

MEDICAL EXAMINATION REPORT (MER)

If the examinee is suffering from an acute life threatening situation, you may be obliged to disclose the result of the medical examination to the examinee.

1. Name of the examinee	:	Mr./Mrs./Ms. Vinoth Kumar D
2. Mark of Identification	:	(Mole/Scar/any other (specify location)):
3. Age/Date of Birth	:	40, 15/04/1983 Gender: F/M <input checked="" type="checkbox"/>
4. Photo ID Checked	:	(Passport/Election Card/PAN Card/Driving Licence/Company ID)

PHYSICAL DETAILS:

a. Height 170 (cms)	b. Weight 75 (Kgs)	c. Girth of Abdomen 82 (cms)
d. Pulse Rate 70 (/Min)	e. Blood Pressure:	Systolic 110 Diastolic 70
	1 st Reading	
	2 nd Reading	

FAMILY HISTORY:

Relation	Age if Living	Health Status	If deceased, age at the time and cause
Father			
Mother			
Brother(s)			
Sister(s)			

HABITS & ADDICTIONS: Does the examinee consume any of the following?

Tobacco in any form	Sedative	Alcohol
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

PERSONAL HISTORY

- | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| a. Are you presently in good health and entirely free from any mental or Physical impairment or deformity. If No, please attach details. <input checked="" type="checkbox"/> Y/N | c. During the last 5 years have you been medically examined, received any advice or treatment or admitted to any hospital? <input checked="" type="checkbox"/> Y/N |
| b. Have you undergone/been advised any surgical procedure? <input checked="" type="checkbox"/> Y/N | d. Have you lost or gained weight in past 12 months? <input checked="" type="checkbox"/> Y/N |

Have you ever suffered from any of the following?

- | | |
|-------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|
| • Psychological Disorders or any kind of disorders of the Nervous System? <input checked="" type="checkbox"/> Y/N | • Any disorder of Gastrointestinal System? <input checked="" type="checkbox"/> Y/N |
| • Any disorders of Respiratory system? <input checked="" type="checkbox"/> Y/N | • Unexplained recurrent or persistent fever, and/or weight loss <input checked="" type="checkbox"/> Y/N |
| • Any Cardiac or Circulatory Disorders? <input checked="" type="checkbox"/> Y/N | • Have you been tested for HIV/HBsAg / HCV before? If yes attach reports <input checked="" type="checkbox"/> Y/N |
| • Enlarged glands or any form of Cancer/Tumour? <input checked="" type="checkbox"/> Y/N | • Are you presently taking medication of any kind? <input checked="" type="checkbox"/> Y/N |
| • Any Musculoskeletal disorder? <input checked="" type="checkbox"/> Y/N | |

• Any disorders of Urinary System?

Y/N

• Any disorder of the Eyes, Ears, Nose, Throat or Mouth & Skin

Y/N

FOR FEMALE CANDIDATES ONLY

a. Is there any history of diseases of breast/genital organs?

Y/N

d. Do you have any history of miscarriage/abortion or MTP

Y/N

b. Is there any history of abnormal PAP Smear/Mammogram/USG of Pelvis or any other tests? (If yes attach reports)

Y/N

e. For Parous Women, were there any complication during pregnancy such as gestational diabetes, hypertension etc

Y/N

c. Do you suspect any disease of Uterus, Cervix or Ovaries?

Y/N

f. Are you now pregnant? If yes, how many months?

Y/N

CONFIDENTIAL COMMENTS FROM MEDICAL EXAMINER

- Was the examinee co-operative? Y/N
- Is there anything about the examinee's health, lifestyle that might affect him/her in the near future with regard to his/her job? Y/N
- Are there any points on which you suggest further information be obtained? Y/N
- Based on your clinical impression, please provide your suggestions and recommendations below;

Medical consult

➤ Do you think he/she is **MEDICALLY FIT** or **UNFIT** for employment.

MEDICAL EXAMINER'S DECLARATION.

I hereby confirm that I have examined the above individual after verification of his/her identity and the findings stated above are true and correct to the best of my knowledge.

Name & Signature of the Medical Examiner :

[Signature]
Dr. GEORGE THOMAS
MD, FCSI, FIAE
MEDICAL EXAMINER
Reg: 86614

Seal of Medical Examiner :

Name & Seal of DDRC SRL Branch :



Date & Time :

DDRC agilus Pathlabs Limited.

