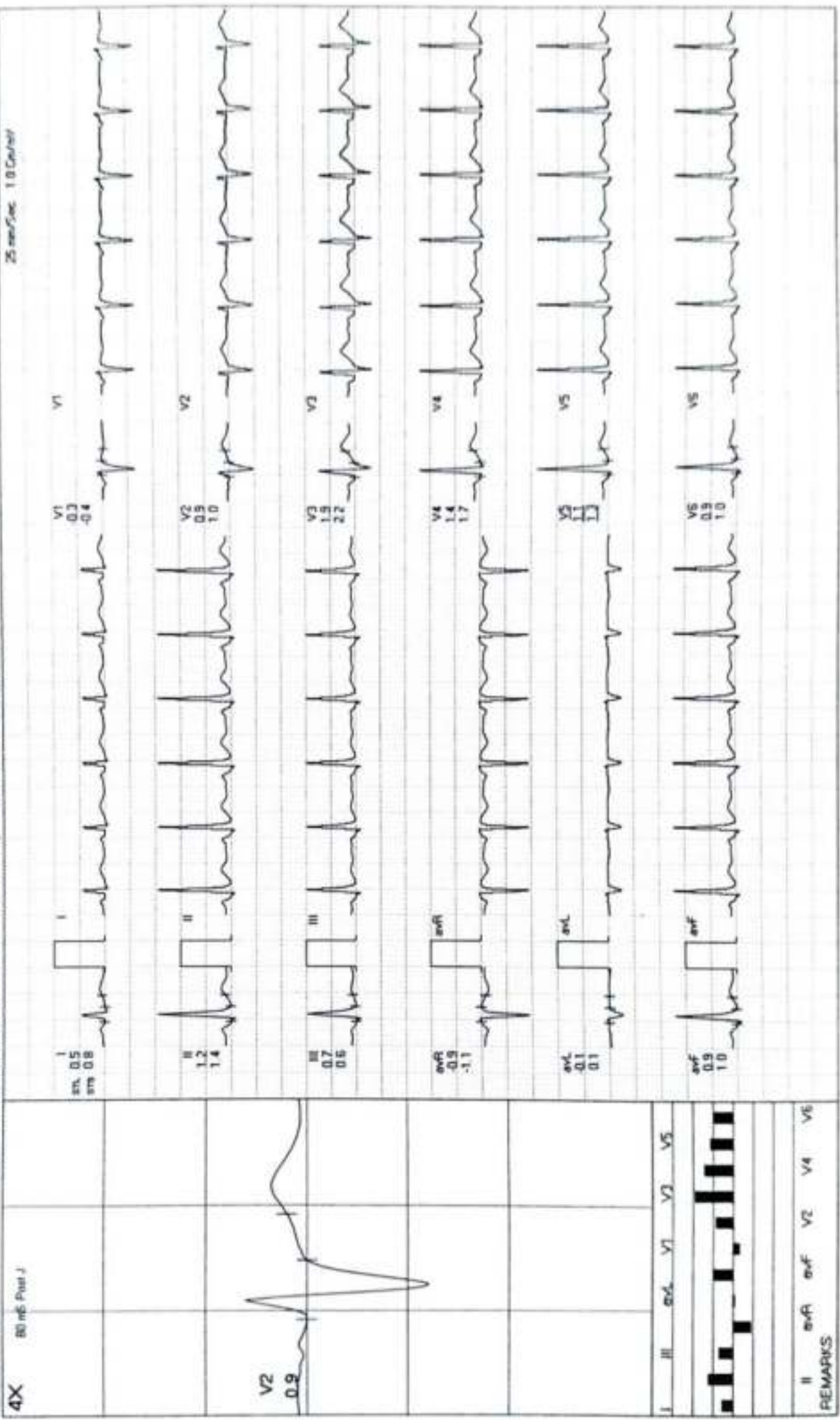
**RAJAN KUMAR JAISWAR / 39 Yrs / M / 161 Cms / 74 Kg / HR : 108**

**BRUCE:Supine(0:05)**



ExTime 05:00 0.0 KmPh 0.0%  
25 mm/Sec 1.0 Cal/cm

Date 09-03-2024 METS 1.0/108 bpm 60% of THR BP 120/70 mmHg Combined Medians/BLC On/Notch On/HF 0.05 Hz/LF 35 Hz



