

MEDICAL EXAMINATION REPORT

Name Gender Date of Birth
 Position Selected For Identification marks

A. HISTORY:

1. Do you have, or are you being treated for, any of the following conditions? (please tick all that apply)?

- | | | |
|---|--|---|
| <input type="checkbox"/> Anxiety | <input type="checkbox"/> Cancer | <input type="checkbox"/> High Blood Pressure |
| <input type="checkbox"/> Arthritis | <input type="checkbox"/> Depression/ bipolar disorder | <input type="checkbox"/> High Cholesterol |
| <input type="checkbox"/> Asthama, Bronchitis, Emphysema | <input type="checkbox"/> Diabetes | <input type="checkbox"/> Migraine Headaches |
| <input type="checkbox"/> Back or spinal problems | <input type="checkbox"/> Heart Disease | <input type="checkbox"/> Sinusitis or Allergic Rhinitis (Hay Fever) |
| <input type="checkbox"/> Epilepsy | <input type="checkbox"/> Any other serious problem for which you are receiving medical attention | |

2. List the medications taken Regularly.

3. List allergies to any known medications or chemicals

4. Alcohol : Yes No Occasional

5. Smoking : Yes No Quit(more than 3 years)

6. Respiratory Function :

- a. Do you become unusually short of breath while walking fast or taking stair - case? Yes No
- b. Do you usually cough a lot first thing in morning? Yes No
- c. Have you vomited or coughed out blood? Yes No

7. Cardiovascular Function & Physical Activity :

- a. Exercise Type: (Select 1)
- No Activity
 - Very Light Activity (Seated At Desk, Standing)
 - Light Activity (Walking on level surface, house cleaning)
 - Moderate Activity (Brisk walking, dancing, weeding)
 - Vigorous Activity (Soccer, Running)
- b. Exercise Frequency: Regular (less than 3 days/ week) / Irregular (more than 3 days/ Week)
- c. Do you feel pain in chest when engaging in physical activity? Yes No

8. Hearing :

- a. Do you have history of hearing troubles? Yes No
- b. Do you experiences ringing in your ears? Yes No
- c. Do you experience discharge from your ears? Yes No
- d. Have you ever been diagnosed with industrial deafness? Yes No

9. Musculo - Skeletal History

- | | | | |
|-----------------------------------|--|------------------------------|--|
| a. Neck : | Have you ever injured or experienced pain? | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| b. Back : | If Yes ; approximate date (MM/YYYY) | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| c. Shoulder, Elbow, Wrists, Hands | Consulted a medical professional ? | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| d. Hips, Knees, Ankles, Legs | Resulted in time of work? | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| | Surgery Required ? | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| | Ongoing Problems ? | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |

10. Function History

- a. Do you have pain or discomfort when lifting or handling heavy objects? Yes No
- b. Do you have knee pain when squatting or kneeling? Yes No
- c. Do you have back pain when forwarding or twisting? Yes No
- d. Do you have pain or difficulty when lifting objects above your shoulder height? Yes No
- e. Do you have pain when doing any of the following for prolonged periods (Please circle appropriate response)
 - Walking : Yes No
 - Kneeling : Yes No
 - Squatting : Yes No
 - Climbing : Yes No
 - Sitting : Yes No
 - Bending : Yes No
 - Standing : Yes No
- f. Do you have pain when working with hand tools? Yes No
- g. Do you experience any difficulty operating machinery? Yes No
- h. Do you have difficulty operating computer instrument? Yes No

B. CLINICAL EXAMINATION

a. Height b. Weight Blood Pressure
 Chest measurements: a. Normal b. Expanded
 Waist Circumference Ear, Nose & Throat
 Skin Respiratory System
 Vision Nervous System
 Circulatory System Genito-urinary System
 Gastro-intestinal System Colour Vision

Discuss Particulars of Section B :-

C. REMARKS OF PATHOLOGICAL TESTS

Chest X-ray	<input type="text" value="-"/>	ECG	<input type="text" value="-"/>
Complete Blood Count	<input type="text" value="-"/>	Urine routine	<input type="text" value="-"/>
Serum cholesterol	<input type="text" value="-"/>	Blood sugar	<input type="text" value="-"/>
Blood Group	<input type="text" value="-"/>	S.Creatinine	<input type="text" value="-"/>

D. CONCLUSION

Any further investigations required

Any precautions suggested

E. FITNESS CERTIFICATION

Certified that the above named recruit does not appear to be suffering from any disease communicable or otherwise, constitutional weakness or bodily infirmity except _____
 _____ . I do not consider this as disqualification for employment in the Company. S

Candidate is free from Contagious/Communicable disease

Date : 30-11-21

[Handwritten signature]

[Handwritten signature]
 Signature of Medical Adviser
SRANDAN M. D. (Cardio)
 Professor of Cardiology
 TIRUNELVELI MEDICAL COLLEGE HOSPITAL
 TIRUNELVELI
 Reg No : 61785

Eye Examination Report

Candidate Name: Mr. Senthil Nathan.

Age/ Gender: 31y / M

Date: 30-11-21

This is to certify that I have examined Mr. /Ms: Senthil Nathan hereby, his/her visual standards are as follows :

Without Glasses		With Glasses		Color Vision (Normal/Defective)
R	L	R	L	
				<u>Normal</u>

Doctor Signature:

Doctor Stamp

Dr. S. MANIKANDAN M.D.D.M., (Cardio)
Asst. Professor of Cardiology
TIRUNELVELI MEDICAL COLLEGE & HOSPITAL
TIRUNELVELI.
Reg No : 61785



भारत सरकार
GOVERNMENT OF INDIA



செந்தில் நாதன் முத்துமணிக்கம்
Senthil Nathan Muthumanickam
பிறந்த நாள் / DOB : 06/05/1990
ஆண் / MALE



7625 1780 1737

ஆதார் - சாதாரண மனிதனின் அதிகாரம்



MEDALL

Name : Mr. SENTHIL NATHAN M
 PID No. : MED120519641
 SID No. : 621039079
 Age / Sex : 31 Year(s) / Male
 Ref. Dr : MediWheel

Register On : 30/11/2021 9:16 AM
 Collection On : 30/11/2021 10:02 AM
 Report On : 30/11/2021 2:43 PM
 Printed On : 02/12/2021 1:07 PM
 Type : OP

Investigation

IMMUNOHAEMATOLOGY

Investigation	Observed Value	Unit	Biological Reference Interval
BLOOD GROUPING AND Rh TYPING (Blood /Agglutination)	'B' 'Positive'		

HAEMATOLOGY

Complete Blood Count With - ESR

Investigation	Observed Value	Unit	Biological Reference Interval
Haemoglobin (Blood/Spectrophotometry)	15.64	g/dL	13.5 - 18.0
Packed Cell Volume(PCV)/Haematocrit (Blood/Derived from Impedance)	47.64	%	42 - 52
RBC Count (Blood/Impedance Variation)	05.47	mill/cu.mm	4.7 - 6.0
Mean Corpuscular Volume(MCV) (Blood/ Derived from Impedance)	87.07	fL	78 - 100
Mean Corpuscular Haemoglobin(MCH) (Blood/Derived from Impedance)	28.59	pg	27 - 32
Mean Corpuscular Haemoglobin concentration(MCHC) (Blood/Derived from Impedance)	32.84	g/dL	32 - 36
RDW-CV(Derived from Impedance)	14.4	%	11.5 - 16.0
RDW-SD(Derived from Impedance)	43.88	fL	39 - 46
Total Leukocyte Count (TC) (Blood/ Impedance Variation)	7590	cells/cu.mm	4000 - 11000
Neutrophils (Blood/Impedance Variation & Flow Cytometry)	40.50	%	40 - 75
Lymphocytes (Blood/Impedance Variation & Flow Cytometry)	48.50	%	20 - 45
Eosinophils (Blood/Impedance Variation & Flow Cytometry)	05.80	%	01 - 06
Monocytes (Blood/Impedance Variation & Flow Cytometry)	04.80	%	02 - 08
Basophils (Blood/Impedance Variation & Flow Cytometry)	00.40	%	00 - 01

INTERPRETATION: Tests done on Automated Five Part cell counter. All abnormal results are reviewed and confirmed microscopically.

