



Arcofemi Healthcare Pvt Ltd

(Formerly known as Arcoferni Healthcare Ltd) F-701A, Lado Sarai, Mehrauli, New Delhi - 110030 Email: wellness@mediwheel.in, Website: www.mediwheel.in Tel: +91-11-41195959, Fax: +91-11-29523020 CIN: U24240DL2011PTC216307

MEDICAL FITNESS CERTIFICATE

(To be signed by a registered medical practitioner holding a Medical degree)

This is to certify that <u>Mr.</u> Prateek Agarwal aged, <u>35yrs.</u> Based on the examination, I certify that he is in good mental and physical health and it is free from any physical defects such as deafness, colour blindness, and any chronic or contagious diseases.

Place: Mohali

Date: 25/04/2024

Dr. Nitesh Kuma MBBS **BOMR** 47093

Name & Signature of

Medical officer



| Patient Name | : MR SITARAM AHIRWAR |
|--------------|----------------------|
| Age/Gender | : 31 Yrs/Male |
| Ref. Dr. | : Dr. APOLLO CLINIC |
| Center | : CMH OPD |

Registration Date : 04/11/2024 01:19 PM

Collection Date : 04/11/2024 01:21 PM **Report Date** : 05/11/2024 10:14 AM



HAEMATOLOGY REPORT

| Test Description | Result | Unit | Biological Reference Ranges |
|------------------|-------------|------|-----------------------------|
| BLOOD GROUP AND | ORH FACTOR | | |
| АВО Туре | 0 | | |
| Rh Factor | POSITIVE(+V | E) | |

BIOCHEMISTRY REPORT

| Test Description | Result | Unit | Biological Reference Ranges |
|---|--------|-------|-----------------------------|
| Post-Prandial Blood Sugar | 125.3 | mg/dl | 70 - 140 |
| Method : GOD-POD | | | |
| Interpretation:- | | | |
| Normal: 70-140 | | | |
| Impaired Glucose Tolerance:140-200 Diabetes mellitus: >= 200 | | | |
| (on more than one occassion) | | | |
| (, | | | |
| BILIRUBIN-SERUM | | | |
| Total Bilirubin-Serum | 0.79 | mg/dl | 0.2 - 1.2 |
| Direct Bilirubin-Serum | 0.16 | mg/dl | 0.0 - 0.3 |
| Indirect Bilirubin-Serum | 0.6 | mg/dl | 0.2 - 0.8 |
| Method : DIAZO | | | |
| | | | |





Dr. Sushil Kumar Sharma M.D (Pathology) **Consultant Pathologist** Reg. No.-MP-30165



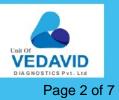
| | | Labor | atory Report | | |
|---|---|---|--|---|-------------------------|
| Patient Name Age/Gender Ref. Dr. | : MR SITARAM AHIF : 31 Yrs/Male : Dr. APOLLO CLINIC | WAR | | CPL24/32091 : 04/11/2024 01:19 PM : 04/11/2024 01:21 PM | |
| Center | : CMH OPD | | Report Date | : 05/11/2024 10:14 AM | |
| diagnosis and tre production of ure (1) diet or excess (2) reduced rena (3) nearly all type (4) mechanical o | ance: SUN) - Urea is the principle eatment of certain renal ar a due to sive destruction of cellular I perfusion resulting from es of kidney disease, and | nd metabolic d proteins as o dehydration o on such as is o | liseases. Increased BL ccurs in massive infect r heart failure, caused by stones, tum | ors, infection, or stricture. De | rom increased |
| Serum-Creatin | <u>nine</u> | 0.83 | mg/dL | 0.4 - 1.50 | |
| | of a creatinine test is to b eening, diagnosis, and/or | | | vs are working. A measureme | nt of creatinine can be |

Clinical Significance

Alanine Aminotransferase (ALT) (REFL) - Alanine Aminotransferase (ALT) measurements are particularly useful in the diagnosis and management of certain liver diseases, e.g., viral hepatitis and cirrhosis. ALT activity in tissue is generally much lower than aspartate aminotransferase (AST) activity and is found in highest concentrations in the liver. Significant elevations of ALT occur only in diseases of the liver. ALT is often measured in conjunction with AST to determine whether the source of the AST is the liver or the heart. ALT is normally not elevated in cases of myocardial infarction, i.e., a normal ALT, in conjunction with an elevated AST, tends to suggest cardiac disease. However, slight elevations of ALT may occur if an infarct destroys a very large volume of heart muscle.



