

Fitness Certificate

Date of Issue : 29/03/2019

I, Dr.JAVED SHAH do hereby certify that



Born on - 8/04/1991

Blood Group :

underwent an **Pre Emp Medical check up Medical Examination** on 29.03.2019

and is Fit without restriction .

Company – YASH TECH.

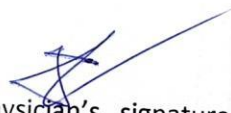
Position –

Employee / Gin No -

Remarks :

Medical Centre : **RUBY HALL CLINIC HINJAWADI**

Physician's signature

  
**Dr. JAVED SHAH**  
MBBS, MD (General Medicine)  
Regd no: 2016/09/3926  
Consultant Physician  
Medical Council Registration Number  
Hinjawadi, Pune - 411057

This certificate of fitness, is valid for a period of three months from **date of medical examination**



Grant Medical Foundation  
**Ruby Hall Clinic**  
*Hinjewadi*

**DR. JAVED SHAH**

Degree : MBBS, MD (Gen Medicine)

Ext :

Website :

Date/Time : 02/04/2019, 02:28:27 pm

Prescription Number : 1

Full Address : Hinjewadi Rajiv Gandhi Infotech Park,,  
Hinjewadi, Pune-411057

Contacts : [9827066482] , drjyshah@gmail.com

Timing : Mon to Friday : 4:00 - 7:00 P.M

Patient's MRN : H00000049049

Patient's Address : HINJAWADI, PUNE,

Patient's Phone Number : 9552527719

Sex : Female Age : 27 Years Weight : 59.4 kgs

**CONSULTATION DETAILS**

Patient has visited for

ASYM

General Examination

BMI : 23.5 kg/m<sup>2</sup> | Weight : 59.4 kgs | Height : 159 cm | Pain Score : 1 /10 | RR : 18 BPM | BP (Sys/Dia) : 80/  
60 mmHg | Pulse : 66 bpm | Temp : 98 F

Diagnosis

health checkup

**PATIENT INSTRUCTIONS**

Recommendation

Medically Fit at present.

Follow up on

follow up in medicine opd sos



**Dr. Javed Shah**

MBBS, MD (Gen Medicine)

Consultant

Physician

2016/09/3926



Grant Medical Foundation  
**Ruby Hall Clinic**  
*Hinjawadi*

Name:		Exam Date:	29-Mar-2019
DOB/Age :	/027 Years	Accession:	28900100328
Gender:	F	Exam:	CHEST X RAY
PID:	H00000049049	Physician:	HOSPITAL CASE^^^^
OPD :			

Health Check

**Radiograph Chest PA View :**

Both lung fields normal.

Both costo-phrenic angles are clear.

Cardiac silhouette and aortic knuckle are normal.

Both hilar shadows and the diaphragmatic contours are normal.

Thoracic soft tissues and the rib cage normal.

**Impression :** No significant abnormality noted.

DR NILOFER SHAH  
MD RADIOLOGY, SR CONSULTANT RADIOLOGIST  
REG NO 68923/1991

Date: 29-Mar-2019 11:06:26



Rajeev Gandhi Infotech Park, MIDC, Phase No. 1, Plot No P-33, Hinjawadi, Pune - 411057.

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### DEPARTMENT OF BIOCHEMISTRY

<b>Patient Name</b>	[REDACTED]	<b>Age / Gender</b>	: 27Y(s)/Female
<b>Bill No/ UHID No</b>	: OH012232 / H00000049049	<b>Report Date</b>	: 29-Mar-2019 11:09 am
<b>Received Date</b>	: 29-Mar-2019 09:48 am	<b>Specimen</b>	: SERUM
<b>Lab No/Result No</b>	: 190301999 / RES116510		
<b>Referred By</b>	: Dr. HOSPITAL CASE		

Investigation	Result	Reference Range	Method
GLUCOSE (FASTING)	: <b>82.0</b>	Normal : < 100.0 mg/dL Prediabetic : 100 - 125 mg/dL Diabetic : >= 126 mg/dL	GOD-POD