Corp. Office : Express House, Second Floor, Opp. Pothys Silks, Banerjee Road, Kaloor -682017

Contact :- 93334 93334, Web :- www.ddrcagilus.com Email :- info.ddrc@agilus.in

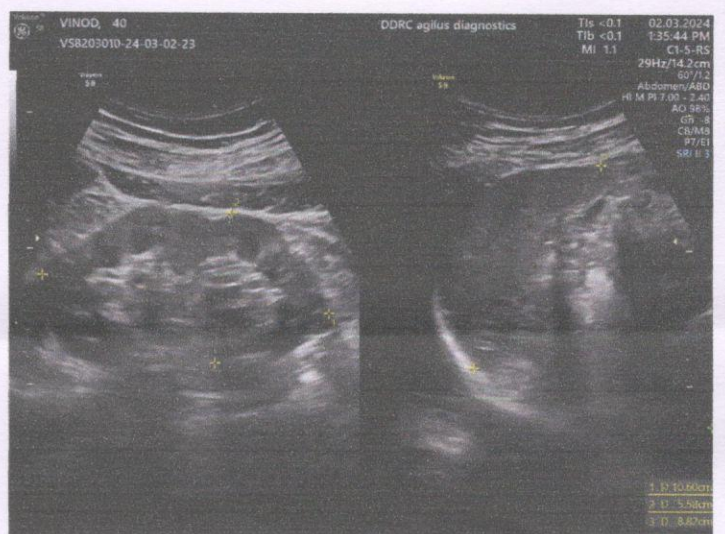
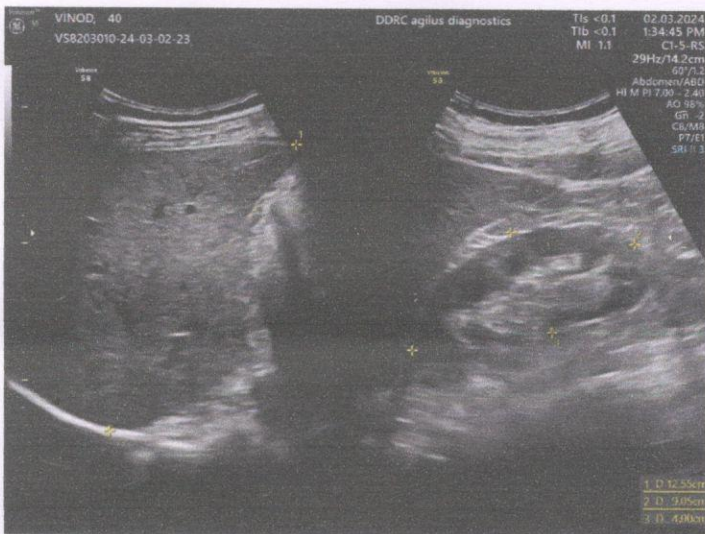
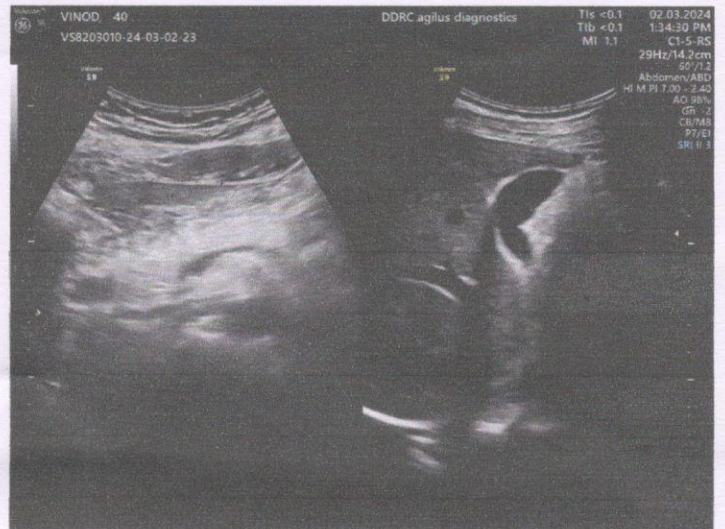
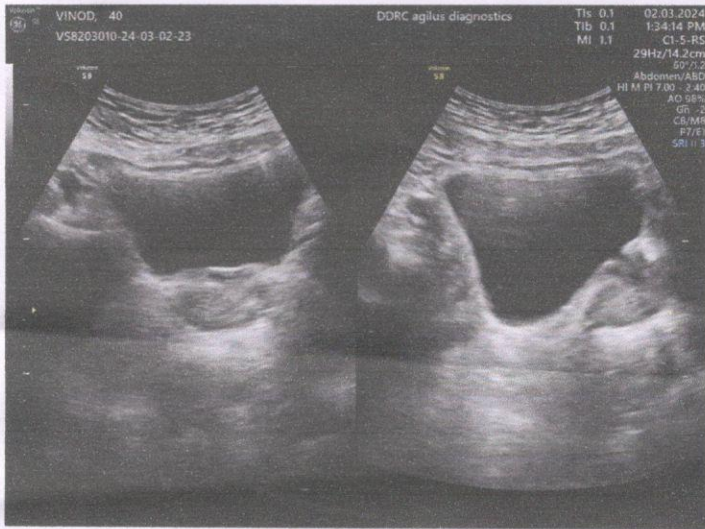
NAME	MR VINOTH KUMAR D	AGE	40 YRS
SEX	MALE	DATE	March 2, 2024
REFERRAL	MEDIWHEEL	ACC NO	4126XC000418

