

Fitness Certificate

Date of Issue: 27/04/2019

I, Dr. JAVED SHAH do hereby certify that

Born on - 11.12.1988

Blood Group:

underwent an Pre Emp Medical check up Medical Examination on 10.05.2019

and is Fit without restriction .

Company - YASH TECH.

Position -

Employee / Gin No -

Remarks:

Medical Centre : RUBY HALL CLINIC HINJAWADI

Physician's signature

Medical Council Registration Number

PS-35-046 🖦

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



DR. JAVED SHAH

Degree: MBBS, MD (Gen Medicine)

Ext : Website :

Date/Time: 10/05/2019,05:51:23 pm

Prescription Number: 1

Patient's MRN : H00000051597 Patient's Address : YERWADA, PUNE, 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 Phone Number: 9016400529 Sex: Male Age: 30 Years Weight: 68.4 kgs

CONSULTATION DETAILS

Patient has visited for

ASYM

General Examination

BMI: 24.82 kg/m2 | Weight: 68.4 kgs | Height: 166 cm | Pain Score: 1 /10 | RR: 18 BPM | BP (Sys/Dia): 123/

93 mmHg | Pulse : 78 bpm | Temp : 98 F

Investigation Review Notes

Uric acid 7.30, Dyslipidimia+

Diagnosis

health checkup

PATIENT INSTRUCTIONS

Recommendation

DIET PLANNING | REGULAR EXERCISE

Follow up on

follow up in medicine opd sos



Dr. Javed Shah

MBBS, MD (Gen Medicine)

Consultant

Physician

2016/09/3926



• Ph: 020 66999999 • Email : hinjawadi@rubyhall.com • 24 hrs Helpline - 7757005773 • Website : www.rubyhall.com, www.hinjawadi.rubyhall.com

DEPARTMENT OF BIOCHEMISTRY

Patient Name

Bill No/ UHID No : OH012913 / H00000051597

Received Date

:10-May-2019 09:21 am

Lab No/Result No:190500447 / RES123763

Referred By

:Dr. HOSPITAL CASE

Age / Gender : 30 Y(s)/Male

Report Date

:10-May-201910:13 am

Specimen

:SERUM

Investigation GLUCOSE (FASTING)

Result : 82.0

Reference Range

Method Normal : < 100.0 mg/dL GOD-POD

Prediabetic: 100 - 125 mg/dL

Diabetic: >= 126 mg/dL

REFERENCE: ADA 2015 GUIDELINES

GLUCOSE (POST PRANDIAL)

: 97.0

Normal

: < 140 mg/dl GOD-POD Prediabetic: 140 - 199

mg/dl

Diabetic : >= 200 mg/dl

ADA 2015 guidelines

CREATININE : 0.7 URIC ACID : 7.3

ALANINE TRANSAMINASE : 32.0 ASPARTATE TRANSAMINASE : 21.0 GAMMA-GT (GGT)

: 15.0

10.0 - 40.0 U/L

0.6 - 1.3 mg/dL

3.5-7.2 mg/dL

10 - 40 U/L

7.0 - 50.0 U/L

Kinetic

Enzymatic

Enzymatic

Enzymatic

Uricase

Kinetic

Kinetic

LIPID PROFILE CHOLESTEROL

: 228.0 TRIGLYCERIDES : 119.0 HDL CHOLESTEROL : 37.0 LDL CHOLESTEROL : 168.0

VLDL CHOLESTEROL : 24.0 CHOL/HDL RATIO : 6.2

130.0 - 220.0 mg/dL 35.0 - 180.0 mg/dL 35 - 65 mg/dL

10.0 - 130.0 mg/dL 5.0 - 36.0 mg/dL

2.0 - 6.2

Enzymatic Calculated Calculated

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\tab	Below 130	130-160	Above 160

Note: This test is performed on automated BIO CHEMISTRY analyzer - Vitros250

*** End Of Report ***

Verified By

RUHI

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

Dr. SAYALI DESHMUKH Consultant Pathologist

Apelmoth

Printed On: 11-May-2019 07:23:36 AM System Name: RUBY

Printed By: FIRST FLOOR

PS-35-1023 (P.T.O. for conditions of reporting)



