

# Medicheck Health Services Private Limited

Plot No. R-831, Thane Belapur Road, T.T.C.,  
Nr. Rabale Police Station, Rabale, Navi Mumbai-400708.  
Email: [health@medicheck.co.in](mailto:health@medicheck.co.in), Mob : 9321021566



## Health Check-up Report

Certification No : **Medi-18-32200**

Part 1 - To be filled in by Candidate before Medical Examination


Post considered for

Name (in Block Letters) **VESTINUDAS F. PAWAR**

Address **A/P- Snehanvit (olon, unje**

Date of birth **Maca, June**


**16/08/1987**



	NO	YES
1. Are you currently being treated by a health professional for any illness or injury?	<input checked="" type="checkbox"/>	
2. Do you use any drugs or medications prescribed by Doctor?	<input checked="" type="checkbox"/>	
3. Do you use any drugs or medications not prescribed (in factor)?	<input checked="" type="checkbox"/>	
4. Do you have heart disease	<input checked="" type="checkbox"/>	
5. Do you have high blood pressure	<input checked="" type="checkbox"/>	
6. Do you have vertigo or fear of heights	<input checked="" type="checkbox"/>	
7. Do you have sleep disorder	<input checked="" type="checkbox"/>	
8. Do you have Epilepsy	<input checked="" type="checkbox"/>	
9. Have you ever had any serious injury, illness, operation, or been in hospital for any reason?	<input checked="" type="checkbox"/>	
10. Have you ever been blackout/fainted	<input checked="" type="checkbox"/>	
11. Do you drink alcohol?	<input checked="" type="checkbox"/>	

Date **07 SEP 2021**

Signature of Candidate **V. Pawar**

Left Hand Thumb impression 

**Dr. Pradeep G. Mahajan**  
M.B.B.S., M.S., A.F.I.H., D.U.  
Regd. No: 53369  
CERTIFYING SURGEON  
Under Factories Act.

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## Health Check-up Report

Company Name : **NOKIA SOLUTIONS & NETWORKS INDIA PVT. LTD.**  
Patient Name : **Mr. VISHNUDAS F. PAWAR**  
Designation : **Project Engineer**  
Emp Code :  
Cont. Name :  
Company Add. : **PUNE**  
Certification No : **Medi-18-32200**

Reg.Number : **32200**  
Check-UP-Date: **02.09.221**  
Joining Date :  
D. O. B. : **16.08.1987**  
Age /Sex : **34 MALE**  
Blood Group : **B Positive**  
Identify Mark: **Nil**

### Part 2 - Clinical Examination/ Lab test

1 Cardiovascular system BMI	Height	22	Weight	60 Kg.
2 Blood pressure - (repeat if necessary)	Systolic / Diastolic	110/70	mmHg	-
B. Pulse rate	Regular	82	Irregular	-
C. Heart sounds	Normal	✓	Abnormal	-
D. Peripheral pulses	Normal	✓	Abnormal	-
3. Chest/Lungs	Normal	✓	Abnormal	-
4. Abdomen (Liver)	Normal	✓	Abnormal	-
5. Neurological/Locomotor				
A. Cervical spine rotation	Normal	✓	Abnormal	-
B. Back movement	Normal	✓	Abnormal	-
C. Upper limbs				
Appearance	Normal	✓	Abnormal	-
Joint movements	Normal	✓	Abnormal	-
D. Lower limbs				
Appearance	Normal	✓	Abnormal	-
Joint movements	Normal	✓	Abnormal	-
E. Reflexes	Normal	✓	Abnormal	-
F. Romberg's sign	Normal	✓	Abnormal	-

A pass requires the ability to maintain balance while standing with shoes off, feet together side by side, eyes closed and arms by sides, for 30 seconds

6. Hearing (Doctor's judgement) Normal ☒ Abnormal ☐

7. Vision Test (Doctor's judgement) **NORMAL**

8. Routine Urine Examination Albumin - **Absent** Sugar - **Absent**

9. Routine Blood examination

#### HAEMOGRAM -

Blood Group - **B Positive** Hb % - **12.1**  
RBC - **4.13** TLC - **5400**  
Blood Sugar - **105** Platelets Count- **2.64 L/C**  
**DLC- P: 66 L: 29 E: 2 M: 3 B: 0**  
Sr. Cholesterol - **182** mg/dl S/Triglycerides - **166** mg/dl  
HDL - **48** mg/dl LDL - **100.** mg/dl

Dr. Pradip S. Mahajan  
M.B.B.S., M.S., A.F.I.H., D.U.  
Regd. No: 53389  
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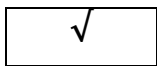


## Health Check-up Report

### Part 3- Certificate of Physical fitness

I hereby certify that **Mr. VISHNUDAS F. PAWAR**  
has been examined by us, we cannot discover that he / she has got any disease,  
communicable or otherwise, constitutional or bodily deformity except N.A. ....

Candidate is hereby declared,



**FIT**



**UNFIT**



**TEMPORARILY UNFIT**

#### for the post of

- 1) Working on Height - ✓
- 2) Electrical work - -
- 3) Material lifting - -
- 4) Four wheeler Driving - -

**Vertigo Test** - No Giddiness, No any other Abnormality seen during test.

**Doctor's full name** - Dr. Pradeep V. Mahajan

**Seal & Signature** -

**Registration number** - 53369

**Date of examination** 02.09.221

*Dr. Pradeep V. Mahajan*  
M.B.B.S., M.S., A.F.I.H., D.U.  
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**FOR MEDI-CHECK**  
Health Services Pvt. Ltd