USG ABDOMEN AND PELVIS

LIVER	Measures ~ 12.5 cm, shows increased echoes. Smooth margins and no obvious focal lesion within. No IHBR dilatation. Portal vein normal in caliber.
GB	No calculus within gall bladder. Normal GB wall caliber.
SPLEEN	Measures ~ 8.8 cm, normal to visualized extent. Splenic vein normal.
PANCREAS	Normal to visualized extent. PD is not dilated.
KIDNEYS	RK: 9.0 x 4.0 cm, normal in size and echotexture. LK: 10.6 x 5.5 cm, normal in size and echotexture. No obvious calculus is seen. Maintained corticomedullary differentiation and normal parenchymal thickness. Right PCS fullness noted – likely physiological.
BLADDER	Normal wall caliber, no internal echoes/calculus within.
PROSTATE	Normal in volume and echopattern.
FLUID	Nil to visualized extent.
BOWEL	Visualized bowel loops appear normal.
IMPRESSION	<p>↓ Grade I Fatty liver.</p> <p>Kindly correlate clinically.</p>


Dr. HRISHIKESH C MBBS DMRD
 Consultant Radiologist

Thank you for referral. Your feedback will be appreciated.




இந்திய அரசாங்கம்


Government of India

Issue Date: 20/11/2017



வினோத் குமார் தா
Vinoth Kumar D
பிறந்த நாள்/DOB: 15/04/1983
ஆண்/ MALE

6645 0924 0888

VID : 9115 0186 2423 5411

எனது ஆதார், எனது அடையாளம்

Vinoth




இந்திய அடையாள அமைப்பு ஆணையர் அமைப்பு


Unique Identification Authority of India

முகவரி:
தந்தை / தாய் பெயர்: தாமோதரன், 1274 எ,
28/6, ராஜிவ் நகர் வெது தெரு, பவ்வாக்கு
சேரடு, பாண்டவரமங்கலம், தூத்துக்குடி,
தமிழ்நாடு - 628502

Address:
S/O: Dhamotharan, 1274 A, 28/6, Rajiv Nagar
6th Street, Pallak Road, Pandavarmangalam,
Thoothukkudi,
Tamil Nadu - 628502



6645 0924 0888

VID : 9115 0186 2423 5411

 1947 |  help@uidai.gov.in |  www.uidai.gov.in

I voluntarily requested not to take stool test, TMT and blood test after fasting.