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DEPARTMENT OF CLINICAL PATHOLOGY

Patient Name

Bill No/ UHID No : OH012913 / H00000051597

Received Date :10-May-2019 09:21 am Lab No/Result No: 190500447 / RES123819

Referred By :Dr. HOSPITAL CASE Age / Gender : 30 Y(s)/Male

Report Date :10-May-2019 1:22 pm

Specimen :URINE Sec/Cup/Rep: No. 1654

Investigation

Result

Reference Range

URINE ROUTINE

PHYSICAL EXAMINATION

: Pale Yellow COLOUR

APPEARANCE : Clear

CHEMICAL TEST

: 5.0 5.0-7.0 SPECIFIC GRAVITY : 1.010 1.015-1.030 : Absent ALBUMIN Absent SUGAR : Absent Absent KETONE BODIES : Absent Absent BILE PIGMENTS : Absent Absent UROBILINOGEN : Normal Normal NITRITES : Absent Absent

LEUCOCYTES ESTERASE

: Absent Absent MICROSCOPIC TEST PUS CELLS. : 1-2 0-5 /hpf RED BLOOD CELLS. : Absent 0 - 2 /hpf EPITHELIAL CELLS. : 2-3 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

ANAND

NOTE:

Clinically correlate, Kindly discuss if necessary.

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Apstructor

Dr. SAYALI DESHMUKH Consultant Pathologist

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DEPARTMENT OF HAEMATOLOGY

Patient Name

Bill No/ UHID No :OH012913 / H00000051597

Received Date

:10-May-2019 09:21 am

Lab No/Result No:190500447 / RES123758

Referred By

:Dr. HOSPITAL CASE

Age / Gender : 30 Y(s)/Male

Report Date :10-May-2019 9:51 am

Specimen

:EDTA WHOLE BLOOD

Investigation HAEMOGRAM REPORT	Result	Reference Range	Method
W.B.C.COUNT Differential Count	: 4900	4000 - 11000 /ul	Coulter Principle
NEUTROPHILS	: 47.3	40 - 75 %	Derived from WBC Histogram
LYMPHOCYTES	: 42.2	20 - 40 %	
MONOCYTES	: 7.1	2-10 %	
EOSINOPHILS	: 3.3	1.0 - 6.0 %	
BASOPHILS	: 0.1	0.0 - 1.0 %	
ABSOLUTE NEUTROPHIL COUNT	: 2.34	2 - 7 x10 ³ cells/ul	
ABSOLUTE LYMPHOCYTE COUNT	: 2.09	1 - 3 x10 ³ cells/ul	
ABSOLUTE MONOCYTE COUNT	: 0.35	0.2-1.0 x10 ³ cells/ul	
ABSOLUTE EOSINOPHIL COUNT	: 0.16	0.02-0.5 x103cells/ul	
ABSOLUTE BASOPHIL COUNT	: 0.00	0.02-0.1 x103cells/ul	
R.B.C COUNT	: 5.11	4.5 - 6.5 million/ul	Coulter Principle
HAEMOGLOBIN	: 16.3	13 - 17 g/dl	Cynmethhaemoglobin, Photometry
HAEMATOCRIT	: 47.1	40-50 %	Calculated Parameter
MCV	: 92	83-99 fL	Coulter Principle
MCH	: 31.9	27 - 32 pg	Calculated parameter
MCHC	: 34.6	31.5 - 34.5 g/dL	Calculated Parameter
RDW	: 14.3	11.6-14.0 %	Calculated from RBC Histogram
PLATELET COUNT	: 269	150 - 450 x10³/ul	Coulter principle
MPV	: 7.9	7.8-11 fl	Coulter Principle
WBC MORPHOLOGY	: Relative lymphocytosis		

Note: This test is performed on automated HAEMATOLOGY analyzer - Abxpentra80XL

*** End Of Report ***

Verified By

RUHI

NOTE:

* Clinically correlate, Kindly discuss if necessary.