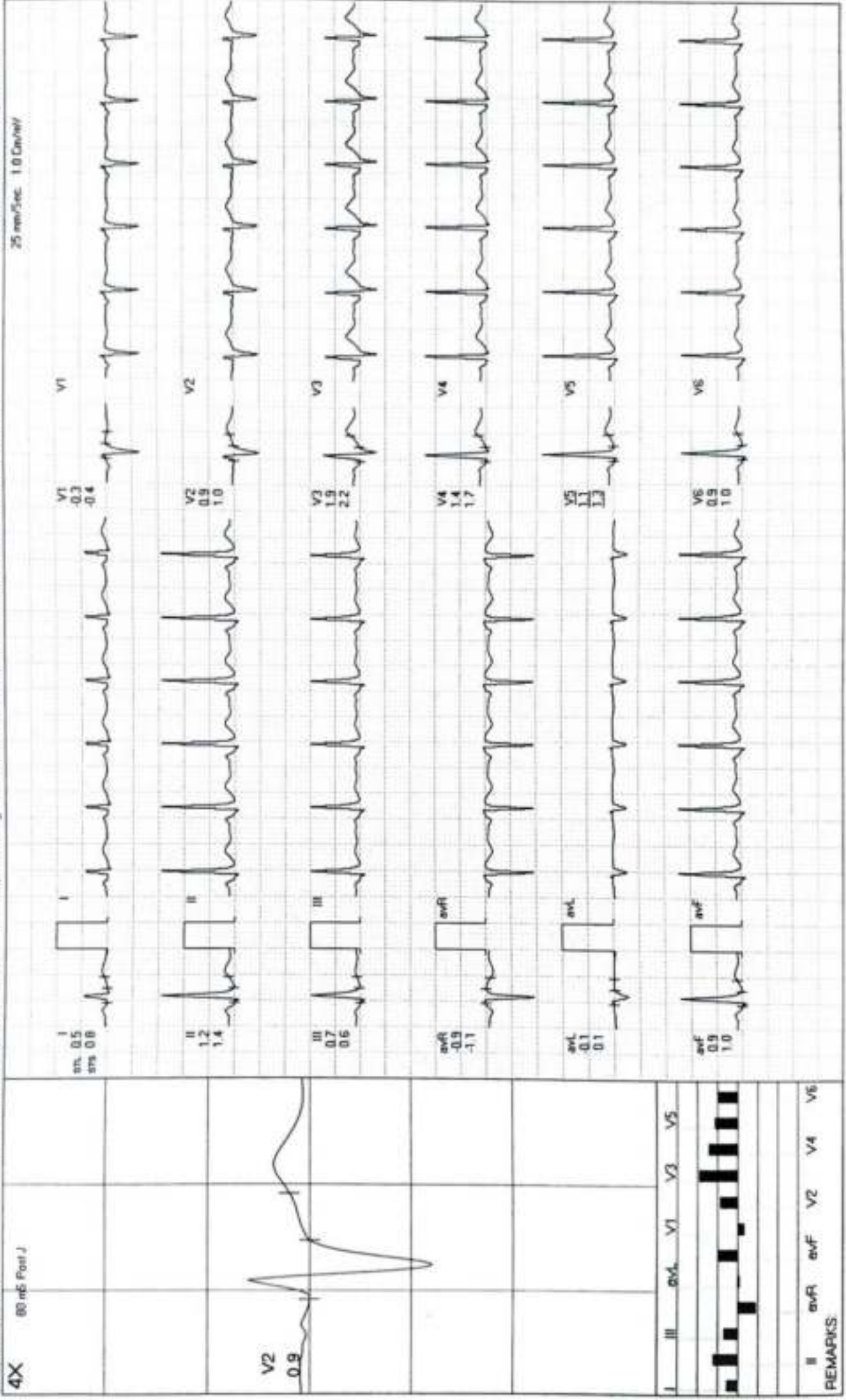
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**BRUCE: Standing(0:04)**



**RAJAN KUMAR JAISHWAR / 39 Yrs / M / 161 Cms / 74 Kg / HR : 108**

Date: 09 - 03 - 2024 METS: 1.0/108 bpm 60% of THR BP: 120/70 mmHg Combined Medians/ECL Ov/ Notch Ov/ HF: 0.05 Hz/LF: 35. Hz ExTime: 00:00 0.0 Km/ph 0.0%



REMARKS

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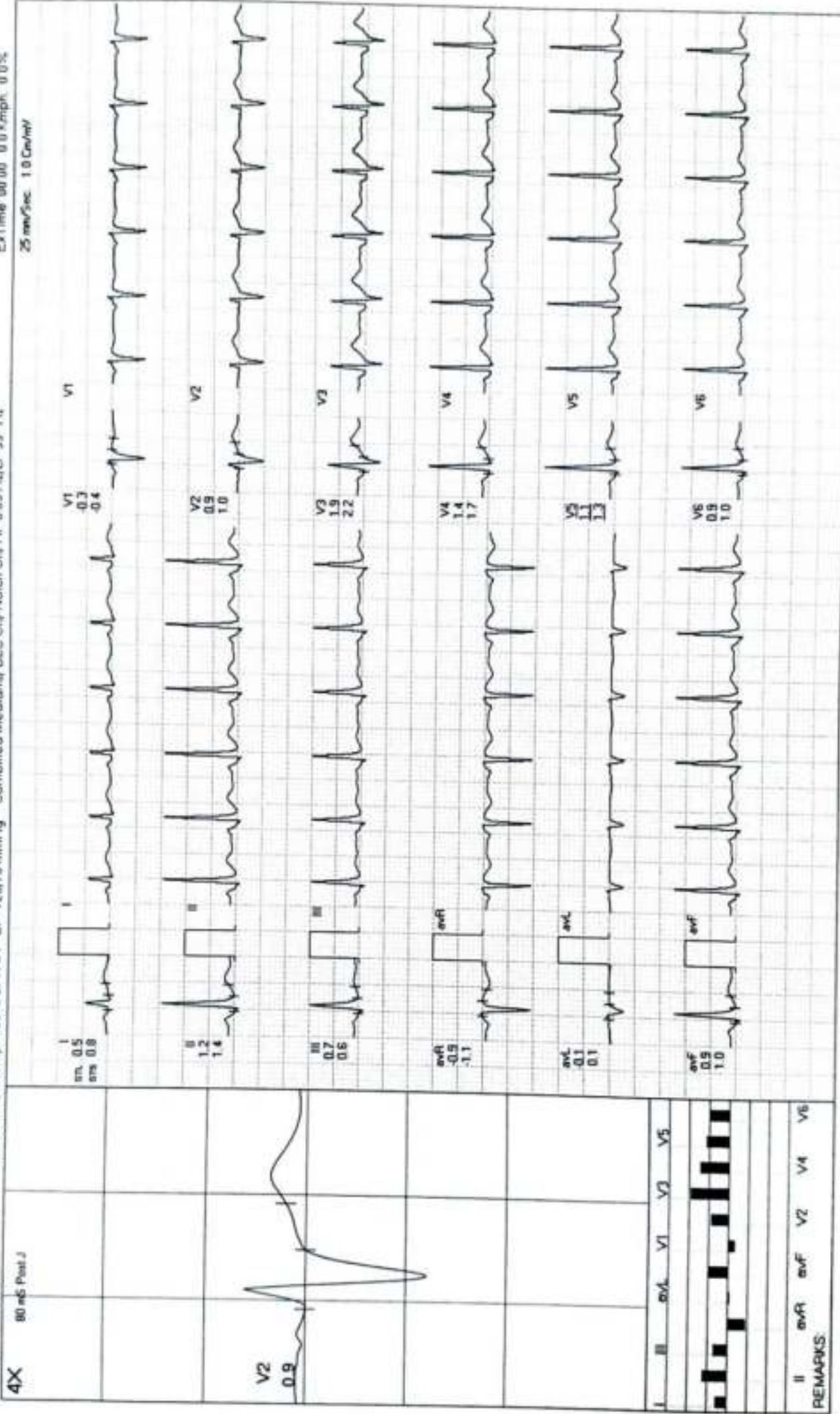
**BRUCE:HV(0:06)**