Name: Vinoth Kumar. D

[Signature]





PATIENT NAME : MR. VINOTH KUMAR.D

REF. DOCTOR : DR. MEDIWHEEL ARCOFEMI HEALTHCARE LIMITED

**CODE/NAME & ADDRESS : CA00010147 -
MEDIWHEEL ARCOFEMI HEALTHCARE LIMITED
F701A, LADO SARAI, NEW DELHI,SOUTH DELHI,
DELHI,
SOUTH DELHI 110030
8800465156**

ACCESSION NO : 4126XC000418
PATIENT ID : VINOM1504834126
**CLIENT PATIENT ID:
ABHA NO**

AGE/SEX : 40 Years Male
DRAWN :
RECEIVED : 02/03/2024 08:13:29
REPORTED : 02/03/2024 16:34:07

Test Report Status	Preliminary	Results	Biological Reference Interval	Units
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MEDIWHEEL HEALTH CHECKUP ABOVE 40(M)TMT

DENTAL CHECK UP

DENTAL CHECK UP

Completed

**DR.SMITHA PAULSON,MD
(PATH),DPB
(Reg No - TCMC:35960)
LAB DIRECTOR & HEAD-
HISTOPATHOLOGY & CYTOLOGY**

**DR.NILA THERESA DAVIS,MBBS
MD(PATH)
(Reg No - TCMC:47450)
CONSULTANT PATHOLOGIST**

**DR.TEJAS PRASAD
VIDWANS ,MBBS MD(PATH)(Reg
No -MMC 2017/08/3919)
CONSULTANT PATHOLOGIST**



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PERFORMED AT :

DDRC AGILUS PATHLABS LIMITED
DDRC agilus TOWER, G-131,PANAMPILLY NAGAR,
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Email : customercare.ddrc@agilus.in



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OPHTHAL

OPHTHAL

Completed

PHYSICAL EXAMINATION

PHYSICAL EXAMINATION

Completed

Smitha
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Patient Ref. No. 66600000805685Z

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MEDIWHEEL HEALTH CHECKUP ABOVE 40(M)TMT

**ECG WITH REPORT
REPORT
COMPLETED**

**USG ABDOMEN AND PELVIS
REPORT
COMPLETED**

**CHEST X-RAY WITH REPORT
REPORT
COMPLETED**

HAEMATOLOGY

MEDIWHEEL HEALTH CHECKUP ABOVE 40(M)TMT

GLYCOSYLATED HEMOGLOBIN(HBA1C), EDTA WHOLE BLOOD
HBA1C 5.3

Normal : 4.0 - 5.6%
Non-diabetic level : < 5.7%
Diabetic : > 6.5%

Glycemic control goal
More stringent goal : < 6.5 %
General goal : < 7%
Less stringent goal : < 8%.

Glycemic targets in CKD :-
If eGFR > 60 : < 7%
If eGFR < 60 : 7 - 8.5%.



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MEAN PLASMA GLUCOSE 105.4 < 116.0 mg/dL

BLOOD COUNTS, EDTA WHOLE BLOOD

HEMOGLOBIN 14.9 13.0 - 17.0 g/dL
 RED BLOOD CELL COUNT 5.07 4.50 - 5.50 mil/ μ L
 WHITE BLOOD CELL COUNT 6.91 4.0 - 10.0 thou/ μ L
 PLATELET COUNT 313 150 - 410 thou/ μ L

RBC AND PLATELET INDICES

HEMATOCRIT 44.6 40.0 - 50.0 %
 MEAN CORPUSCULAR VOL 88.0 83.0 - 101 fL
 MEAN CORPUSCULAR HGB. 29.4 27.0 - 32.0 pG
 MEAN CORPUSCULAR HEMOGLOBIN CONCENTRATION 33.4 31.50 - 34.50 g/dL
 RED CELL DISTRIBUTION WIDTH 12.3 11.60 - 14.0 %
 MENTZER INDEX 17.4
 MEAN PLATELET VOLUME 8.5 6.80 - 10.90 fL

WBC DIFFERENTIAL COUNT

SEGMENTED NEUTROPHILS 56 40.0 - 80.0 %
 LYMPHOCYTES 32 20.0 - 40.0 %
 MONOCYTES 4 2.0 - 10.0 %
 EOSINOPHILS **8 High** 1.0 - 6.0 %
 BASOPHILS 0 0.0 - 1.0 %
 ABSOLUTE NEUTROPHIL COUNT 3.87 2.0 - 7.0 thou/ μ L
 ABSOLUTE LYMPHOCYTE COUNT 2.24 1.0 - 3.0 thou/ μ L
 ABSOLUTE MONOCYTE COUNT 0.29 0.20 - 1.0 thou/ μ L
 ABSOLUTE EOSINOPHIL COUNT **0.52 High** 0.02 - 0.50 thou/ μ L

