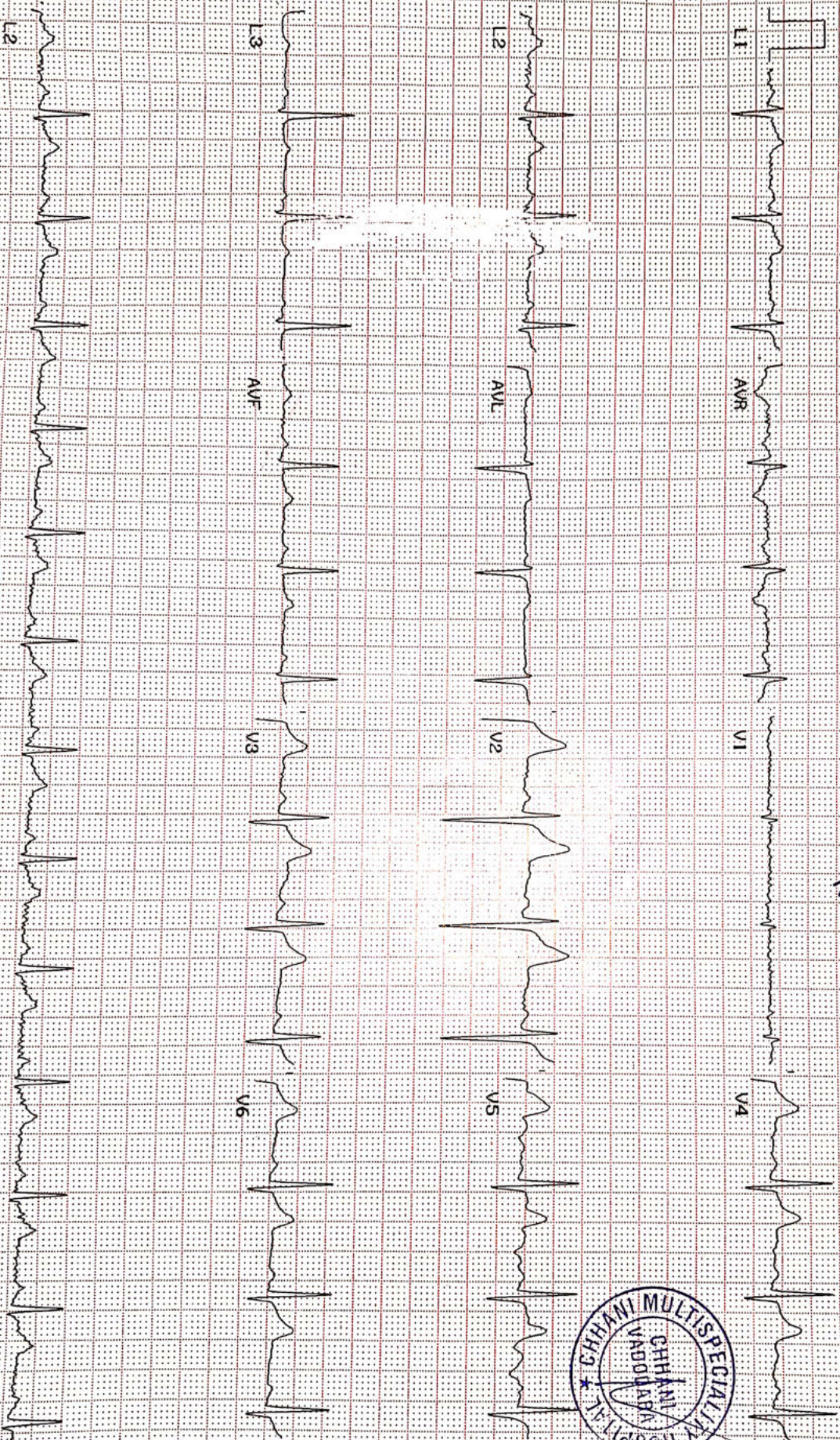


0362  
Ravi bhakti  
M:33Y 096KG  
09:38 AM  
11/02/2023

25 mm/s  
10mm/mV  
0.1 - 35HZ  
50Hz Rej-Y  
AUTO 12LS BLC-Y

P	=	82	ms	QT/QTc	=	87%	To be clinically correlated.	HR =	79bpm
QRS	=	75	ms	QT/RR	=	45%			
PR	=	130	ms	QRS axis	=	114°			
QT	=	342	ms	P axis	=	54°			
QTc	=	393	ms	T axis	=	44°			

DR. J. P. D. Patil  
MBBS, MD, DM, FRCR, FRCR  
Reg. No.: G-25108



*[Handwritten signature]*



# FITNESS CERTIFICATE

C  
A  
N  
D  
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D  
A  
T  
E

Name : Ravi Rameshkumar Bhatti.  
Date of Birth: 09/08/1984. Age 33 Blood Group: \_\_\_\_\_  
Sex : Male  Female  | Marital Status: Married  Unmarried   
Address : B. 304 Siddhant Enclave opp. Cignus  
School, Motnath mahadev Road, Harani 390022  
Any allergy / Disability / Pre-existing disease: \_\_\_\_\_  
NO any Allergy. Date: 11/02/23

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N  
G  
S

Height <u>173</u> Cms.	Weight <u>96</u> Kgs.	Near L.E. <u>6</u> R.E. <u>6</u> Vision: Distant L.E. <u>6</u> R.E. <u>(-1)</u> Colour Vision <u>N.A.D.</u>	Hearing Left Ear <u>(N)</u> Right Ear <u>(N)</u>
BP: <u>110/70</u> mmHg	Pulse Rate: <u>78</u> /min	Resp. Rate: <u>18</u> /min	
CVS: <u>S<sub>1</sub>S<sub>2</sub> (N)</u>	RS: <u>A&amp;B&amp;C clear</u>	Abdomen: <u>soft</u>	

Any other Findings: \_\_\_\_\_

C  
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I Dr.: Jaydutt Patel.  
hereby certify that I have examined Mr./Ms.: Ravi Rameshkumar Bhatti  