Date 08-03-2024

METS 1.0/108 bpm 60% of THR BP 120/70 mmHg Combined Mediants/BLC On/Notch On/HF 0.05 Hz&LF 35 Hz

ExTime 00:00 0.0 Km/Ph. 0.0%  
25 mm/Sec. 1.0 Cm/mt



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RAJAN KUMAR JAISWAR / 39 Yrs / M / 161 Cms / 74 Kg / HR : 108

**ExStart**

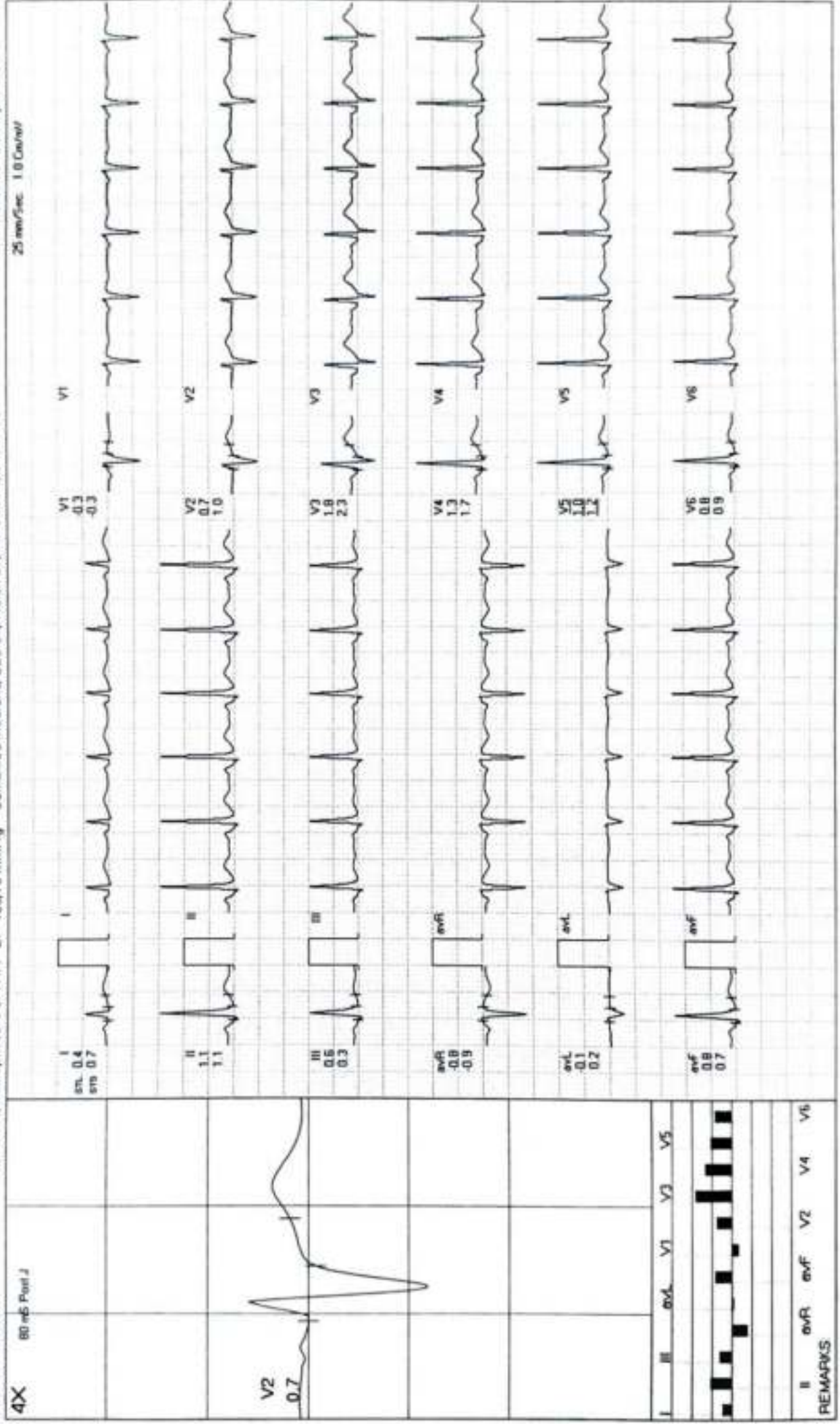


Date 09-03-2024

METS: 1.0/108 bpm 60% of THR BP: 120/70 mmHg Combined Medians/ BLC On/ Notch On/ HF 0.05 Hz/ AF 35 Hz