Dr. Sushil Kumar Sharma M.D (Pathology) Consultant Pathologist Reg. No.-MP-30165





Laboratory Report

| Patient Name | : MR SITARAM AHIRWAR |
|--------------|----------------------|
| Age/Gender | : 31 Yrs/Male |
| Ref. Dr. | : Dr. APOLLO CLINIC |
| Center | : CMH OPD |

 Registration Date
 : 04/11/2024 01:19 PM

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 : 04/11/2024 01:21 PM

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 : 05/11/2024 10:14 AM



CLINICAL BIOCHEMISTRY REPORT

| | | - | |
|---------------------|--------|-------|--------------------------------|
| Test Description | Result | Unit | Biological Reference Ranges |
| Fasting Blood Sugar | 85.4 | mg/dl | Normal: 70-110 |
| Method: GOD-POD | | | Impaired Fasting Glucose(IFG): |

100-125

Diabetes mellitus: >= 126

Note:- An individual may show higher fasting glucose level in comparison to post prandial glucose level due to following reasons. The glycaemic index and response to food consumed, Changes in body composition, Increased insulin response and sensitivity, Alimentary hypoglycemia, Renal glycosuria, Effect of oral hypoglycaemics & Insulin treatment.





Dr. Sushil Kumar Sharma M.D (Pathology) Consultant Pathologist Reg. No.-MP-30165



Laboratory Report

LIDINE EVAMINATION DEDODT

| Patient Name | : MR SITARAM AHIRWAR | |
|--------------|----------------------|-------------|
| Age/Gender | : 31 Yrs/Male | Registratio |
| Ref. Dr. | : Dr. APOLLO CLINIC | Collection |
| Center | : CMH OPD | Report Dat |

CPL24/32091

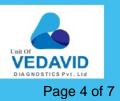
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| URINE EXAMINATION REPORT | | | | | |
|--------------------------|-------------|------|------------------------------------|--|--|
| Test Description | Result | Unit | Biological Reference Ranges | | |
| | | | | | |
| General Examination | | | | | |
| Colour | Pale Yellow | | Pale Yellow | | |
| Transparency (Apperance) | Clear | | Clear | | |
| Deposit | Absent | | Absent | | |
| Reaction (pH) | Acidic | | 5.0-8.5 | | |
| Specific Gravity | 1.025 | | -1.005-1.030 | | |
| Chemical Examination | | | | | |
| Urine Albumin | Absent | | Absent | | |
| Urine Ketones | Absent | | Absent | | |
| Urine Glucose | Absent | | Absent | | |
| Bile pigments | Absent | | Absent | | |
| Bile salts | NIL | | NIL | | |
| Urobilinogen | Normal | | Normal | | |
| Nitrite | Negative | | Negative | | |
| Microscopic Examination | | | | | |
| RBC's | NIL | /hpf | NIL | | |
| Leukocyte (Pus cells) | 2-4 | /hpf | 0-5/hpf | | |
| Epithelial Cells | 1-2 | /hpf | 0-4/hpf | | |
| Crystals | Absent | | Absent | | |
| Casts | Not Seen | | Not Seen | | |
| Amorphous deposits | Absent | | Absent | | |
| Bacteria | Not seen | | Not seen | | |
| Yeast Cells | Not seen | | Not seen | | |

Note: 1. Chemical examination through Dipstick includes test methods such as Protein (Protein Error Principle), Glucose (Glucose oxidase-Peroxidase), Ketone (Legals Test), Bilirubin (Azo- Diazo reaction), Urobilinogen (Diazonium ion Reaction) Nitrite (Griess Method).. 2. Pre-test conditions to be observed while submitting the sample- First void, mid-stream urine, collected in a clean, dry, sterile container is recommended for routine urine analysis, avoid contamination with any discharge from the vaginal, urethra, perineum, as applicable, avoid prolonged transit time & undue exposure to sunlight.