on 11/2/2023 and find him FIT / UNFIT for employment.  
Remarks if unfit: \_\_\_\_\_

Dr. Jaydutt A. Patel  
M.B.B.S., M.D. Medicine  
Reg. No.: G-25108  
Signature & Seal

[Signature]  
Signature of Candidate

[Stamp]  
Address / Tel No.

D  
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I declare that the above information is true and correct to the best of my knowledge and I am not suffering from any disease / illness, the presence of which I have not revealed. I fully understand that any misrepresentation of this declaration could lead to the termination of my offer / appointment. In case of any discrepancy arising out of my declaration, I will undergo the medical check-up by the company's suggested doctor and their findings will be fully binding on me and action thereon towards my employment will be accepted by me.

[Signature]  
Signature of Candidate: \_\_\_\_\_

Date: 11/02/23



ભારત સરકાર  
Government of India



Download Date: 04/03/2021



રવિ રમેશકુમાર ભટ્ટી  
RAVI RAMESHKUMAR BHATTI  
જન્મ તારીખ/DOB: 09/08/1989  
પુરુષ/ MALE

Issue Date: 07/02/2021

3492 8323 5048

VID : 9165 8653 9105 1459

મારો આધાર, મારી ઓળખ





NAME: RAVI BHATTI      AGE:33/M

DATE: 11/02/2023

**USG FOR ABDOMEN**

**LIVER:**

The echogenicity of the liver is normal.  
There is no focal liver lesion.  
There are no dilated intrahepatic biliary radicles.

**GALL BLADDER:**

Appears to be distended and shows no calculus or polyp in the lumen.  
Wall thickness is normal.