ExTime 00:00 0.0 Kmph 0.0%

4X 60 mS Page 2



REMARKS  
II aVR aVF V2 V4 V6

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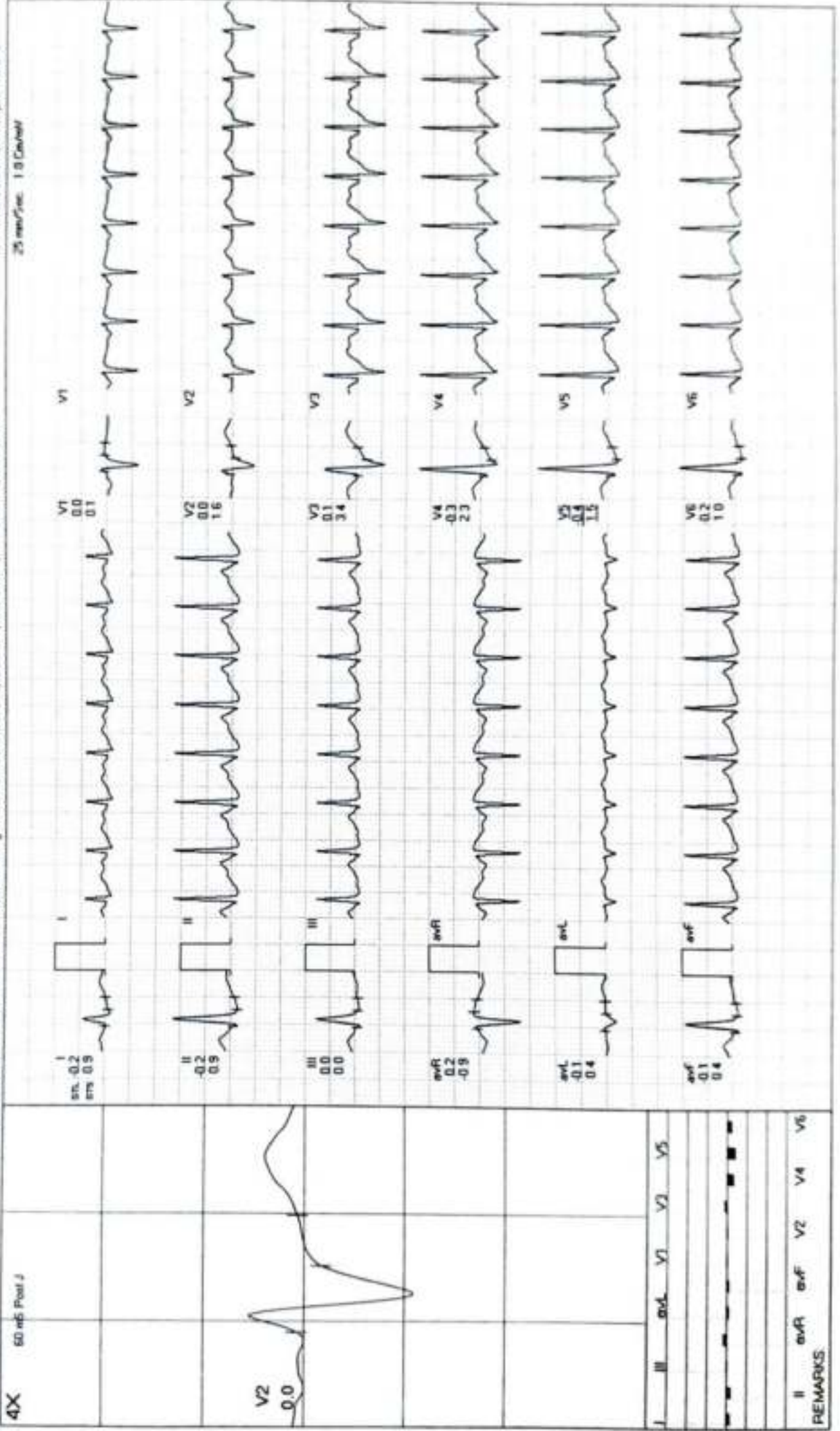
**BRUCE: Stage 1(3:00)**

RAJAN KUMAR JAISWAR / 39 Yrs / M / 161 Cms / 74 Kg / HR : 158

Date: 09-03-2024

METS: 4.7 / 158 bpm 87% of THR BP: 136/84 mmHg Combined Meds: BLC On/ Noct On/ HF 0.05 Hz/ F 35 Hz