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| Laboratory | Report |
|------------|--------|
|------------|--------|

| Patient Name | : MR SITARAM AHIRWAR | | |
|--------------|----------------------|--|-------|
| Age/Gender | : 31 Yrs/Male | Registration Date : 04/11/2024 01:1 | 9 PM |
| Ref. Dr. | : Dr. APOLLO CLINIC | Collection Date : 04/11/2024 01:2 | 21 PM |
| Center | : CMH OPD | Report Date : 05/11/2024 10:1 | 4 AM |
| | | | |

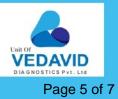
| Test Description | Result | Unit | Biological Reference Ranges |
|-----------------------------|--------|------------|------------------------------------|
| COMPLETE BLOOD COUNT | | | |
| Haemoglobin | 14.4 | gm/dL | 12.0 - 16.0 |
| RBC Count | 5.29 | mil/cu.mm | 4.00 - 5.50 |
| Hematocrit HCT | 44.4 | % | 40.0 - 54.0 |
| Mean Corp Volume MCV | 83.9 | fL | 80.0 - 100.0 |
| Mean Corp Hb MCH | 27.2 | pg | 27.0 - 34.0 |
| Mean Corp Hb Conc MCHC | 32.4 | gm/dL | 32.0 - 36.0 |
| Platelet Count | 2.21 | lac/cmm | 1.50 - 4.50 |
| Total WBC Count /TLC | 6.8 | 10^3/cu.mm | 4.0 - <mark>11.0</mark> |
| DIFFERENTIAL LEUCOCYTE COU | JNT | | |
| Neutrophils | 70 | % | 40 - 70 |
| Lymphocytes | 25 | % | 20 - 40 |
| Monocytes | 03 | % | 02 - 10 |
| Eosinophils | 02 | % | 01 - 06 |
| Basophils | 00 | % | 00 - 01 |
| Absolute Differential Count | | | |
| Absolute Neutrophils Count | 4.8 | thou/mm3 | 2.00 - 7.00 |
| Absolute Lymphocyte Count | 1.7 | thou/mm3 | 1.00 - 3.00 |
| Absolute Monocytes Count | 0.2 | thou/mm3 | 0.20 - 1.00 |
| Absolute Eosinophils Count | 0.1 | thou/mm3 | 0.02 - 0.50 |

EDTA Whole Blood - Tests done on Automated Three Part Cell Counter. (WBC, RBC Platelet count by impedance method, WBC differential by VCS technology other parameters calculated) All Abnormal Haemograms are reviewed confirmed microscopically.





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Laboratory Report

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| Test Description | Result | Unit | Biological Reference Ranges |
|---|--------|-------|-----------------------------|
| ESR - ERYTHROCYTE SEDIMENTATION RATE | 08 | mm/hr | 0 - 09 |

Method: Wintrobes

INTERPRETATION :

1. It indicates presence and intensity of an inflammatory process, never diagnostic of a specific disease. Changes are more significant than a single abnormal test.

2. It is a prognostic test and used to monitor the course or response to treatment of diseases like tuberculosis, bacterial endocarditis, acute rheumatic fever, rheumatoid arthritis, SLE, Hodgkins disease, temporal arteritis, polymyalgia rheumatica.

3. It is also increased in pregnancy, multiple myeloma, menstruation, and hypothyroidism.

**** End of the report****

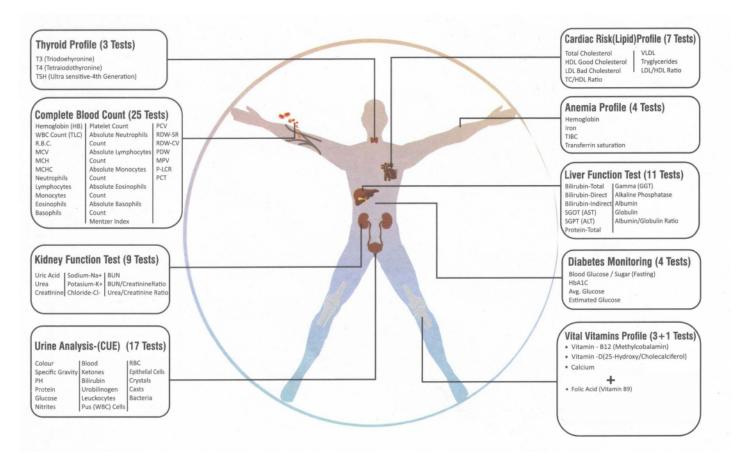
This report is not valid for medico legal aspects. This is just a professional opinion not the final. Kindly correlate clinically because of technical, lack of clinical information and physical findings, if any disparity noted please inform.