Absolute Neutrophil count (Blood/ Impedance Variation & Flow Cytometry)	3.07	10 ³ / µl	1.5 - 6.6
Absolute Lymphocyte Count (Blood/ Impedance Variation & Flow Cytometry)	3.68	10 ³ / µl	1.5 - 3.5
Absolute Eosinophil Count (AEC) (Blood/ Impedance Variation & Flow Cytometry)	0.44	10 ³ / µl	0.04 - 0.44
Absolute Monocyte Count (Blood/ Impedance Variation & Flow Cytometry)	0.36	10 ³ / µl	< 1.0

B. Supraja
 DR SUPRAJA B MD
 Consultant Pathologist
 Reg NO : 95961

The results pertain to sample tested.

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Absolute Basophil count (Blood/Impedance Variation & Flow Cytometry)	0.03	10 ³ / μ l	< 0.2
Platelet Count (Blood/Impedance Variation)	295	10 ³ / μ l	150 - 450
MPV (Blood/Derived from Impedance)	07.81	fL	7.9 - 13.7
PCT(Automated Blood cell Counter)	0.23	%	0.18 - 0.28
ESR (Erythrocyte Sedimentation Rate) (Blood/Automated ESR analyser)	10	mm/hr	< 15

BIOCHEMISTRY

BUN / Creatinine Ratio	10.26		
Glucose Fasting (FBS) (Plasma - F/GOD-PAP)	88.4	mg/dL	Normal: < 100 Pre Diabetic: 100 - 125 Diabetic: >= 126

INTERPRETATION: Factors such as type, quantity and time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level.

Glucose, Fasting (Urine) (Urine - F)	Negative	Negative
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Glucose Postprandial (PPBS) (Plasma - PP/ GOD-PAP)	127.0	mg/dL	70 - 140
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INTERPRETATION:

Factors such as type, quantity and time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level. Fasting blood glucose level may be higher than Postprandial glucose, because of physiological surge in Postprandial Insulin secretion, Insulin resistance, Exercise or Stress, Dawn Phenomenon, Somogyi Phenomenon, Anti-diabetic medication during treatment for Diabetes.

Blood Urea Nitrogen (BUN) (Serum/Urease UV / derived)	9.44	mg/dL	7.0 - 21
Creatinine (Serum/Modified Jaffe)	0.92	mg/dL	0.9 - 1.3
Uric Acid (Serum/Enzymatic)	4.9	mg/dL	3.5 - 7.2

Liver Function Test

Bilirubin(Total) (Serum)	0.30	mg/dL	0.1 - 1.2
Bilirubin(Direct) (Serum/Diazotized Sulfanilic Acid)	0.17	mg/dL	0.0 - 0.3
Bilirubin(Indirect) (Serum/Derived)	0.13	mg/dL	0.1 - 1.0
SGOT/AST (Aspartate Aminotransferase) (Serum/Modified IFCC)	10.7	U/L	5 - 40
SGPT/ALT (Alanine Aminotransferase) (Serum)	8.9	U/L	5 - 41
GGT(Gamma Glutamyl Transpeptidase) (Serum/IFCC / Kinetic)	13.9	U/L	< 55
Alkaline Phosphatase (SAP) (Serum/ Modified IFCC)	69.6	U/L	53 - 128
Total Protein (Serum/Biuret)	7.20	gm/dl	6.0 - 8.0

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Investigation	Observed Value	Unit	Biological Reference Interval
Albumin (Serum/Bromocresol green)	4.70	gm/dl	3.5 - 5.2
Globulin (Serum/Derived)	2.50	gm/dL	2.3 - 3.6
A : G RATIO (Serum/Derived)	1.88		1.1 - 2.2
Lipid Profile			
Cholesterol Total (Serum/CHOD-PAP with ATCS)	211.0	mg/dL	Optimal: < 200 Borderline: 200 - 239 High Risk: >= 240
Triglycerides (Serum/GPO-PAP with ATCS)	111.5	mg/dL	Optimal: < 150 Borderline: 150 - 199 High: 200 - 499 Very High: >= 500

INTERPRETATION: The reference ranges are based on fasting condition. Triglyceride levels change drastically in response to food, increasing as much as 5 to 10 times the fasting levels, just a few hours after eating. Fasting triglyceride levels show considerable diurnal variation too. There is evidence recommending triglycerides estimation in non-fasting condition for evaluating the risk of heart disease and screening for metabolic syndrome, as non-fasting sample is more representative of the "usual" circulating level of triglycerides during most part of the day.

HDL Cholesterol (Serum/Immuno-inhibition)	44.7	mg/dL	Optimal(Negative Risk Factor): >= 60 Borderline: 40 - 59 High Risk: < 40
LDL Cholesterol (Serum/Calculated)	144	mg/dL	Optimal: < 100 Above Optimal: 100 - 129 Borderline: 130 - 159 High: 160 - 189 Very High: >= 190
VLDL Cholesterol (Serum/Calculated)	22.3	mg/dL	< 30
Non HDL Cholesterol (Serum/Calculated)	166.3	mg/dL	Optimal: < 130 Above Optimal: 130 - 159 Borderline High: 160 - 189 High: 190 - 219 Very High: >= 220

INTERPRETATION: 1.Non-HDL Cholesterol is now proven to be a better cardiovascular risk marker than LDL Cholesterol. 2.It is the sum of all potentially atherogenic proteins including LDL, IDL, VLDL and chylomicrons and it is the "new bad cholesterol" and is a co-primary target for cholesterol lowering therapy.

Total Cholesterol/HDL Cholesterol Ratio (Serum/Calculated)	4.7		Optimal: < 3.3 Low Risk: 3.4 - 4.4 Average Risk: 4.5 - 7.1 Moderate Risk: 7.2 - 11.0 High Risk: > 11.0
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Investigation	Observed Value	Unit	Biological Reference Interval
Triglyceride/HDL Cholesterol Ratio (TG/HDL) (Serum/Calculated)	2.5		Optimal: < 2.5 Mild to moderate risk: 2.5 - 5.0 High Risk: > 5.0
LDL/HDL Cholesterol Ratio (Serum/Calculated)	3.2		Optimal: 0.5 - 3.0 Borderline: 3.1 - 6.0 High Risk: > 6.0
<u>Glycosylated Haemoglobin (HbA1c)</u>			
HbA1C (Whole Blood/Ion exchange HPLC by D10)	5.3	%	Normal: 4.5 - 5.6 Prediabetes: 5.7 - 6.4 Diabetic: >= 6.5

INTERPRETATION: If Diabetes - Good control : 6.1 - 7.0 % , Fair control : 7.1 - 8.0 % , Poor control >= 8.1 %

Estimated Average Glucose (Whole Blood) 105.41 mg/dL

INTERPRETATION: Comments

HbA1c provides an index of Average Blood Glucose levels over the past 8 - 12 weeks and is a much better indicator of long term glycemic control as compared to blood and urinary glucose determinations.

Conditions that prolong RBC life span like Iron deficiency anemia, Vitamin B12 & Folate deficiency, hypertriglyceridemia, hyperbilirubinemia, Drugs, Alcohol, Lead Poisoning, Asplenia can give falsely elevated HbA1C values.

Conditions that shorten RBC survival like acute or chronic blood loss, hemolytic anemia, Hemoglobinopathies, Splenomegaly, Vitamin E ingestion, Pregnancy, End stage Renal disease can cause falsely low HbA1c.

IMMUNOASSAY

THYROID PROFILE / TFT

T3 (Triiodothyronine) - Total (Serum/Chemiluminescent Immunometric Assay (CLIA))	1.19	ng/ml	0.7 - 2.04
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INTERPRETATION:

Comment :

Total T3 variation can be seen in other condition like pregnancy, drugs, nephrosis etc. In such cases, Free T3 is recommended as it is Metabolically active.