REFERENCE : ADA 2015 GUIDELINES

GLUCOSE (POST PRANDIAL)	: <b>101.0</b>	Normal : < 140 mg/dl Prediabetic : 140 - 199 mg/dl Diabetic : >= 200 mg/dl ADA 2015 guidelines	GOD-POD
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CREATININE	: 0.7	0.5 - 1.2 mg/dL	Enzymatic
URIC ACID	: 4.5	2.6 - 6.0 mg/dL	Uricase
ALANINE TRANSAMINASE	: 22.0	10 - 40 U/L	Kinetic
ASPARTATE TRANSAMINASE	: 25.0	10.0 - 40.0 U/L	Kinetic
GAMMA-GT (GGT)	: 14.0	7.0 - 50.0 U/L	Kinetic

#### LIPID PROFILE

CHOLESTEROL	: 152.0	130.0 - 220.0 mg/dL	Enzymatic
TRIGLYCERIDES	: 59.0	35.0 - 180.0 mg/dL	Enzymatic
HDL CHOLESTEROL	: <b>70.0</b>	35 - 65 mg/dL	Enzymatic
LDL CHOLESTEROL	: 70.0	10.0 - 130.0 mg/dL	Calculated
VLDL CHOLESTEROL	: 12.0	5.0 - 36.0 mg/dL	Calculated
CHOL/HDL RATIO	: 2.2	2.0 - 6.2	Calculated

ATP III NCEP GUIDELINES FOR INTERPRETATION OF LIPID PROFILE

PARAMETER	DESIRABLE	BORDERLINE	REQUIRES TREATMENT
Total Cholesterol	Below 200	200 - 240	Above 240
HDL Cholesterol	Above 60	40 - 59	Below 40
LDL Cholesterol\lab	Below 130	130-160	Above 160

**Note:** This test is performed on automated BIO CHEMISTRY analyzer - Vitros250  
\*\*\* End Of Report \*\*\*

**Verified By**

ANAND

**NOTE:**

- \* Clinically correlate, Kindly discuss if necessary.
- \* This report relates only to the item received.

**Dr. SAYALI DESHMUKH**  
Consultant Pathologist

Printed By : GROUND FLOOR

Printed On : 30-Mar-2019 03:32:23 AM System Name : RUBY

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### DEPARTMENT OF CLINICAL PATHOLOGY

<b>Patient Name</b>		<b>Age / Gender</b>	: 27Y(s)/Female
<b>Bill No/ UHID No</b>	: OH012232 / H00000049049	<b>Report Date</b>	: 29-Mar-2019 1:26 pm
<b>Received Date</b>	: 29-Mar-2019 09:48 am	<b>Specimen</b>	: URINE
<b>Lab No/Result No</b>	: 190301999 / RES116608	<b>Sec/Cup/Rep</b>	: No. 0513
<b>Referred By</b>	: Dr. HOSPITAL CASE		

<u>Investigation</u>	<u>Result</u>	<u>Reference Range</u>
<b>URINE ROUTINE</b>		
<b><u>PHYSICAL EXAMINATION</u></b>		
COLOUR	: Pale Yellow	
APPEARANCE	: Clear	
<b><u>CHEMICAL TEST</u></b>		
pH	: 6.0	5.0-7.0
SPECIFIC GRAVITY	: <b>1.010</b>	1.015-1.030
ALBUMIN	: Absent	Absent
SUGAR	: Absent	Absent
KETONE BODIES	: Absent	Absent
BILE PIGMENTS	: Absent	Absent
UROBILINOGEN	: Normal	Normal
NITRITES	: Absent	Absent
LEUCOCYTES ESTERASE	: Absent	Absent
<b><u>MICROSCOPIC TEST</u></b>		
PUS CELLS.	: <b>1-2</b>	0-5 /hpf
RED BLOOD CELLS.	: Absent	0 - 2 /hpf
EPITHELIAL CELLS.	: <b>1-2</b>	0 - 5 /hpf
BACTERIA	: Absent	Absent
CAST	: Absent	Absent
YEAST CELLS	: Absent	Absent
CRYSTALS	: Absent	Absent
OTHERS	: Absent	Absent

Note: This test is performed on automated CLINICAL PATHOLOGY analyzer - URI PLUS200

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

Verified By

RUHI

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Dr. SAYALI DESHMUKH

Consultant Pathologist

Printed By : GROUND FLOOR

Printed On : 30-Mar-2019 03:32:23 AM System Name : RUBY



### DEPARTMENT OF HAEMATOLOGY

<b>Patient Name</b>	[REDACTED]	<b>Age / Gender</b>	: 27Y(s)/Female
<b>Bill No/ UHID No</b>	: OH012232 / H00000049049	<b>Report Date</b>	: 29-Mar-2019 10:10 am
<b>Received Date</b>	: 29-Mar-2019 09:48 am	<b>Specimen</b>	: EDTA WHOLE BLOOD
<b>Lab No/Result No</b>	: 190301999 / RES116462		
<b>Referred By</b>	: Dr. HOSPITAL CASE		