* This report relates only to the item received.

Dr. APARNA S.MANDVEKAR, MBBS MD DNB(PATHOLOGY) Consultant Pathologist

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DEPARTMENT OF HAEMATOLOGY

Patient Name

Bill No/ UHID No :OH012913 / H00000051597 :10-May-2019 09:21 am

Lab No/Result No: 190500447 / RES123777

Referred By

Received Date

:Dr. HOSPITAL CASE

Age / Gender : 30 Y(s)/Male

Report Date

:10-May-201911:18 am

Specimen

: WHOLE BLOOD

Investigation ESR at 1 Hour

Result

Reference Range 0 - 15 mm/hr

Method

Modified Westergren Method

-----INTERPRETATION:

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

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

*** End Of Report ***

Verified By

RUHI

NOTE:

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* This report relates only to the item received.

Dr. SAYALI DESHMUKH Consultant Pathologist

- Accembe

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DEPARTMENT OF SEROLOGY

Patient Name

Bill No/ UHID No : OH012913 / H00000051597

Received Date Lab No/Result No: 190500447 / RES123847

:10-May-2019 09:21 am

Referred By

:Dr. HOSPITAL CASE

Age / Gender : 30 Y(s)/Male

Method

Report Date

:10-May-2019 3:16 pm

Greater than 1000 ng/mL

Greater than 200 ng/mL

Greater than 300 ng/mL

Greater than 300 ng/mL

Greater than 300 ng/mL

Greater than 25 ng/mL

Specimen

Investigation Result DRUG OF ABUSE - (PANEL OF 6)

URINE CREATININE.

: 43.3

: NEGATIVE

Normal human urine : >20 mg/dL

?Diluted urine sample

6-20 mg/dL

?Substituted urine sample :

< 6 mg/dL **NEGATIVE**

NEGATIVE

NEGATIVE

NEGATIVE

NEGATIVE

NEGATIVE

BARBITURATE BENZODIAZEPINE COCAINE

AMPHETAMINE

(PCP)

: NEGATIVE : NEGATIVE : NEGATIVE

: NEGATIVE MORPHINE/OPIATES : NEGATIVE

PHENCYCLIDINE PHOSPHATE

Method Urine Drugs: Rapid Immunochromatography Specificity

Presence of interfering substances may lead to decreased specificity.

*** End Of Report ***

*** End Of Report ***

Verified By

DR.SAYALI

NOTE:

* Clinically correlate, Kindly discuss if necessary.

* This report relates only to the item received.

Printed By: FIRST FLOOR

Dr. SAYALI DESHMUKH Consultant Pathologist

- Archarde



Name:

Age: USU Years

Gender:

M

PID:

H00000051597

OPD:

Exam Date: 10-May-2019

Accession: 31018093322

Exam:

CHEST X RAY

Physician:

HOSPITAL CASE^^^

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: 10-May-2019 10:06:11



Patient Name:		10/05/2019	<u>AUDIOGR</u> -H00000051597	<u>AM</u> Sex:	Age:	
Complaint:Ref: 0 30.4./ Occupation:		Ref: OH012 30.4./M -NH	2913 - OPH00012220- ———— 1 -		DOB:	
				D.O.B		
				Reference:		
Test	Right Ear (Red)	Left Ear (Blue)	VALUES 125 _25	50 500 750 1k 1.5k 2k 3k 4	k 6k 8k 10k	
AIR	0-0	X-X	0	NORMAL		
AIR OPP EAR MASKED	Δ-Δ	0-0	20		* * * *	
NO RESPONSE	Ō	X	30	MILD		
BONE	<	>	50	MODERATE	N.	
BONE OPP EAR MASKED	[]	70	MODERATELY SEVERE		
Test	Right Ea (Red)	Left Ear (Blue)	90	SEVERE		
RINNE	the	the	100	PROFDUND:		
	4		110			
WEBER						



OUT-PATIENT RECORD

Patient Name

Age/Sex

: 30 Years / Male

Hospital No.