DR. HARI SHANKAR, MBBS MD
 (Reg No - TCMC:62092)
 HEAD - Biochemistry & Immunology

DR. NISHA G, MBBS MD (PATH),
 (Reg No - TCMC:45399)
 CONSULTANT PATHOLOGIST

DR. SMITHA PAULSON, MD
 (PATH), DPB
 (Reg No - TCMC:35960)
 LAB DIRECTOR & HEAD-
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ABSOLUTE BASOPHIL COUNT	0.00	0.00 - 0.10	thou/ μ L
NEUTROPHIL LYMPHOCYTE RATIO (NLR)	1.7		

ERYTHROCYTE SEDIMENTATION RATE (ESR), EDTA BLOOD

SEDIMENTATION RATE (ESR)	06	0 - 14	mm at 1 hr
METHOD : WESTERGREIN METHOD			

MEDIWHEEL HEALTH CHECKUP ABOVE 40(M)TMT

SUGAR URINE - POST PRANDIAL

SUGAR URINE - POST PRANDIAL	NOT DETECTED	NOT DETECTED
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IMMUNOHAEMATOLOGY

MEDIWHEEL HEALTH CHECKUP ABOVE 40(M)TMT

ABO GROUP & RH TYPE, EDTA WHOLE BLOOD

ABO GROUP	TYPE O
RH TYPE	POSITIVE

Interpretation(s)
ABO GROUP & RH TYPE, EDTA WHOLE BLOOD-Blood group is identified by antigens and antibodies present in the blood. Antigens are protein molecules found on the surface of red blood cells. Antibodies are found in plasma. To determine blood group, red cells are mixed with different antibody solutions to give A,B,O or AB.

Disclaimer: "Please note, as the results of previous ABO and Rh group (Blood Group) for pregnant women are not available, please check with the patient records for availability of the same."

The test is performed by both forward as well as reverse grouping methods.

BIO CHEMISTRY

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Test Report Status	Final	Results	Units
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MEDIWHEEL HEALTH CHECKUP ABOVE 40(M)TMT**BLOOD UREA NITROGEN (BUN), SERUM**

BLOOD UREA NITROGEN 6 Adult(<60 yrs) : 6 to 20 mg/dL

BUN/CREAT RATIO

BUN/CREAT RATIO 8.32

CREATININE, SERUM


CREATININE 0.78 18 - 60 yrs : 0.9 - 1.3 mg/dL


GLUCOSE FASTING,FLUORIDE PLASMA

FBS (FASTING BLOOD SUGAR) 87
 Diabetes Mellitus : > or = 126. mg/dL
 Impaired fasting Glucose/
 Prediabetes : 101 - 125.
 Hypoglycemia : < 55.

LIVER FUNCTION TEST WITH GGT

BILIRUBIN, TOTAL 0.36 General Range : < 1.1 mg/dL
 BILIRUBIN, DIRECT 0.15 General Range : < 0.3 mg/dL
 BILIRUBIN, INDIRECT 0.21 General Range : <0.85 mg/dL
 TOTAL PROTEIN 6.8 Ambulatory : 6.4 - 8.3 g/dL
 Recumbant : 6 - 7.8
 ALBUMIN 4.3 20-60yrs : 3.5 - 5.2 g/dL
 GLOBULIN 2.5 General Range : 2 - 3.5 g/dL
 Premature Neonates : 0.29 - 1.04
 ALBUMIN/GLOBULIN RATIO 1.7 General Range : 1.1 - 2.5 RATIO


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ALBUMIN/GLOBULIN RATIO	1.7	General Range : 1.1 - 2.5	RATIO
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	15	Adults : < 40	U/L
ALANINE AMINOTRANSFERASE (ALT/SGPT)	10	Adults : < 45	U/L
ALKALINE PHOSPHATASE	90	Adult (<60yrs) : 40 -130	U/L
GAMMA GLUTAMYL TRANSFERASE (GGT)	12	Adult (Male) : < 60	U/L

TOTAL PROTEIN, SERUM

TOTAL PROTEIN	6.8	Ambulatory : 6.4 - 8.3 Recumbant : 6 - 7.8	g/dL
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URIC ACID, SERUM

URIC ACID	5.9	Adults : 3.4-7	mg/dL
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BIOCHEMISTRY - LIPID