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BODY CARE



CONDITIONS OF REPORTING

- 1. Individual laboratory investigations should not be considered as conclusive and should be used along with other relevant clinical examinations to achieve the final diagnosis. Therefore these reported results are for the information of referring clinician only
- 2. The values of a laboratory investigation are dependent on the quality of the sample as well as the assay procedures used. Further all samples collected outside Citi Pathlabs labs / patient centers are required to be prepared, stored, labelled and brought as per the guidelines of Citi Pathlabs. Citi Pathlabs cannot be held liable for incorrect results of any samples which are not as per the guidelines issued
- 3. Electronic images in the report are created by electronic processing. Citi Pathlabs makes no expressed or implied warranties or representations with respect to it and takes no responsibility for the authenticity, quality and size of the image, affected possibly due to a computer virus or other contamination
- 4. Citi Pathlabs confirms that all tests have been carried out with reasonable care, clinical safety & technical integrity A. However due to certain factors such as reagent inconsistency, machine breakdown etc. beyond its control which could affect the testing, it does not make any representation or give any warranty about the accuracy of the reported results B. The test results are to be used for help in diagnosing / treating medical diseases & not for forensic applications. Hence these results cannot be used for medico legal purposes
- 5. Partial representation of report is not allowed.
- 6. All dispute / claims concerning to this report are subject to Bhopal jurisdiction only.

For Any Enquiry Citi Pathlabs Flat No. 004, Shivaay South City Complex, Phase-2, G-3 Gulmohar Colony, Bhopal (M.P.) citipathlabs@gmailcom 9454786340, 9407658222

MER- MEDICAL EXAMINATION REPORT

| Date of Examination | 04-11-2024 | | |
|---|--|--|--|
| NAME | STARAM AHIRWAR | | |
| AGE | 31 Gender M WEIGHT (kg) 78.9 | | |
| HEIGHT(cm) | 178 WEIGHT (-0) | | |
| B.P. | 130/80 | | |
| ECG | WNL | | |
| X Ray | Normal | | |
| /ision Checkup | <u>Color Vision :</u> Narmal <u>Far Vision Ratio</u> : NO | | |
| | Near Vision Ratio : ん | | |
| resent Ailments | No Any Prosent Ailment's. | | |
| etails of Past ailments (If Any) | No Any Present Ailment's. No Any Post Ailment's. He is Physically fit. | | |
| omments / Advice : She / He is Physically Fit | He is Physically fit. | | |

Dr. Sabyasachi Gupta MBBS (Gold Medalist) No (Med.) RPGP (UK) Reg No .: 11671

Signature with Stamp of Medical Examiner



CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

| ter reviewing the medical history and on at he/she is | Tic | k |
|--|--|---|
| Medically Fit | | _ |
| • Fit with restrictions/recommendation | ons | |
| Though following restrictions have not impediments to the job. | been revealed, in my opinion, these are | |
| 1 | | |
| 2 | | |
| 3 | | X |
| However the employee should foll been communicated to him/her. | ow the advice/medication that has | |
| Review after | | |
| Currently Unfit. | recommended | |
| Review after | | |
| Unfit | Dr. Sabyasachi Gunta | |
| | MBBS (Gold Medalist) MD (Med.) RPGP (UK) | |
| | Dr. <u>Reg No.: 11671</u> Medical Officer | |

The Apollo Clinic, (Location)

This certificate is not meant for medico-legal purposes





SPECIALITY HOSPITAL MIG -215 216, Gautam Nagar, Govindpura, Bhopal-462023 (M.P.) Phone No. : 0755 - 4250134 Mobile No. : 7771008660,8319214664, 9303135719



| Patient Name : | MR. SITARAM AHIRWAR | Age /sex : | 31 Y/M |
|----------------|---------------------|------------|------------|
| | | | 04.11.2024 |
| Referred .By: | INS | Date | 04.11.2024 |

X-RAY CHEST PA VIEW

- Bilateral Lungs Fields Appear Clear .
- Bilateral Hilar Shadows Appear Clear .
- Bilateral CP Angels Appear Clear .
- Both The Domes of Diaphragm Appear normal in Shape and position
- Visualized bony cage and soft tissue appear normal.