T4 (Tyroxine) - Total (Serum/Chemiluminescent Immunometric Assay (CLIA))	9.44	µg/dl	4.2 - 12.0
--	------	-------	------------

INTERPRETATION:

Comment :

Total T4 variation can be seen in other condition like pregnancy, drugs, nephrosis etc. In such cases, Free T4 is recommended as it is Metabolically active.

TSH (Thyroid Stimulating Hormone) (Serum /Chemiluminescent Immunometric Assay (CLIA))	1.98	µIU/mL	0.35 - 5.50
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Investigation	Observed Value	Unit	Biological Reference Interval
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INTERPRETATION:

Reference range for cord blood - upto 20

1 st trimester: 0.1-2.5

2 nd trimester: 0.2-3.0

3 rd trimester: 0.3-3.0

(Indian Thyroid Society Guidelines)

Comment :

1.TSH reference range during pregnancy depends on Iodine intake, TPO status, Serum HCG concentration, race, Ethnicity and BMI.

2.TSH Levels are subject to circadian variation, reaching peak levels between 2-4am and at a minimum between 6-10PM.The variation can be of the order of 50%,hence time of the day has influence on the measured serum TSH concentrations.

3.Values < 0.03 µIU/mL need to be clinically correlated due to presence of rare TSH variant in some individuals.

CLINICAL PATHOLOGY

Urine Analysis - Routine

Colour (Urine)	PALE YELLOW		Yellow to Amber
Appearance (Urine)	CLEAR		Clear
Protein (Urine)	Negative		Negative
Glucose (Urine)	Negative		Negative
Pus Cells (Urine)	2 - 3	/hpf	NIL
Epithelial Cells (Urine)	1 - 2	/hpf	NIL
RBCs (Urine)	NIL	/hpf	NIL

-- End of Report --

B. Supraja
 DR SUPRAJA .B MD
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Age & Gender	31Y/MALE	Visit Date	30/11/2021
Ref Doctor	MediWheel		

Thanks for your reference

**REAL - TIME 2D & 4D ULTRASOUND DONE WITH VOLUSON 730 EXPERT .
SONOGRAM REPORT**

WHOLE ABDOMEN

Liver: The liver is normal in size, measures 12.2 cm and shows **increased echogenicity** with no focal abnormality. There is no intra or extra hepatic biliary ductal dilatation. Portal vein shows normal flow and measures 8 mm

Gallbladder: The gall bladder is normal sized and smooth walled and contains no calculus

Pancreas: The pancreas shows a normal configuration and echotexture
The pancreatic duct is normal

Spleen: Normal, measures 7.1 cm. No focal lesions

Right Kidney:

Size: Normal, measures 10.1 x 4.0 cm (Length x AP)

Echogenicity: Normal

Cortico-medullary differentiation: maintained

No hydronephrosis/ calculi

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Age & Gender	31Y/MALE	Visit Date	30/11/2021
Ref Doctor	MediWheel		

Left Kidney:

Size: Normal, measures 9.8 x 4.1cm (Length x AP)

Echogenicity: Normal

Cortico-medullary differentiation: maintained

No hydronephrosis/ calculi

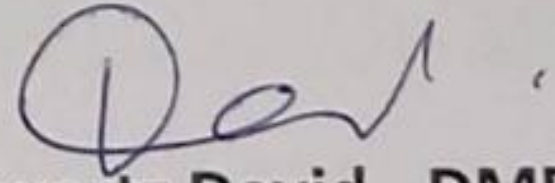
Urinary bladder: The urinary bladder is smooth walled and uniformly transonic
There is no intravesical mass or calculus

Prostate: The prostate measures 2.4 x 2.7 x 2.6cm and is normal sized, volume 8.9 cc
The echotexture is homogeneous

RIF: Iliac fossae are normal
No mass or fluid collection is seen in the right iliac fossa
The appendix is not visualized
There is no free or loculated peritoneal fluid
No para aortic lymphadenopathy is seen

IMPRESSION :

- **Grade I fatty liver**



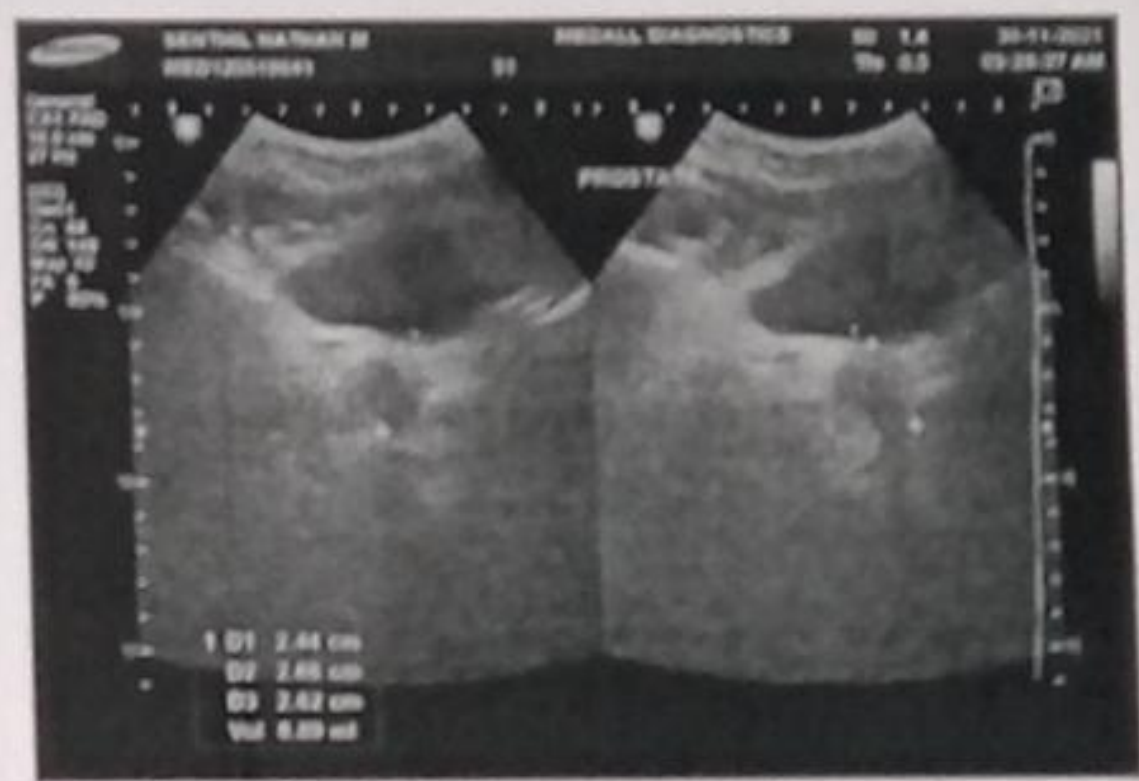
**Dr. Daniel Schwartz David., DMRD,
Consultant Radiologist**