Investigation	Result	Reference Range	Method
<b>HAEMOGRAM REPORT</b>			
<b>W.B.C.COUNT</b>	: 8000	4000 - 11000 /ul	Coulter Principle
<b>Differential Count</b>			
NEUTROPHILS	: 49.0	40-75 %	Derived from WBC Histogram
LYMPHOCYTES	: <b>42.1</b>	20-40 %	
MONOCYTES	: 6.1	2-10 %	
EOSINOPHILS	: 2.8	1.0 - 6.0 %	
BASOPHILS	: 0.0	0.0 - 1.0 %	
ABSOLUTE NEUTROPHIL COUNT	: 3.93	2 - 7 x10 <sup>3</sup> cells/ul	Coulter Principle
ABSOLUTE LYMPHOCYTE COUNT	: <b>3.38</b>	1 - 3 x10 <sup>3</sup> cells/ul	
ABSOLUTE MONOCYTE COUNT	: 0.49	0.2-1.0 x10 <sup>3</sup> cells/ul	
ABSOLUTE EOSINOPHIL COUNT	: 0.22	0.02-0.5 x10 <sup>3</sup> cells/ul	
ABSOLUTE BASOPHIL COUNT	: <b>0.00</b>	0.02-0.1 x10 <sup>3</sup> cells/ul	
R.B.C COUNT	: 4.19	3.8 - 5.8 million/ul	Coulter Principle
<b>HAEMOGLOBIN</b>	: 12.1	12 - 15.0 g/dl	
HAEMATOCRIT	: 36.8	36-46 %	
MCV	: 88	83 - 99 fL	
MCH	: 28.8	27-32 pg	
MCHC	: 32.8	31.5-34.5 g/dL	Calculated parameter
RDW	: 14.0	11.6-14.0 %	
<b>PLATELET COUNT</b>	: 308	150 - 450 x10 <sup>3</sup> /ul	
MPV	: 8.6	7.8-11 fL	
ESR at 1 Hour	: 17	0 - 20 mm/hr	

=====

**INTERPRETATION :**

ESR is a screening test to detect presence of systemic disease; however a normal result does not rule out a systemic disease.

ESR is also used to monitor course of disease or response to therapy if initially elevated.

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

**Verified By**

RUHI

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*[Signature]*  
**Dr. SAYALI DESHMUKH**  
Consultant Pathologist

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**DEPARTMENT OF SEROLOGY**

<b>Patient Name</b>	[REDACTED]	<b>Age / Gender</b>	: 27Y(s)/Female
<b>Bill No/ UHID No</b>	: 01012252 / 1100000049049	<b>Report Date</b>	: 29-Mar-2019 4:21 pm
<b>Received Date</b>	: 29-Mar-2019 09:48 am	<b>Specimen</b>	:
<b>Lab No/Result No</b>	: 190301999 / RES116719		
<b>Referred By</b>	: Dr. HOSPITAL CASE		

<u>Investigation</u>	<u>Result</u>	<u>Method</u>
<b>DRUG OF ABUSE - (PANEL OF 6)</b>		
URINE CREATININE.	: 95.7	Normal human urine : >20 mg/dL ?Diluted urine sample : 6-20 mg/dL ?Substituted urine sample : < 6 mg/dL
AMPHETAMINE	: NEGATIVE	NEGATIVE
BARBITURATE	: NEGATIVE	NEGATIVE
BENZODIAZEPINE	: NEGATIVE	NEGATIVE
COCAINE	: NEGATIVE	NEGATIVE
MORPHINE/OPIATES	: NEGATIVE	NEGATIVE
TCA - Tricuclic Antidepressants	: NEGATIVE	NEGATIVE

Method

Urine Drugs : Rapid Immunochromatography

Specificity

Presence of interfering substances may lead to decreased specificity.