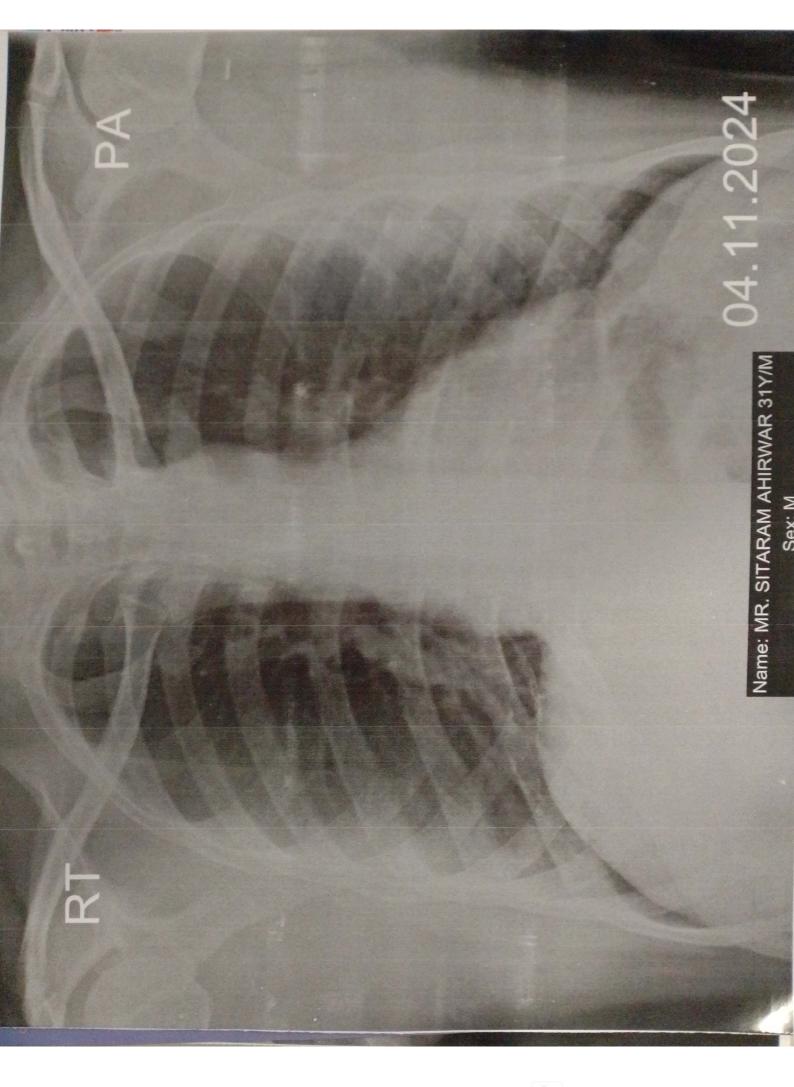
IMPRESSION

NO Significant Abnormality Seen.