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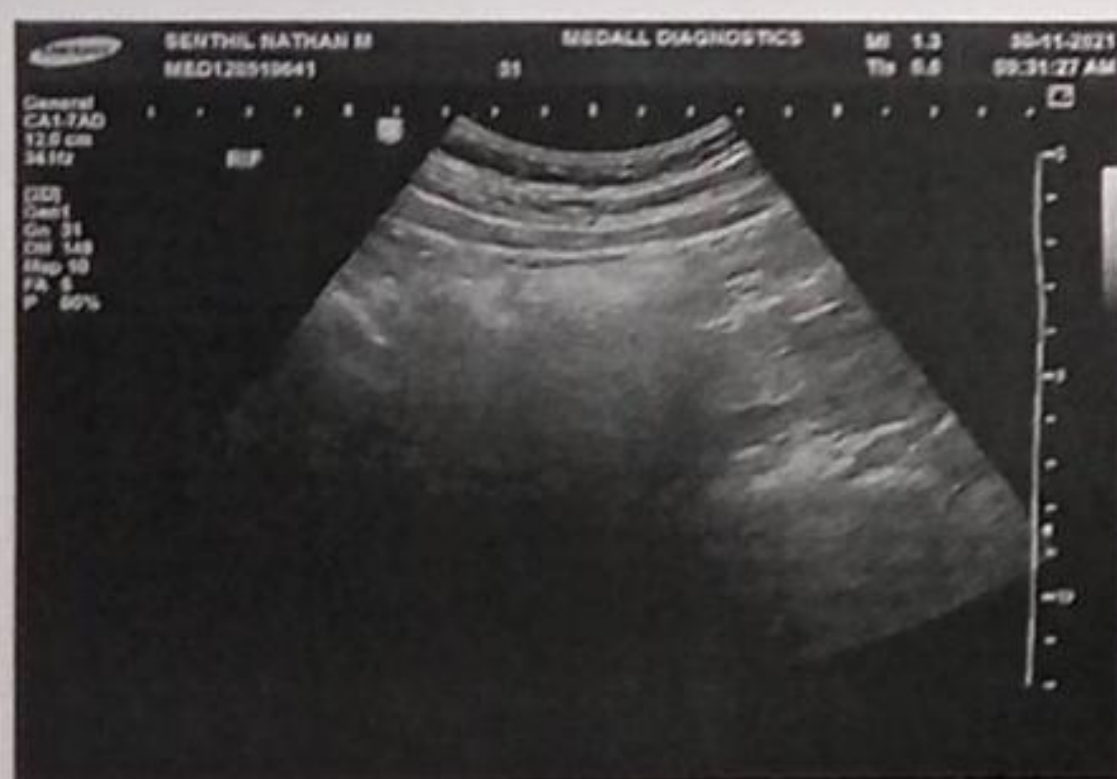
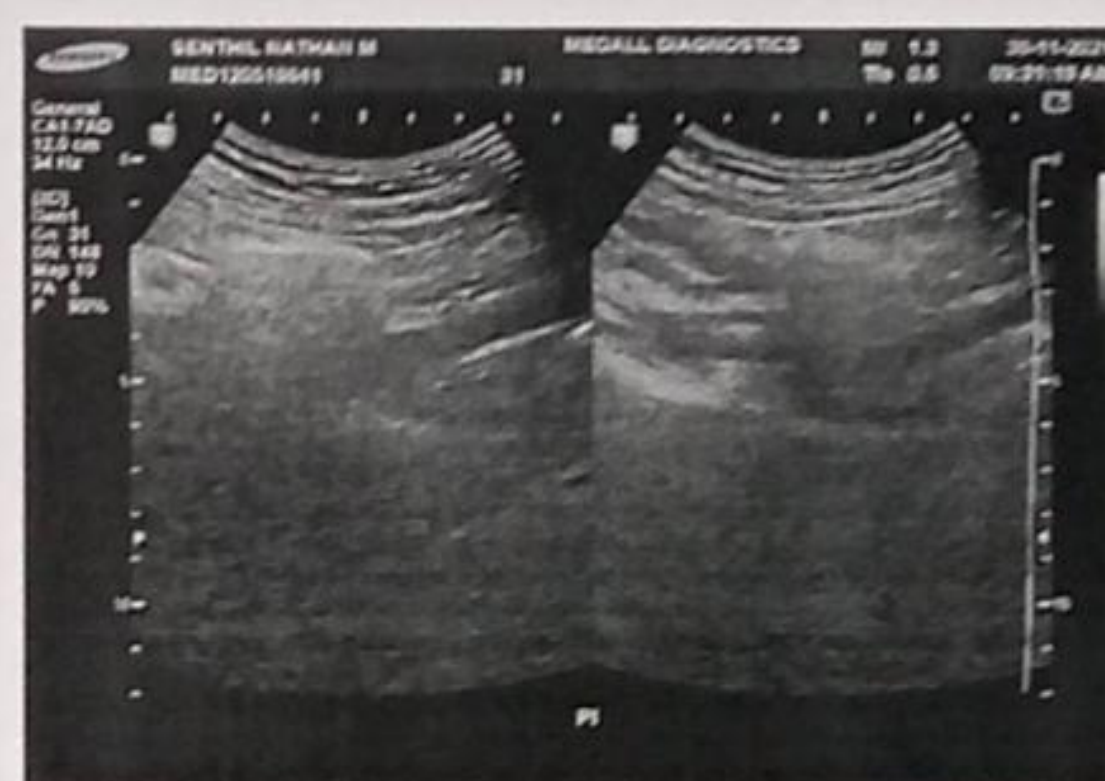
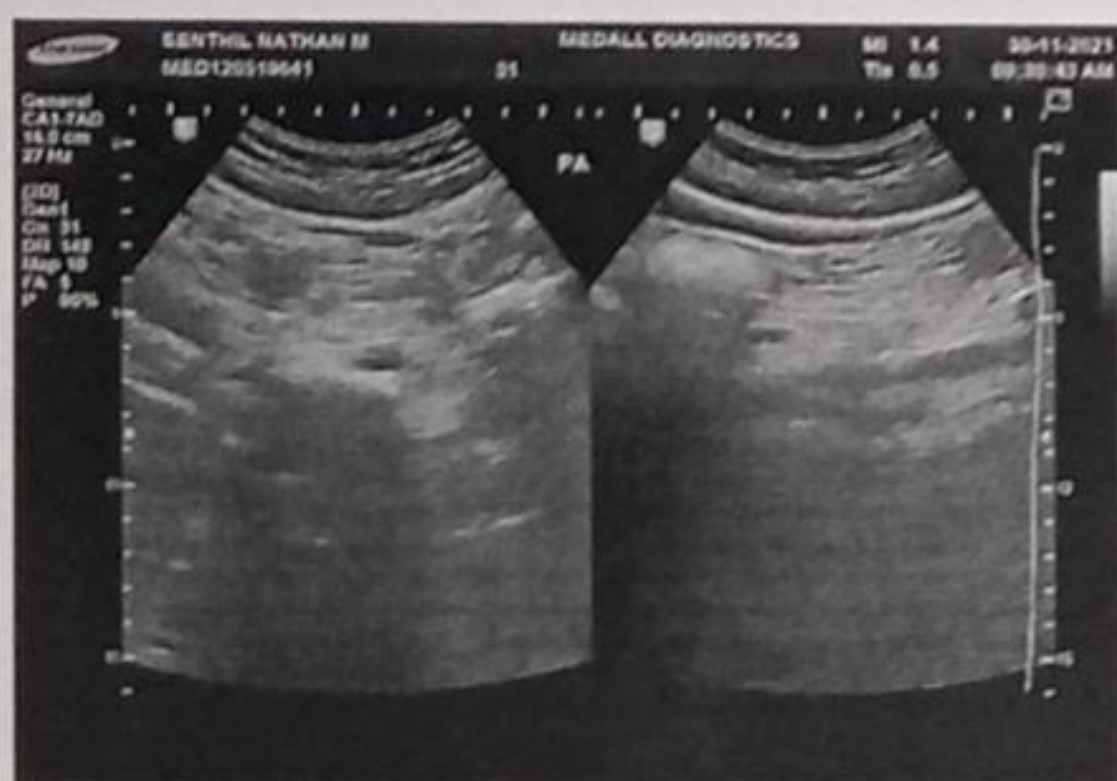
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MEDALL

Medall Healthcare Pvt Ltd 10/5, HARSHA COMPLEX,
NORTH BYE PASS ROAD, Vannarapetai, Tirunelveli-627003