**SPLEEN:**

The echogenicity of the spleen is normal.  
There is no focal splenic lesion.

**PANCREAS:**

The echogenicity appears to be normal.  
There is no free fluid in the abdomen.  
There are no enlarged retroperitoneal lymphnodes.

**KIDNEY:**

The kidneys are normal in position, size, shape and outline.  
The parenchyma is normal. Right kidney measure 85\*40 cm.  
Left kidney measure 89\*49 cm.

**BLADDER:**

Bladder is well distended and shows normal wall thickness. No evidence of intraluminal mass or calculi.

**PROSTATE:**

Prostate gland is normal in size. It has smooth outline reflectivity.

There is no evidence of ascites.

No evidence of any gross bowel mass seen.

No evidence of any aorto-caval or mesenteric root lymphadenopathy.

Appendix cannot be imaged. No mass or collection in right iliac fossa.

DR. KUNAL VADWALA  
MBBS, DNB, DGO, DMRD  
Consultant Radiologist  
Reg. No. 0-26571





## ECHOCARDIOGRAPHY REPORT

PATIENT NAME: MR RAVI R BHATTI

AGE /GENDER : 32/MALE      DATE : 11/02/2023

### CONCLUSION:

- NORMAL LV SYSTOLIC FUNCTION LVEF 56 %
- NORMAL CARDIAC CHAMBERS
- NO RWMA
- TRIVIAL MR/ NO MS
- MILD TR, NO PAH
- NO AR/AS
- GRADE I DIASTOLIC DYSFUNCTION
- NO CLOT OR VEGETATION
- NO PERICARDIAL EFFUSION

M:MODE

AO: 25mm	LA: 36mm	IVS:10mm
LVdd:46mm	LVds:25mm	PW:10mm

DOPPLER STUDY

MITRAL VAVLE	E : 0.98	A :1.75
AORTI VALVE	0.72	

**Dr. KARSHIT JOSHI**  
MBBS, MD, DM, FID  
DR. KARSHIT JOSHI  
Consultant Diabetologist &  
General Physician



NAME	RAVI BHATTI	AGE/SEX	33/MALE
REF. BY	CHHANI HOSPITAL	DATE	11/02/2023

X-RAY OF CHEST PA VIEW:

FINDING

BOTH LUNG FIELDS APPEAR CLEAR.  
 NO CONSOLIDATION OR MASS LESION IS SEEN.  
 BOTH CP ANGLES ARE CLEAR.  
 CARDIAC SIZE APPEARS WITHIN NORMAL LIMITS.  
 TRACHEA IS CENTRAL IN POSITION.  
 MEDIASTINAL SHADOW IS NORMAL.  
 BOTH DOMES OF DIAPHRAGM ARE NORMAL.  
 BONY THORAX UNDER VISION APPEARS NORMAL.

IMPRESSIONS : NO SIGNIFICANT ABNORMALITY DETECTED

*[Signature]*  
 DR. HIMANI VIRAPARA  
 Regn. No: G.28771  
 M.D. [Radiodiagnosis]  
 (CONSULTANT RADIOLOGIST)



R

RAVI BHATTI 33Y 11022301 M CHEST PA 11-Feb-23 10:11 AM

Sunny Digital Portable X-Ray Services 8758530074



Patient's Name : **RAVI BHATTI**  
Referred by : Chhani Multispeciality Hospital  
Date : 13/02/2023