MEDIWHEEL HEALTH CHECKUP ABOVE 40(M)TMT

LIPID PROFILE, SERUM

CHOLESTEROL	248 High	Desirable : < 200 Borderline : 200-239 High : >or= 240	mg/dL
TRIGLYCERIDES	105	Normal : < 150 High : 150-199 Hypertriglyceridemia : 200-499 Very High : > 499	mg/dL
HDL CHOLESTEROL	44	General range : 40-60	mg/dL
LDL CHOLESTEROL, DIRECT	206 High	Optimum : < 100 Above Optimum : 100-129 Borderline High : 130-159 High : 160-	mg/dL

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NON HDL CHOLESTEROL	204 High	189 Very High : > or = 190 Desirable : < 130 Above Desirable : 130 -159 Borderline High : 160 - 189 High : 190 - 219 Very high : > / = 220	mg/dL
VERY LOW DENSITY LIPOPROTEIN CHOL/HDL RATIO	21.0 5.6	< / = 30.0 Low Risk : 3.3 - 4.4 Average Risk : 4.5 - 7.0 Moderate Risk : 7.1 - 11.0 High Risk : > 11.0	mg/dL
LDL/HDL RATIO	4.7	Desirable/Low Risk - 0.5-3 Borderline/Moderate Risk- 3.1-6 High Risk- >6.0	

SPECIALISED CHEMISTRY - HORMONE

MEDIWHEEL HEALTH CHECKUP ABOVE 40(M)TMT

THYROID PANEL, SERUM


T3	105.00	Adult : 80-200	ng/dL
T4	6.06	Adults : 4.5-12.1	µg/dl
TSH 3RD GENERATION	5.090	21-50 yrs : 0.4 - 4.2	µIU/mL


SPECIALISED CHEMISTRY - TUMOR MARKER

MEDIWHEEL HEALTH CHECKUP ABOVE 40(M)TMT

PROSTATE SPECIFIC ANTIGEN, SERUM

PROSTATE SPECIFIC ANTIGEN	0.397	Age Specific :- <49yrs : <2.5	ng/mL
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DR.HARI SHANKAR, MBBS MD
(Reg No - TCMC:62092)
HEAD - Biochemistry &
Immunology


DR.SMITHA PAULSON,MD
(PATH),DPB
(Reg No - TCMC:35960)
LAB DIRECTOR & HEAD-
HISTOPATHOLOGY & CYTOLOGY



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PERFORMED AT :

DDRC AGILUS PATHLABS LIMITED
DDRC agilus TOWER, G-131,PANAMPILLY NAGAR,
ERNAKULAM, 682036
KERALA, INDIA
Tel : 93334 93334
Email : customercare.ddrc@agilus.in





PATIENT NAME : MR. VINOTH KUMAR.D

REF. DOCTOR : DR. MEDIWHEEL ARCOFEMI HEALTHCARE LIMITED

CODE/NAME & ADDRESS : CA00010147 -
MEDIWHEEL ARCOFEMI HEALTHCARE LIMITED
F701A, LADO SARAI, NEW DELHI, SOUTH DELHI,
DELHI,
SOUTH DELHI 110030
8800465156

ACCESSION NO : 4126XC000418
PATIENT ID : VINOM1504834126
CLIENT/PATIENT ID:
ABHA NO

AGE/SEX : 40 Years Male
DRAWN :
RECEIVED : 02/03/2024 08:13:29
REPORTED : 02/03/2024 16:34:07

Test Report Status	Preliminary	Results	Units
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50-59yrs : <3.5
60-69yrs : <4.5
>70yrs : <6.5

CLINICAL PATH - URINALYSIS

MEDIWHEEL HEALTH CHECKUP ABOVE 40(M)TMT

PHYSICAL EXAMINATION, URINE

COLOR PALE YELLOW
APPEARANCE CLEAR

CHEMICAL EXAMINATION, URINE

PH	7.0	4.7 - 7.5
SPECIFIC GRAVITY	1.005	1.003 - 1.035
PROTEIN	NOT DETECTED	NOT DETECTED
GLUCOSE	NOT DETECTED	NOT DETECTED
KETONES	NOT DETECTED	NOT DETECTED
BLOOD	NOT DETECTED	NOT DETECTED
BILIRUBIN	NOT DETECTED	NOT DETECTED
UROBILINOGEN	NORMAL	NORMAL
NITRITE	NOT DETECTED	NOT DETECTED
LEUKOCYTE ESTERASE	NOT DETECTED	NOT DETECTED