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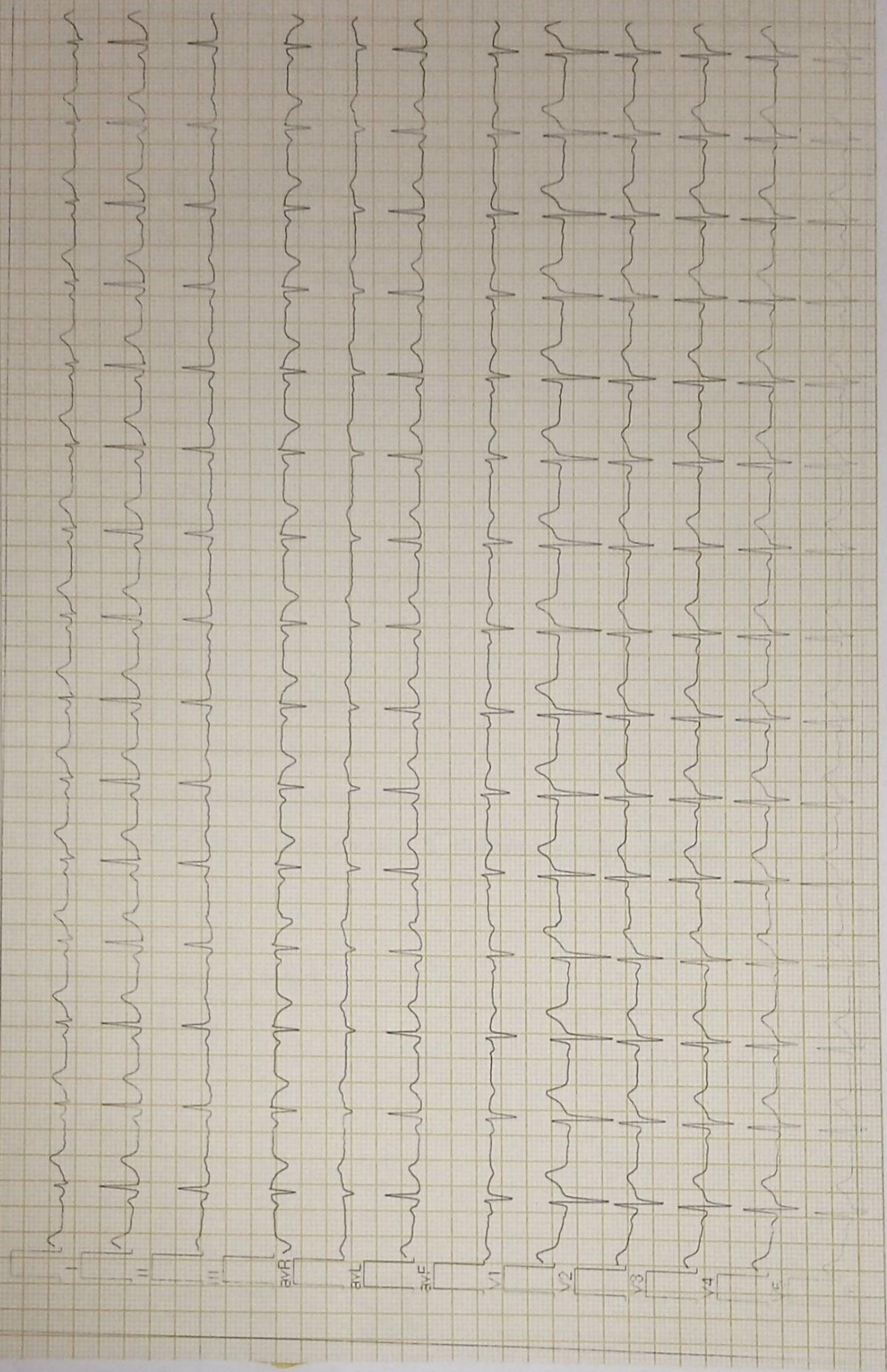
RMS Advance Testing Lab

1204922366/Senthil Nathan 31Yrs/Male 67 Kgs/155 Cms BP: / /

Ref: MEDI WHELL Test Date: 30-Nov-2021(10:16:52) Notch: 50Hz 0.05Hz 35Hz 10mm/mV 25mm/Sec

HR: 90 bpm

PR Interval: 126 ms
QRS Duration: 100 ms
QT/QTc: 324/399ms
P-QRS-T Axis: 59 - 82 - 39 (Deg)



Customer Name	MR.SENTHIL NATHAN M	Customer ID	MED120519641
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Thanks for your reference

ECHOCARDIOGRAM WITH COLOUR DOPPLER:

LVID d ... 4.6cm
 LVID s ... 2.6cm
 EF ... 75%
 IVS d ...0.6cm
 IVS s ... 0.8cm
 LVPW d ... 0.5cm
 LVPW s ... 1.3cm
 LA ... 2.7cm
 AO ... 2.7cm
 TAPSE ... 20mm
 IVC ... 0.7cm

Left ventricle , Left atrium normal.

Right ventricle, Right atrium normal.

No regional wall motion abnormality present.

Mitral valve, Aortic valve, Tricuspid valve & Pulmonary valve normal.

Aorta normal.

Inter atrial septum intact.

Inter ventricular septum intact.

No pericardial effusion .