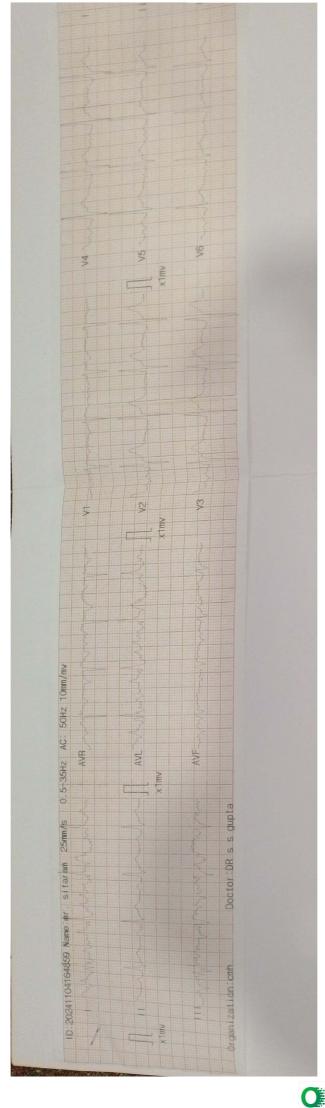
Dr. DADHANIA PRINALBEN MD RADIODIAGNOSIS CONSULTANT RADIOLOGIST

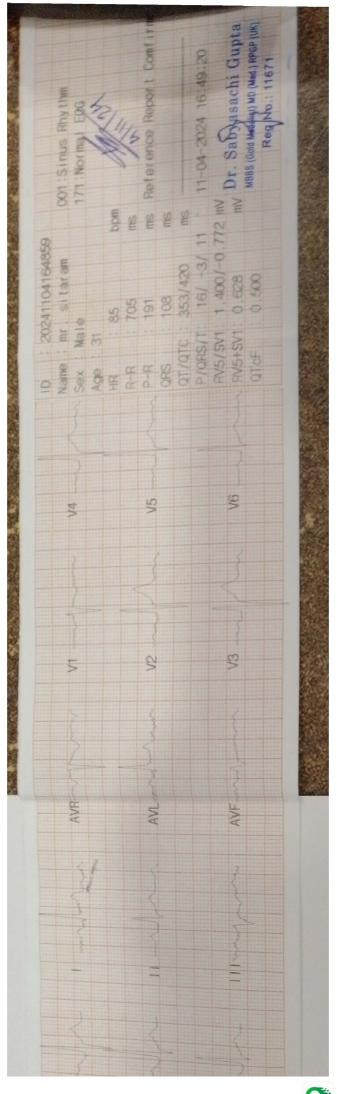
mpanelled with : State Government, M.P.Police, ESIC, HPCL, Punjab National Bank, Indian Bank Food Corporation of India, Ayushman Bharat







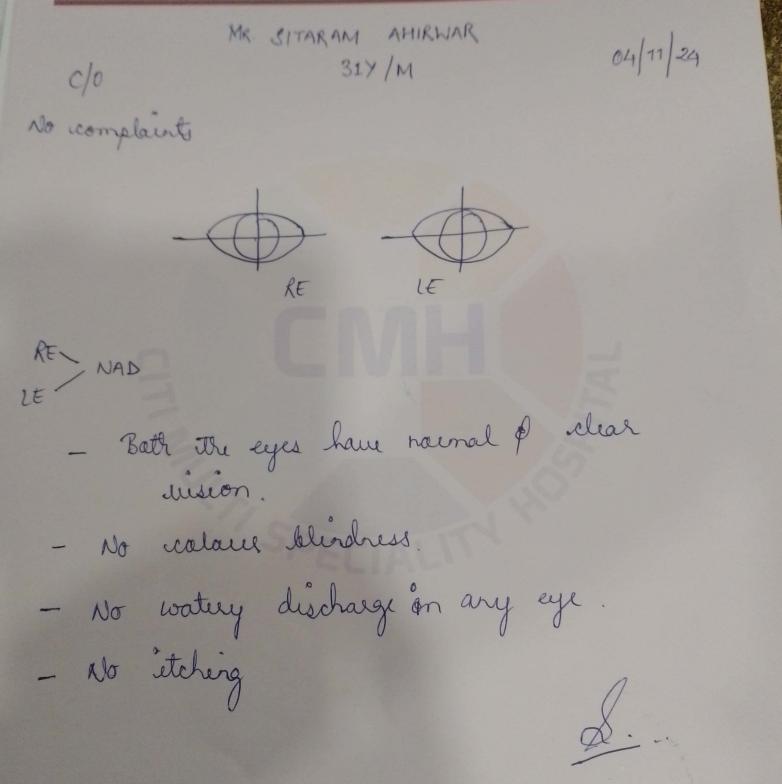






SPITAL MULTI SPECIAL





impanelled with : State Government, M.P.Police, ESIC, HPCL, Punjab National Bank, Indian Bank Food Corporation of India, Ayushman Bharat





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👰 GPS Map Camera