: H00000051597

Date/Time

: 10/05/2019,11:28:46 am

Consultant Name : Dr. Sapna Kotwaliwale

Episode No

: PAN190582673

HISTORY, EXAMINATION, INVESTIGATIONS, TREATMENT AND PROGRESS

CONSULTATION DETAILS

General Examination

Physical Examination

EYE:

Vision - 6/12 (Right eye) , 6/18 (Left eye)

Colour Vision - Normal

Diagnosis

Preventive Health Check

PATIENT INSTRUCTIONS

In

Follow Up on

REFRACTION

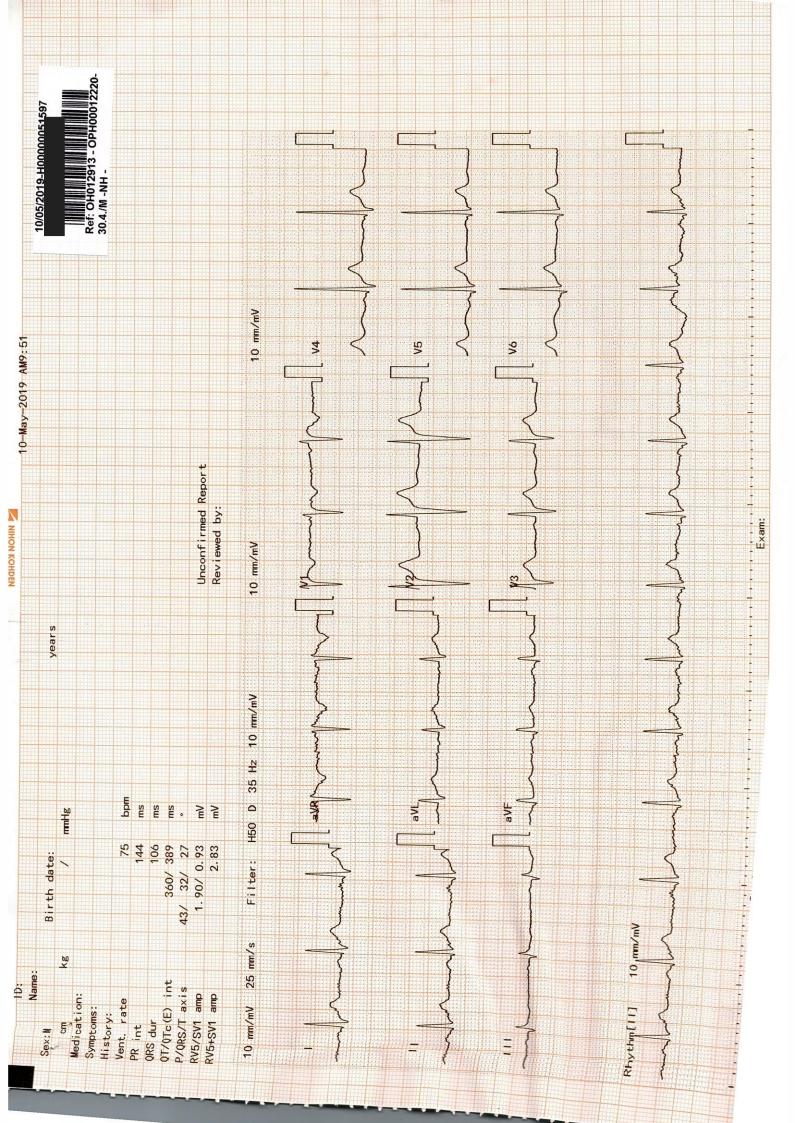
Dr. Sapna Kotwaliwale

MBBS, DOMS

Consultant

Ophthalmology

88564



Ref: OH012913 - OPH00012220-30.4./M -NH -10/05/2019-H00000051597

Date:-

Age / Sex :-

Name :-

HR Rate :-

Rhythm :-

Voltage :-

Axis:-

P Wave :-

PR Interval :-

QRS :-

ST:-

Others :-

Final Impression :- LUMUL

2. Clinical Co-relation is needed.

Note: 1. This impression is based on ECG.

3. Please Take a Photocopy of this ECG.

Signature Cardiologist / Physician