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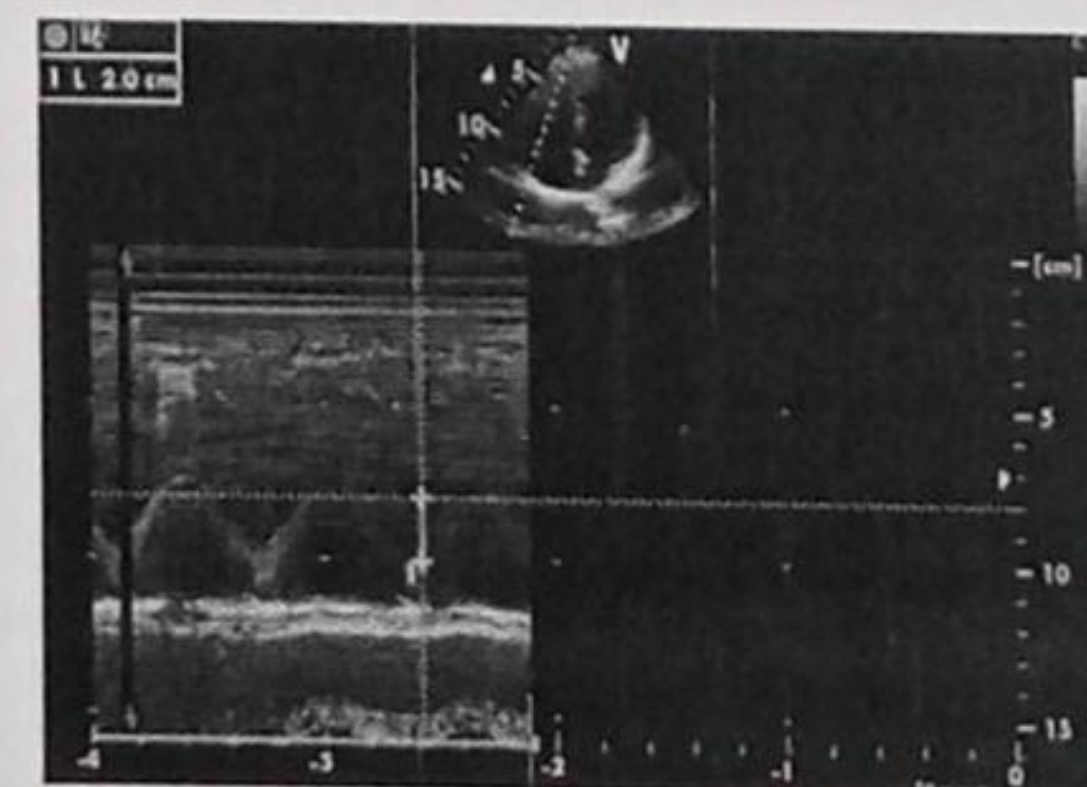
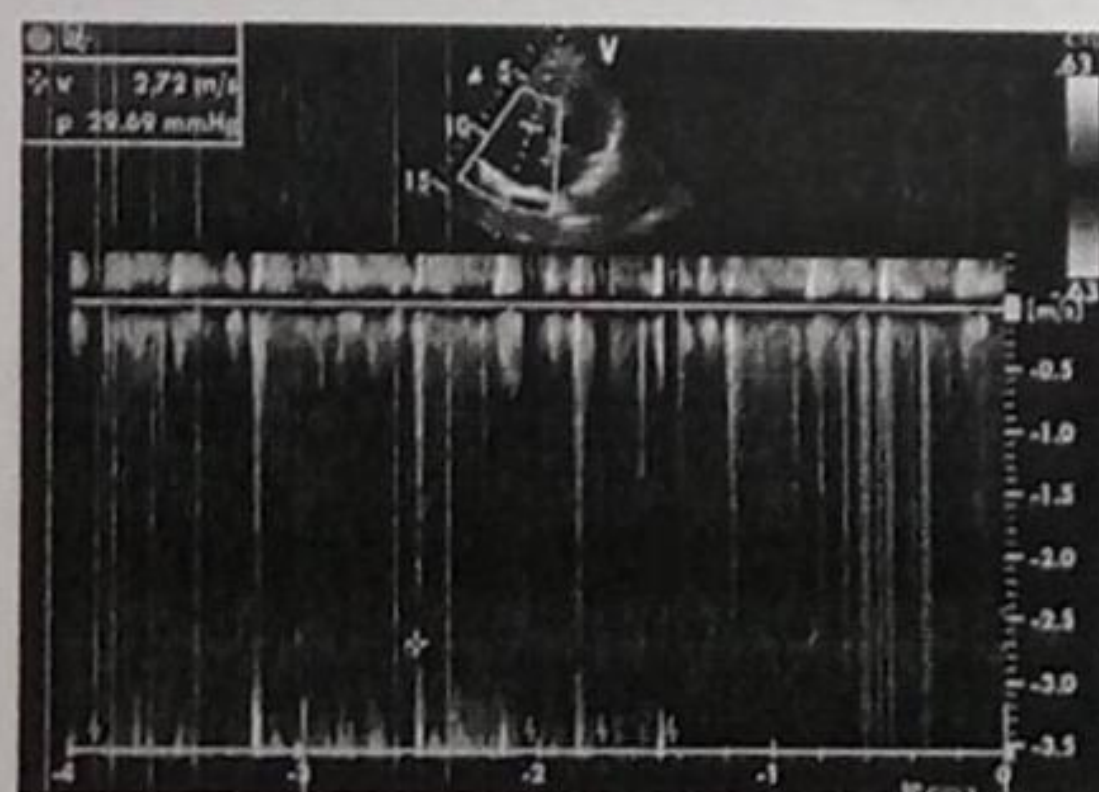
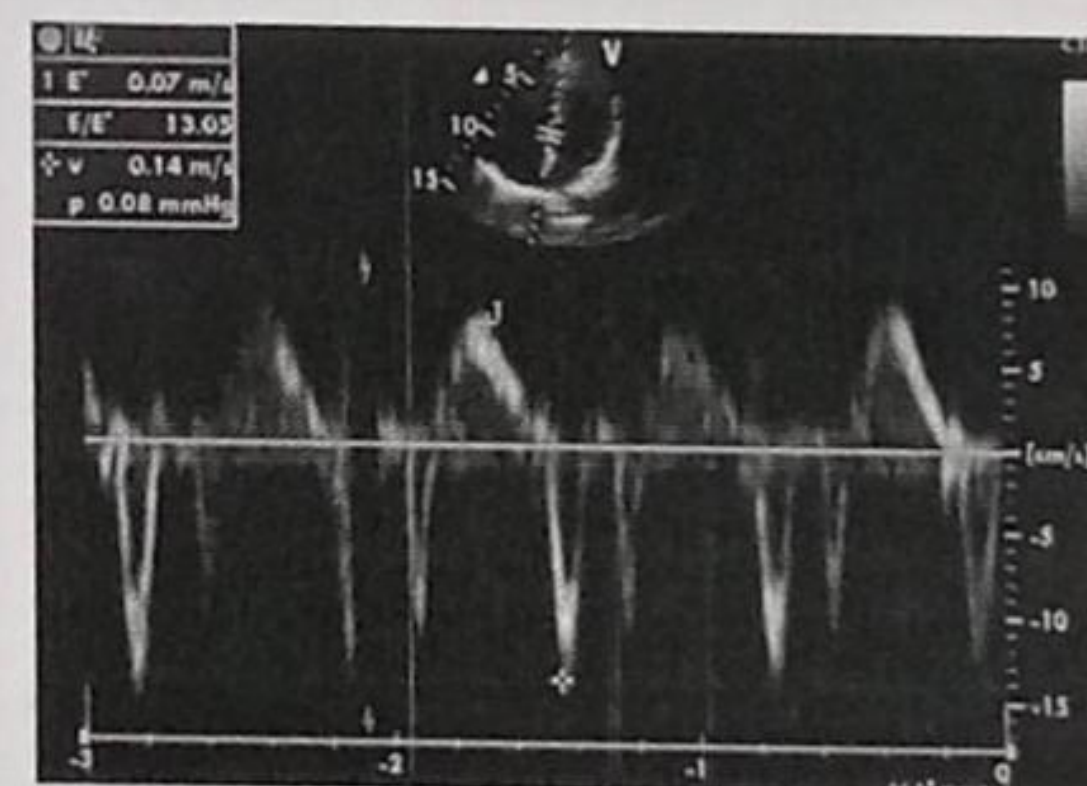
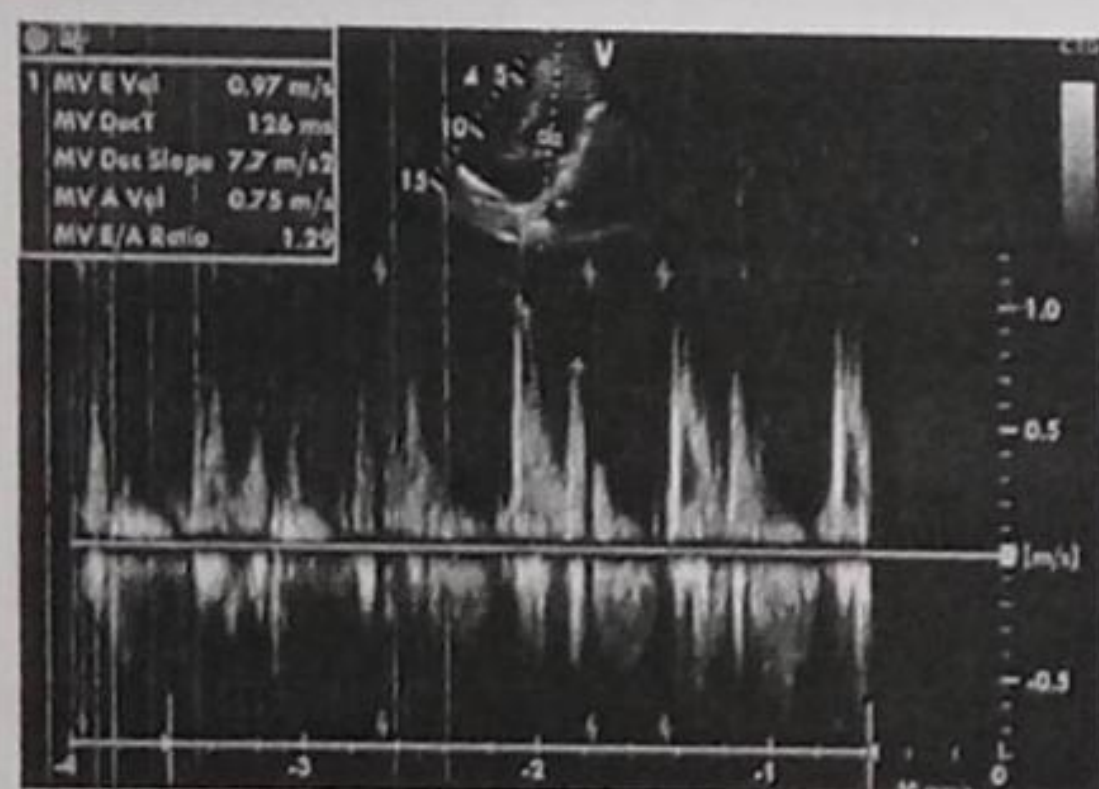
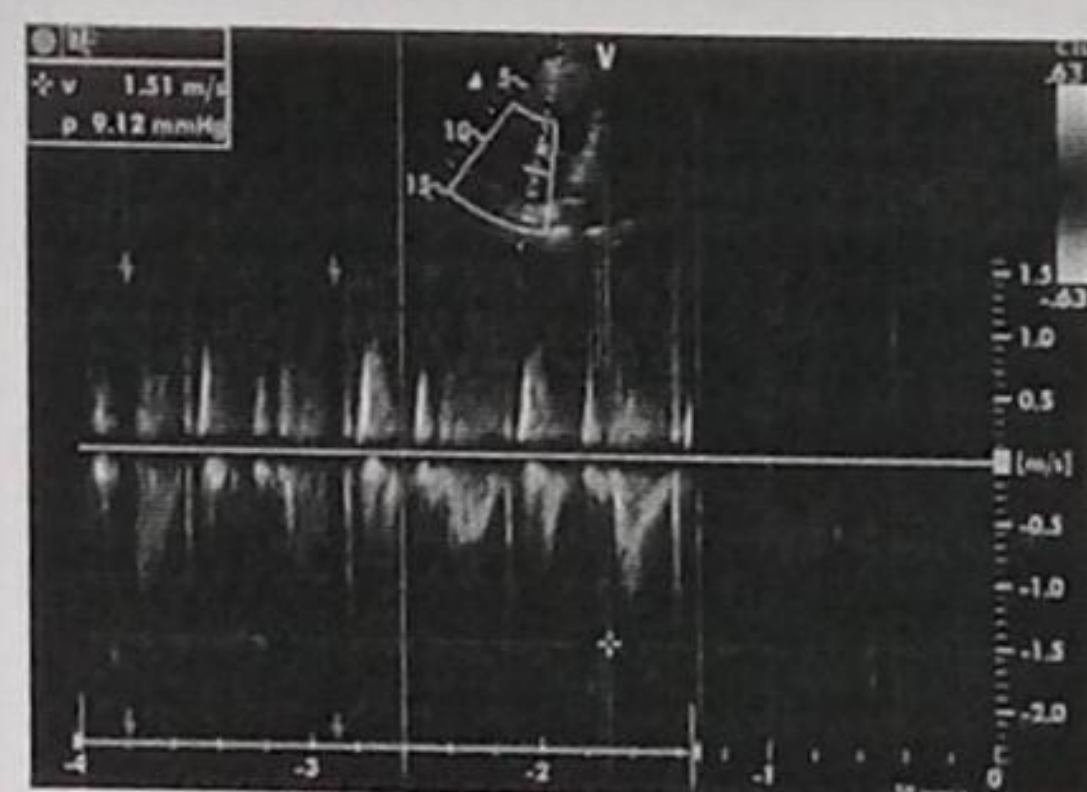
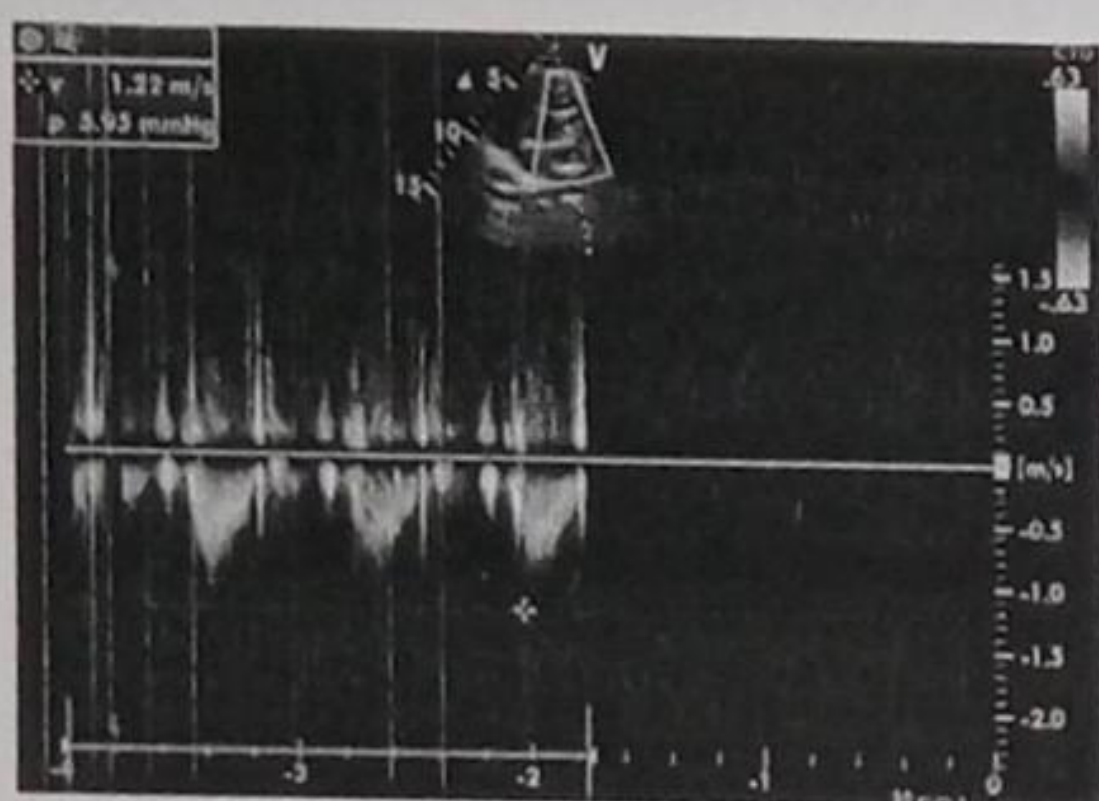