Ex Time: 03:00 2.7 Kmph 10.0%



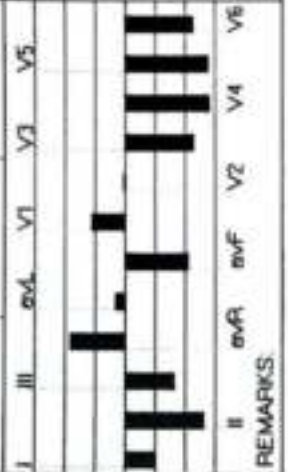
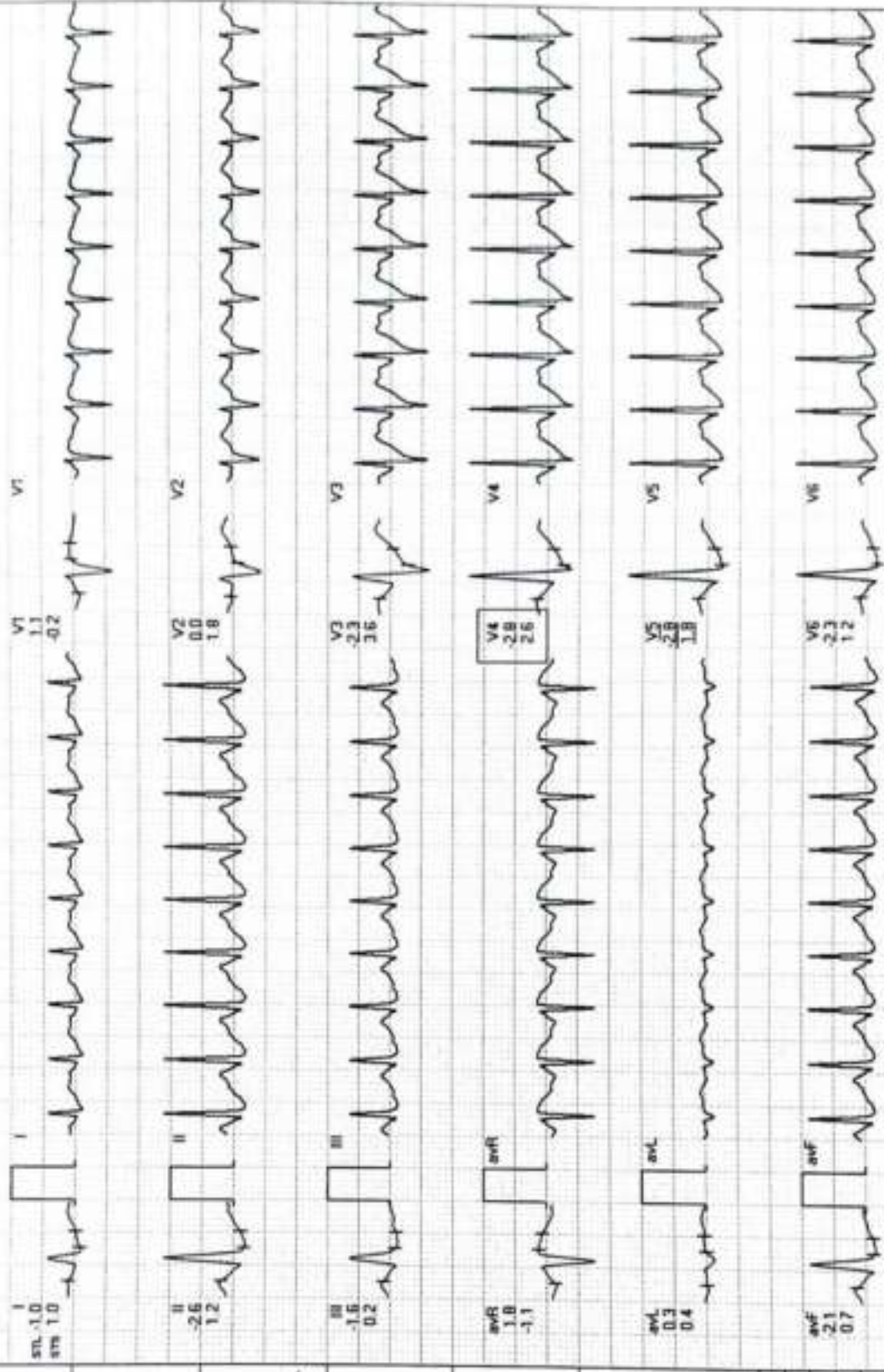
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**RAJAN KUMAR JAISWAR / 39 Yrs / M / 161 Cms / 74 Kg / HR : 174**

**PeakEx**



Date: 09-03-2024      METS: 6.3/174 bpm 96% of THR    BP: 142/90 mmHg    Combined Medians/BLC Ov/Notch Ov/HF 0.05 Hz/LF 35 Hz    ExTime: 04:57    4.0 Km/ph    12.0%  
 4X    60 mS Post J    25 mm/sec    1.0 Cm/mV