Ref. No. : 8694  
Age : 33 Years  
Sex : Male

### HEMOGRAM

Test Name	Result	Units	Biological Reference Interval
Hemoglobin :	13.9	g/dl	[13.0-18.0]
Total RBC Count :	5.24	mill/cmm	[4.7-6.0]
Total WBC Count :	8000	/cmm	[4000-10000]
Platelet Count :	455000	/cmm	150000-450000
<b><u>Blood Indices</u></b>			
P.C.V :	42.0	%	[42-52]
M.C.V. :	80.15	femtolitre	[78-100]
M.C.H. :	26.53	pg	[27-31]
M.C.H.C. :	33.1	g/dl	[32-36]
R.D.W. :	16.5	%	[11.5-14.0]
<b><u>Differential WBC Count</u></b>			
Polymorphs :	60	%	[60 - 70]
Lymphocytes :	30	%	[20 - 40]
Eosinophils :	04	%	[1 - 4]
Monocytes :	06	%	[2 - 6]
Basophils :	00	%	[0 - 1]
<b><u>Erythrocyte Sedimentation Rate</u></b> [Modified Westergren]			
After 1 hour :	<b>10</b>	mm	[M: 1 - 7 / F: 3 - 12]

### BLOOD GROUP

Test Name	Result
ABO System :	"B"
Rh Typing :	"POSITIVE"

### HBA1C [Glycosylated Haemoglobin]

Test Name	Result	Units	Biological Reference Interval
Glycosylated Haemoglobin : (HBA1C)	5.5	%	Excellent control: 4.2-6.2 Good Control : 6.3-7.2



Patient's Name : **RAVI BHATTI** Ref. No. : 8694  
 Referred by : Chhani Multispeciality Hospital Age : 33 Years  
 Date : 13/02/2023 Sex : Male

Fair Control : 7.3-8.2

Estimated Average glucose : 111.15 mg/dl

Comment \*As per the new 2009 update of American Diabetes Association regarding HbA1C & Mean Blood Glucose relationship.

NOTE: This test is used to monitor diabetic patients compliance with the therapeutic regimen and long term blood glucose control. It's level is proportional to both the average blood glucose concentration and the life span of the red blood cells (RBC) in circulation. HbA1c values are free of day to day glucose fluctuations and are unaffected by exercise or recent food intake.

### LIVER FUNCTION TEST

Test Name	Result	Units	Biological Reference Interval
S.G.P.T. (ALT) :	<b>50</b>	U/L	30- 65
S.G.O.T. (AST) :	<b>42</b>	IU/L	[Female: 0 - 31] [Male: 0 - 35]
S. Alkaline Phosphatase :	92	IU/L	[upto 15 yrs Female 50-162] [>20 yrs Female 42 - 141] [>20 yrs Male 53 - 119]
S. Bilirubin (Total) :	0.55	mg/dl	[0.1 to 1.2]
S. Bilirubin (Direct) :	0.24	mg/dl	[0.0 to 0.3]
S. Bilirubin (Indirect) :	0.31	mg/dl	[0.0 to 0.9]
S. Proteins: (Total) :	6.40	gm/dl	[6.6 to 8.8]
S. Albumin :	4.10	gm/dl	[3.5 to 5.2]
S. Globulin :	2.3	gm/dl	[2.5 to 3.0]
A/G Ratio :	1.8		

### LIPID PROFILE

Test Name	Result	Units	Biological Reference Interval
Cholesterol :	<b>228</b>	mg/dl	Desirable level/low risk : < 200

Patient's Name : <b>RAVI BHATTI</b>	Ref. No. : 8694
Referred by : Chhani Multispeciality Hospital	Age : 33 Years
Date : 13/02/2023	Sex : Male

Triglyceride :	114	mg/dl	Borderline level/moderate risk : 200-250 Elevated level/ high risk : > 250 Normal : <150 Borderline high :150-200 High : > 200
HDL Cholesterol :	44	mg/dl	Desirable level/low risk : >60 Borderline level/moderate risk : 35-60 Elevated level/ high risk : <35
LDL Cholesterol :	161.2	mg/dl	Desirable level/low risk : <130 Borderline level/moderate risk : 130-159 Elevated level/ high risk : >159
VLDL :	22.8	mg/dl	Upto 34
Chol./HDL Ratio :	5.2		
LDL/HDL Ratio :	3.7		Desirable level/low risk : 0.5-3.0 Borderline level/moderate risk : 3.0-6.0 Elevated level/ high risk : >6.0
Total Lipids :	770	mg/dl	400 - 1000