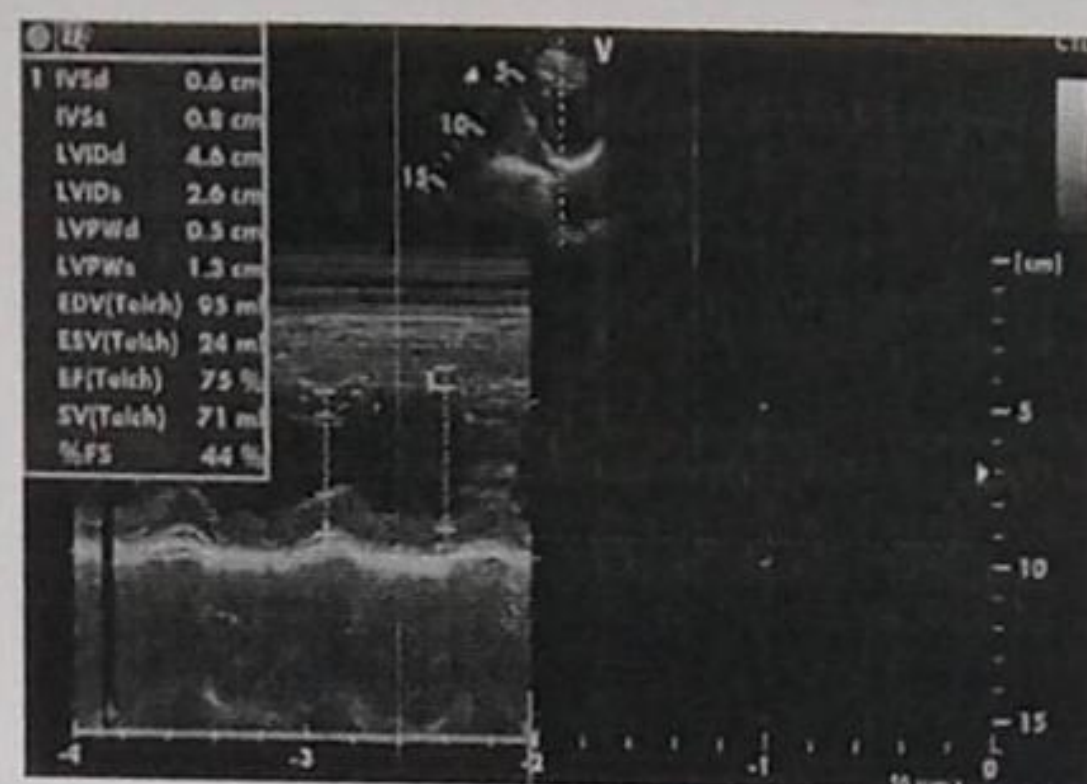
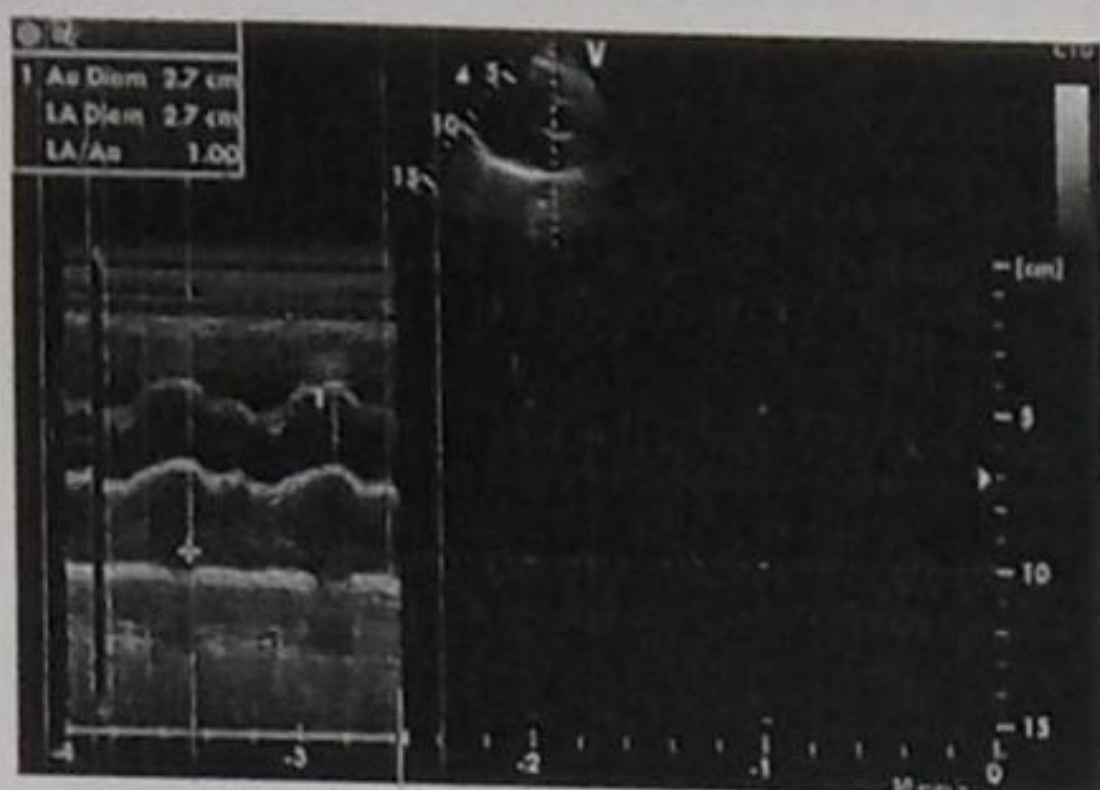
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Customer Name	MR.SENTHIL NATHAN M	Customer ID	MED120519641
Age & Gender	31Y/MALE	Visit Date	30/11/2021
Ref Doctor	MediWheel		