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

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

**Verified By**

RUHI

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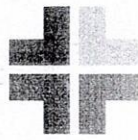
**Dr. SAYALI DESHMUKH**

**Consultant Pathologist**

Printed By : GROUND FLOOR

Printed On : 30-Mar-2019 03:32:23 AM System Name : RUBY





Grant Medical Foundation

**Ruby Hall Clinic**

Hinjawadi

**AUDIOGRAM**

Patient Name: [REDACTED] Sex: \_\_\_\_\_ Age: \_\_\_\_\_

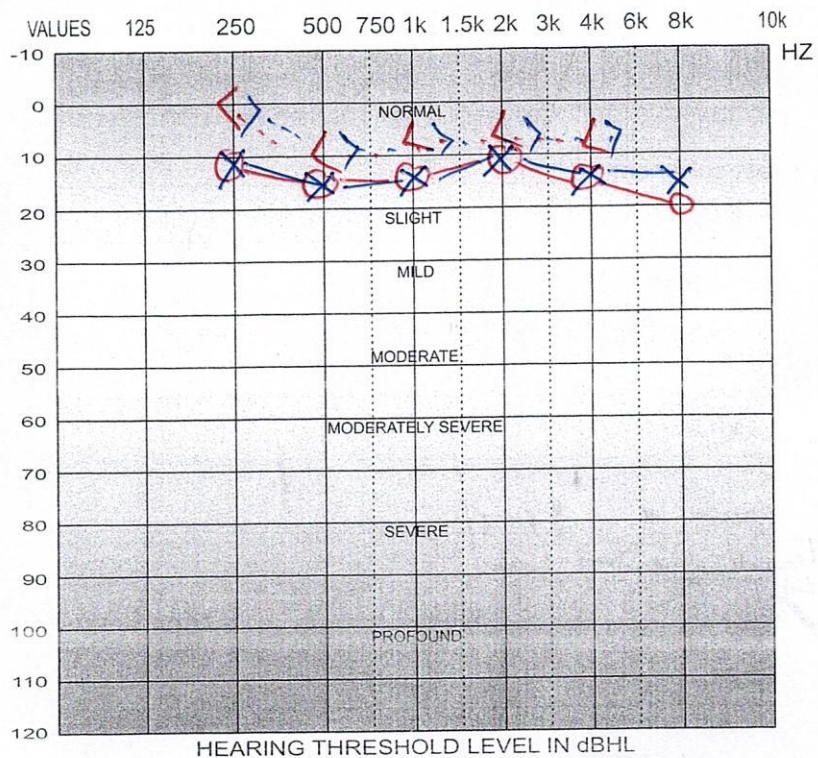
Complaint: \_\_\_\_\_ Ref: OH012232 - OPH00011596 Date: \_\_\_\_\_  
27.11/F -NH -

Occupation: \_\_\_\_\_ D.O.B.: \_\_\_\_\_

Registration No.: \_\_\_\_\_ Reference: \_\_\_\_\_

Test	Right Ear (Red)	Left Ear (Blue)
AIR	O-O	X-X
AIR OPP EAR MASKED	△-△	□-□
NO RESPONSE	○	X
BONE	<	>
BONE OPP EAR MASKED	[	]

Test	Right Ear (Red)	Left Ear (Blue)
RINNE	+ve	+ve
WEBER		X
BING		

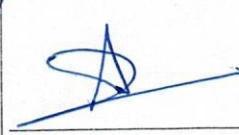


Daagnosis: SLR Normal hearing sensitivity

Test Result: ☒ Reliable ☐ Fair ☐ Poor

SRT: \_\_\_\_\_

SDS: \_\_\_\_\_

  
Audiologist Signature



**OUT-PATIENT RECORD**

Patient Name	[REDACTED]	Age/Sex	: 27 Years / Female
Hospital No.	: 1100000049049	Date/Time	: 29/03/2019, 11:34:03 am
Consultant Name	: Dr. Sapna Kotwaliwale	Episode No	: PAN190378394

**HISTORY, EXAMINATION, INVESTIGATIONS, TREATMENT AND PROGRESS****CONSULTATION DETAILS****General Examination****Physical Examination**

EYE :

Vision - 6/6 ( Both eyes )

N5

Colour Vision - Normal

**Diagnosis**

Preventive Health Check

**Dr. Sapna Kotwaliwale**  
MBBS, DOMS  
Consultant  
Ophthalmology  
88564





ID:

Name:

Sex: M

cm kg

Birth date:

/ mmHg

years

Medication:

Symptoms:

History:

Vent. rate

PR int 70 bpm

QRS dur 158 ms

QT/QTc(E) int 82 ms

P/QRS/T axis 382/ 402 ms

RV5/SV1 amp 79/ 69/ 47 °

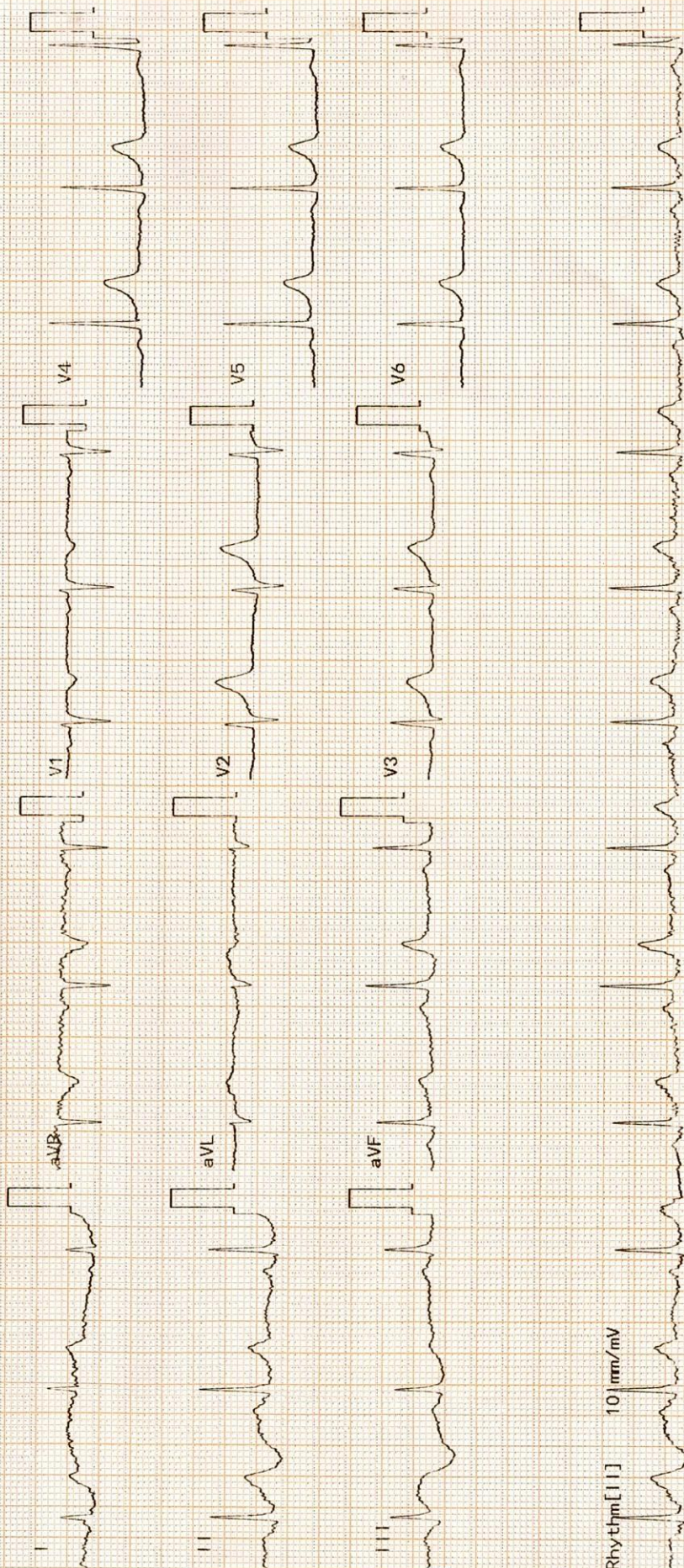
RV5+SV1 amp 1.59/ 0.73 mV

2.32 mV

Unconfirmed Report

Reviewed by:

10 mm/mV 25 mm/s Filter: H50 D 35 Hz 10 mm/mV 10 mm/mV



Ref: OH012232 - OPH00011596-2711/F -NH -





Ref: OH012232 - OPH00011596-  
27.11/F -NH -

Name :-

Age / Sex :-

Date :-

HR Rate :-

Rhythm :-

Voltage :-

Axis :-

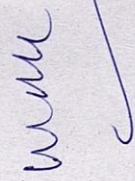
P Wave :-

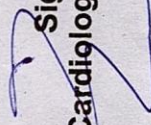
PR Interval :-

QRS :-

ST :-

Others :-

Final Impression :-  


  
Signature  
Cardiologist / Physician

Note :- 1: This impression is based on ECG.

2. Clinical Co-relation is needed.

3. Please Take a Photocopy of this ECG.