MICROSCOPIC EXAMINATION, URINE

RED BLOOD CELLS	NOT DETECTED	NOT DETECTED	/HPF
WBC	1-2	0-5	/HPF
EPITHELIAL CELLS	0-1	0-5	/HPF
CASTS	NOT DETECTED		

DR.HARI SHANKAR, MBBS MD
(Reg No - TCMC:62092)
HEAD - Biochemistry & Immunology

DR.NISHA G,MBBS MD(PATH),
(Reg No - TCMC:45399)
CONSULTANT PATHOLOGIST

DR.SMITHA PAULSON,MD
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LAB DIRECTOR & HEAD-HISTOPATHOLOGY & CYTOLOGY



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Patient Ref. No. 66600000805685Z



PATIENT NAME : MR. VINOTH KUMAR.D

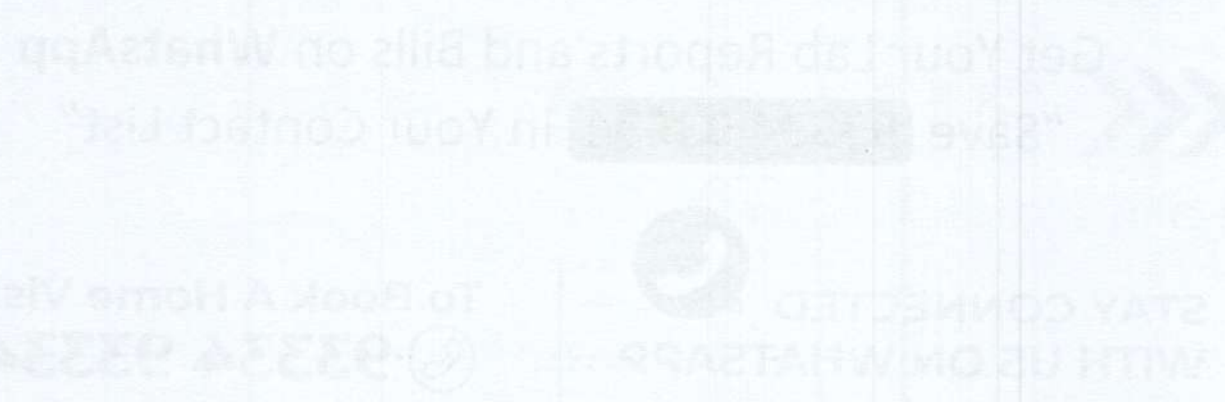
REF. DOCTOR : DR. MEDIWHEEL ARCOFEMI HEALTHCARE LIMITED

CODE/NAME & ADDRESS : CA00010147 -
MEDIWHEEL ARCOFEMI HEALTHCARE LIMITED
F701A, LADO SARAI, NEW DELHI, SOUTH DELHI,
DELHI,
SOUTH DELHI 110030
8800465156

ACCESSION NO : 4126XC000418
PATIENT ID : VINOM1504834126
CLIENT PATIENT ID:
ABHA NO

AGE/SEX : 40 Years Male
DRAWN :
RECEIVED : 02/03/2024 08:13:29
REPORTED : 02/03/2024 16:34:07

Test Report Status	Preliminary	Results	Units
CRYSTALS		NOT DETECTED	
BACTERIA		NOT DETECTED	NOT DETECTED
YEAST		NOT DETECTED	NOT DETECTED



DR.NISHA G,MBBS MD(PATH),
(Reg No - TCMC:45399)
CONSULTANT PATHOLOGIST



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Patient Ref. No. 66600008056857