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Customer Name	MR.SENTHIL NATHAN M	Customer ID	MED120519641
Age & Gender	31Y/MALE	Visit Date	30/11/2021
Ref Doctor	MediWheel		

Thanks for your reference

DIGITAL X- RAY CHEST PA VIEW

Trachea appears normal.

Cardiothoracic ratio is within normal limits.

Bilateral lung fields appear normal.

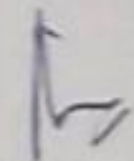
Both costophrenic angles appear normal.

Visualised bony structures appear normal.

Extra thoracic soft tissues shadow grossly appears normal.

IMPRESSION:

❖ No significant abnormality demonstrated.

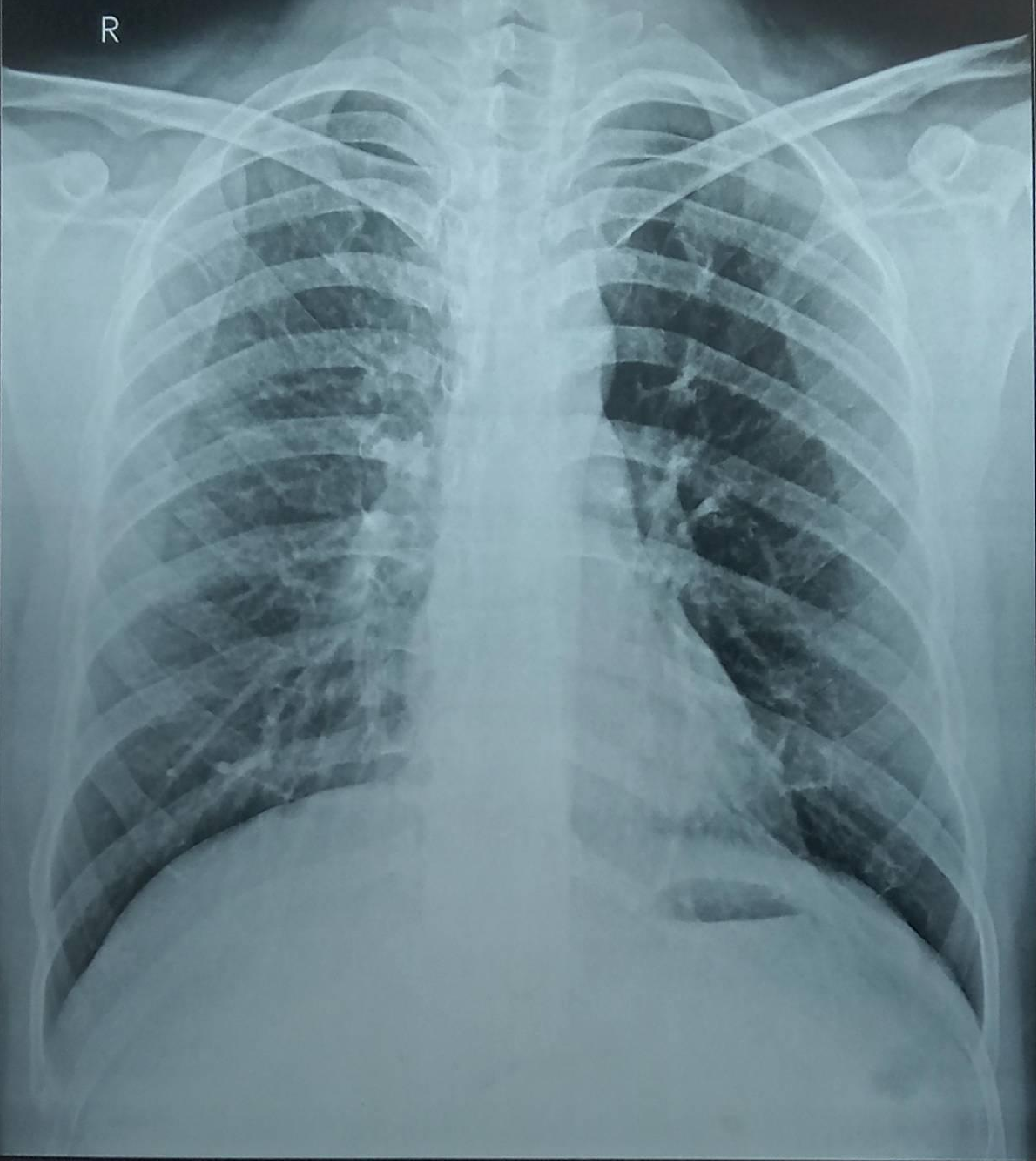

DR. PRARTHANA ANTOLINE ABHIA, DNB, RD.,
Consultant Radiologist

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