### BIOCHEMICAL TESTS

Test Name	Result	Units	Biological Reference Interval
Fasting Blood sugar :	<b>116</b>	mg/dl	70 - 110
Post Prandial Blood sugar :	<b>122</b>	mg/dl	80 - 120
Blood Urea :	34	mg/dl	10 - 50
Creatinine :	1.10	mg/dl	0.4 - 1.5
Blood Urea Nitrogen :	15.9	mg/dl	0 - 18
G.G.T. :	28	U/L	8 - 78
Uric Acid :	5.0	mg/dl	3.4 - 7.0

### THYROID FUNCTION TEST

Test Name	Result	Units	Biological Reference Interval
Serum T3 :	1.4	ng/ml	[0.60 - 1.81]
Serum T4 :	6.2	µg/dl	[4.50 - 10.90]

Patient's Name : **RAVI BHATTI**  
Referred by : Chhani Multispeciality Hospital  
Date : 13/02/2023

Ref. No. : 8694  
Age : 33 Years  
Sex : Male

Serum TSH : 2.210  $\mu$ IU/ml [0.55 - 4.78]  
(CHEMILUMINESCENCE)

## URINE EXAMINATION

### PHYSICAL EXAMINATION:

Volume - 20 ml  
Colour - Pale Yellow  
Blood - Absent  
Appearance - Clear  
Deposit - Absent

### CHEMICAL EXAMINATION:

Sp. Gravity - 1.020  
Protein - Absent  
Glucose - Absent  
Ketone - Absent  
Urobilinogens - Absent  
Bile Salts - Absent  
Bile Pigments - Absent  
Reaction - Acidic

### MICROSCOPIC EXAMINATION: [ After centrifugation at 2000 r.p.m. for 5 minutes ]

Pus Cells - 1-2 /H.P.F  
Red Cells - 0-1 /H.P.F.  
Epithelial Cells - Occ. /H.P.F.  
Casts - Absent  
Crystals - Absent  
Yeast Cells - Absent  
Trichomonas Vag. - Absent  
Bacteria - Absent  
Porphobilinogen - Absent

This is an electronically authenticated report.



**DR.MANJARI BHABHOR**  
MD( PATHOLOGY)D.C.P.  
(REG NO.G-20483)

Patient's Name : **RAVI BHATTI**  
Referred by : Chhani Multispeciality Hospital  
Date : 13/02/2023

Ref. No. : 8694  
Age : 33 Years  
Sex : Male

### Prostate specific antigen - PSA

Test Name	Result	Units	Biological Reference Interval
Prostate Specific Antigen (PSA):	2.0	ng/ml	[ 0.0 - 4.0 ]

\* Generally recommended in : prostatic malignancy

\* Schedule for tumour marker determination  
Pre-operatively  
Post operatively - At regular intervals until the values have shown a marked decrease.

\* Potential clinical applications of tumour markers are :

Prognosis - The level of tumour marker is corresponds to the mass of tumour. Moderate elevations are suggestive of better prognosis than persistent high levels.

Monitoring - The profile of tumour marker concentration against time can mirror the condition of patients diagnosed to have cancer.

\* Tumour marker profile usually reflects one of the following classical patterns :

A rapid decline in the concentration following surgery or therapy indicates successful treatment. The lack of a decline to basal level following first line therapy indicates partial success in the treatment.

Continue low level of the tumour marker indicates that remission has been maintain.

A subsequent rise in the concentration of the tumour marker suggests a recurrence of the disease.

If tumour marker concentration remain elevated after treatment, the tumour may be resistant to the therapeutic method and prognosis is poor.

This is an electronically authenticated report.



**DR.MANJARI BHABHOR**  
MD( PATHOLOGY)D.C.P.  
(REG NO.G-20483)