REMARKS

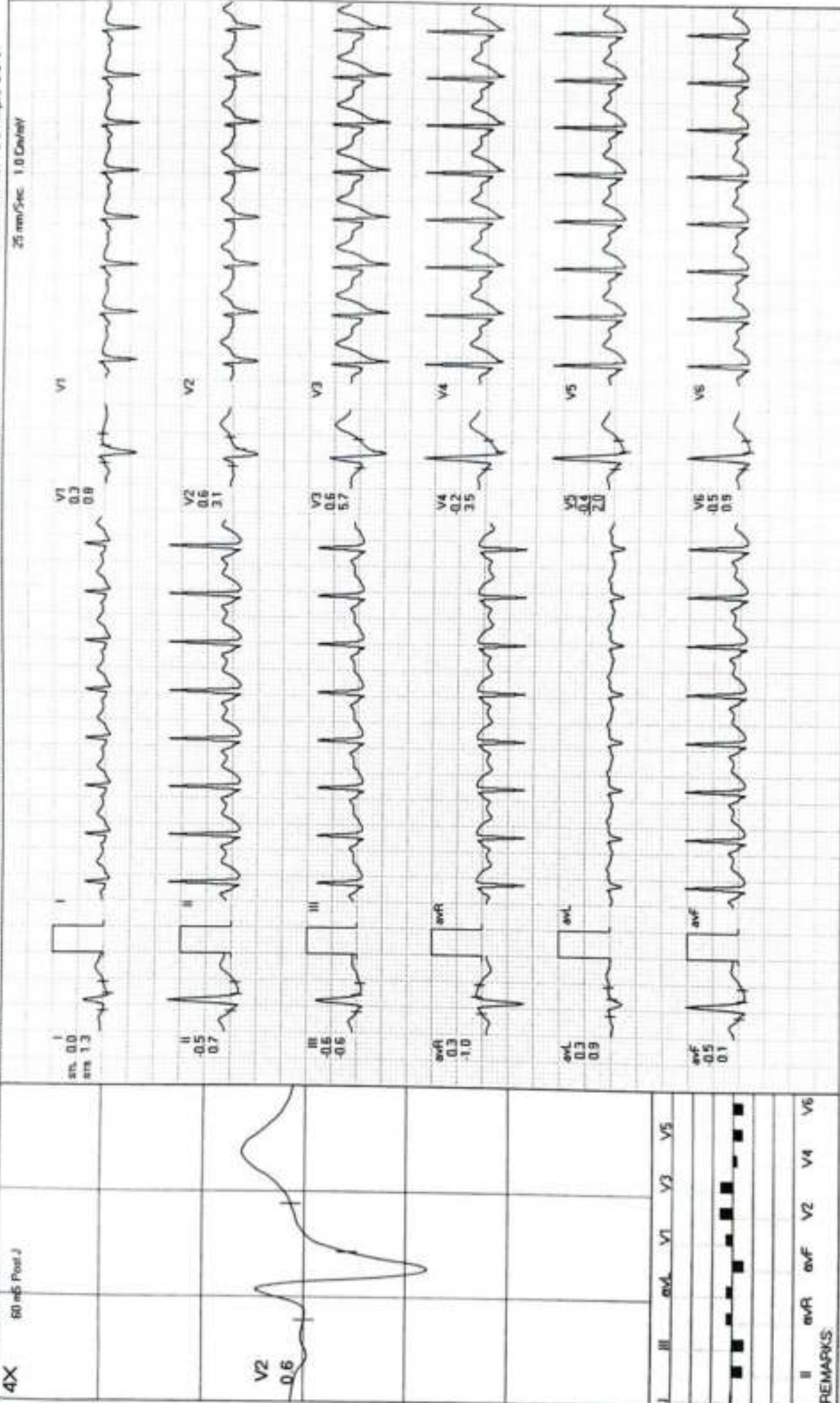
**MODERN PATHOLOGY AND DIAGNOSTIC CENTER**

*RAJAN KUMAR JAISWAR / 39 Yrs / M / 161 Cms / 74 Kg / HR : 144*

**Recovery(1:00)**



Date 09-03-2024 METS 1.0/144 bpm 80% of THR BP 140/86 mmHg Combined Mediana/ BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz ExTime 04:57 0.0 Km/pt 0.0%



REMARKS:

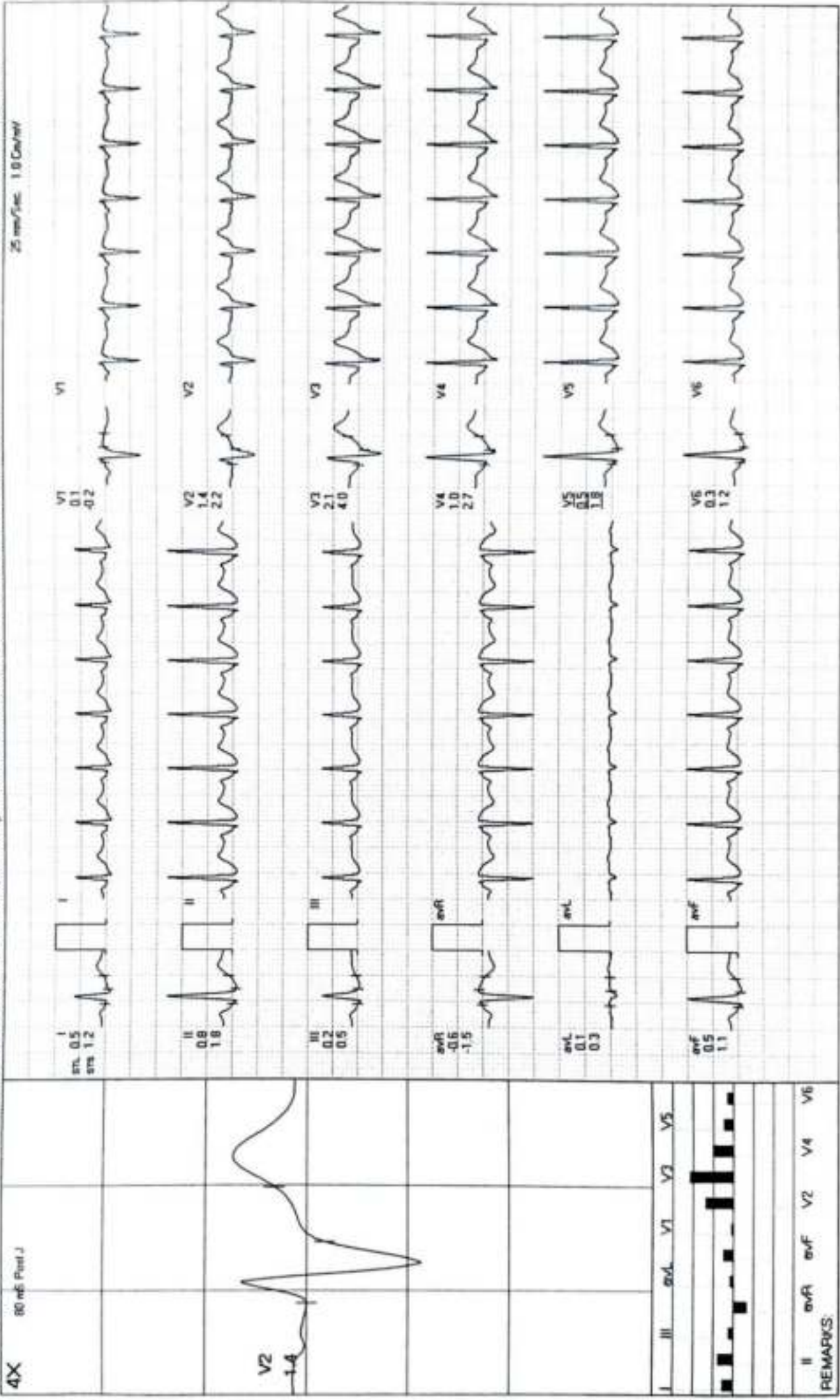
MODERN PATHOLOGY AND DIAGNOSTIC CENTER

RAJAN KUMAR JAISWAR / 39 Yrs / M / 161 Cms / 74 Kg / HR : 125

Recovery(2:00)



Date: 09-03-2024 METS 1.0/125 bpm 69% of THR. BP 136/82 mmHg. Combined Medians/BLC On/Notch On/HF 0.05.Hz/LF 35 Hz



Ex Time 04:57 0.0 Km/Ph. 0.0%

25 mm/sec 1.0 Cal/mV

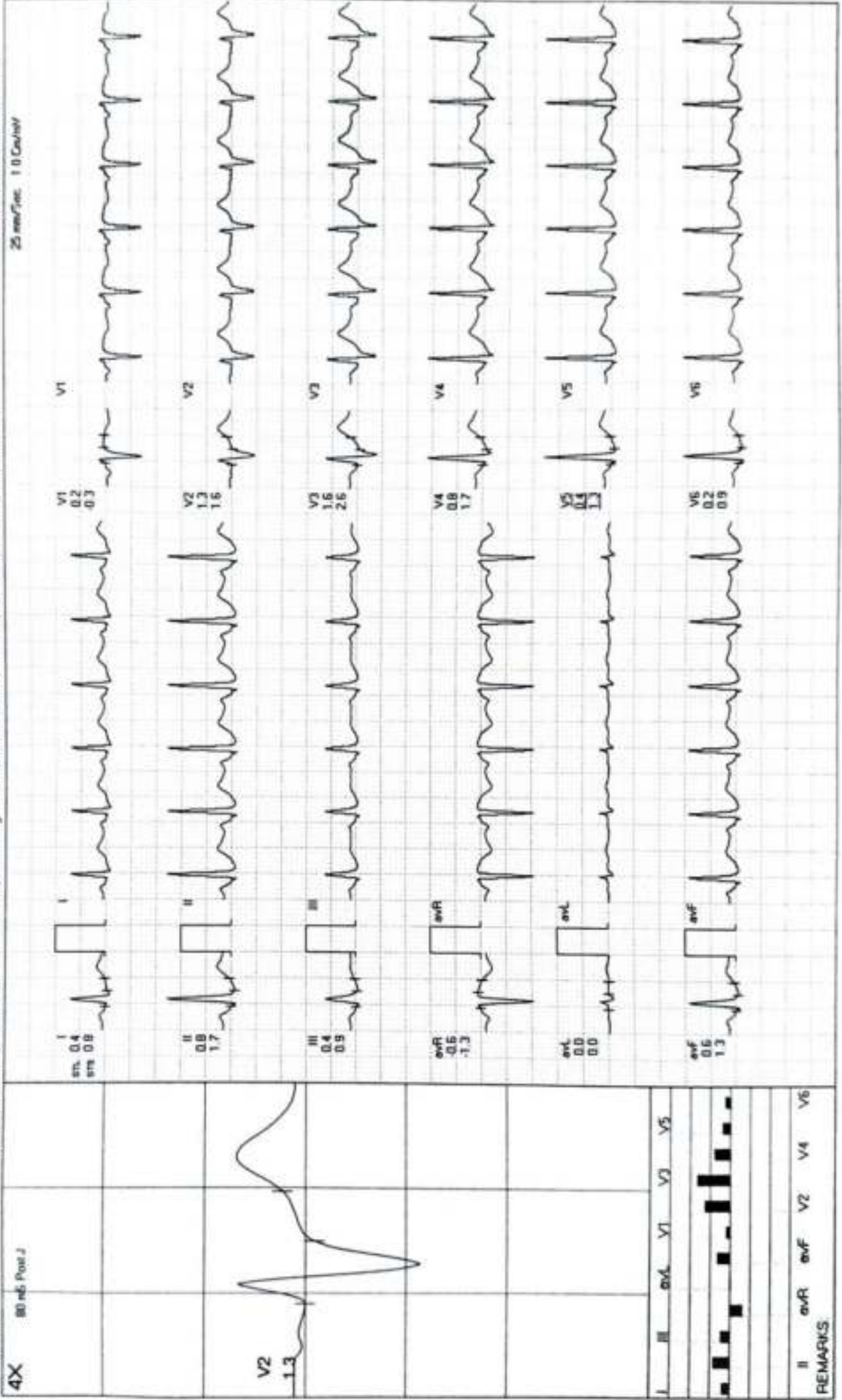


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RAJAN KUMAR JAISWAR / 39 Yrs / M / 161 Cms / 74 Kg / HR : 115

Recovery(3:00)

Date: 09-03-2024 METS: 1.0 / 115 bpm 64% of THR BP: 130/80 mmHg Combined Medians/ BLC On/ Notch On/ HF 0.05 Hz/ LF 35 Hz ExTime: 04:57 0.0 Km/PA 0.0%



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RAJAN KUMAR JAISWAR / 39 Yrs / M / 161 Cms / 74 Kg / HR : 114

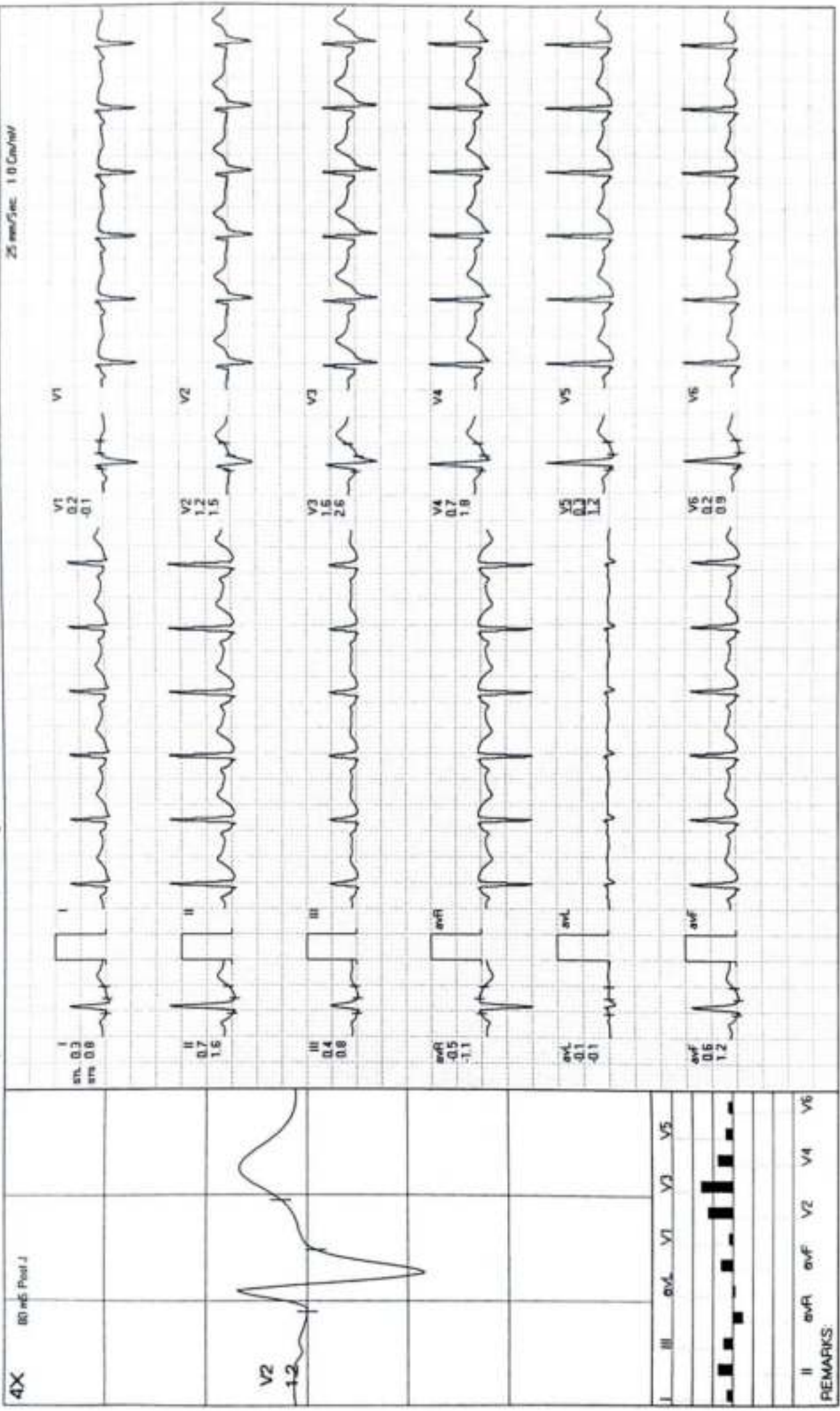
Recovery(3:07)



Date: 09-03-2024 METS: 1.0/114 bpm 53% of THR BP: 124/80 mmHg Combined Medians/ECLC On/ HF 0.05 Hz/LF 35 Hz

Ex Time: 04:57 0.0 Kmph, 0.0%

25 mm/Sec 1.0 Cm/mV





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