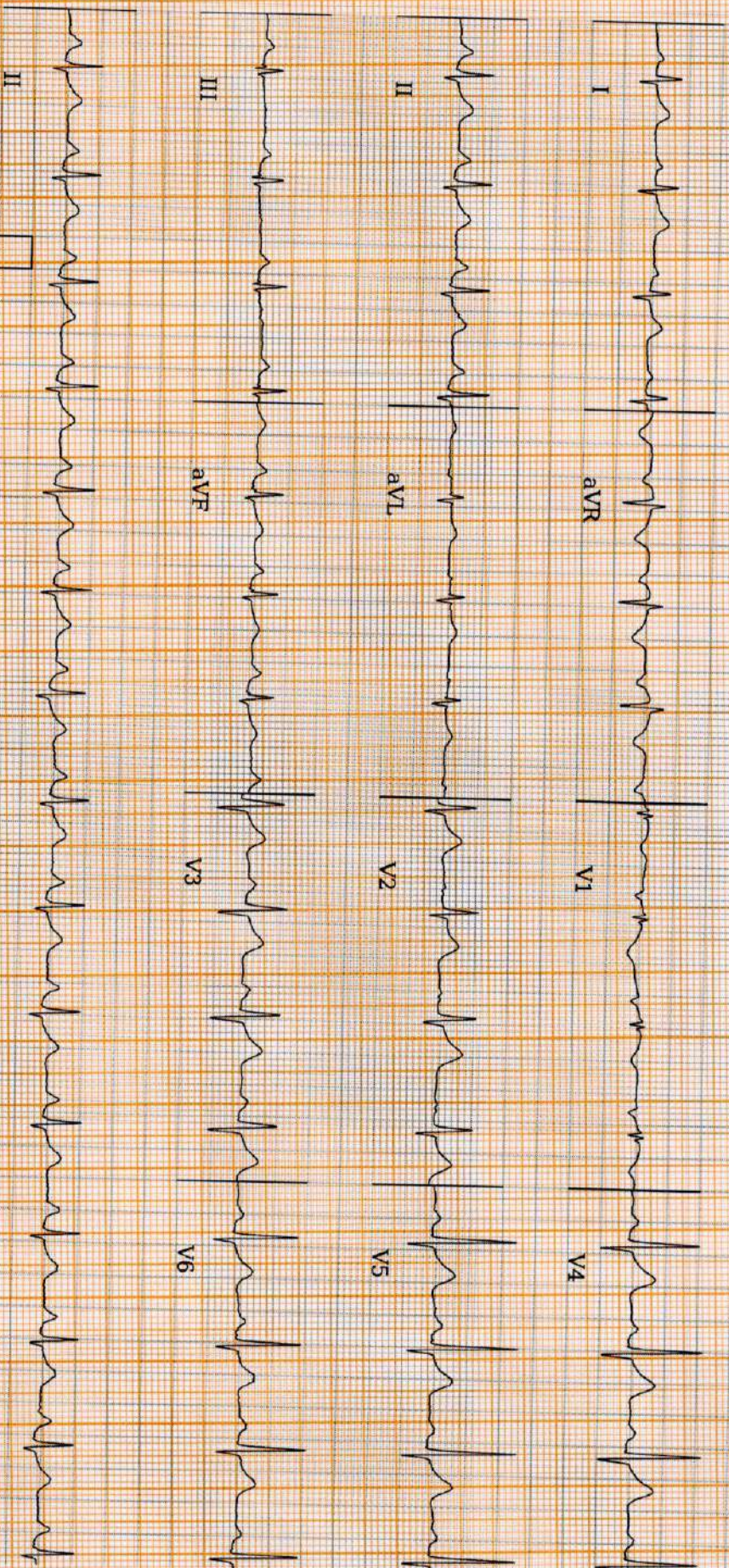


Age / Gender: 40/Male

Patient ID: 0000

Patient Name: VINOTH KUMAR D

Date and Time: 2nd Mar 24 1:51 PM



AR: 91bpm

VR: 92bpm

QRSD: 80ms

QT: 334ms

QTcB: 413.59ms

25.0 mm/s 10.0 mm/mV

0.20Hz, 50Hz

ECG Within Normal Limits: Sinus Rhythm. Please correlate clinically.

PRI: 268ms

P-R-T: 65° 80° 27°

REPORTED BY

Dr. Bharati R MBS

Disclaimer: Analysis in this report is based on ECG alone and should only be used as an adjunct to clinical history, symptoms and results of other invasive and non-invasive tests and must be interpreted by a qualified physician.

NAME: MR VINOTH KUMAR D	STUDY DATE :02.03.2024
AGE / SEX : 40 YRS/ MALE	REPORTING DATE :02.03.2024
REFERRED BY : MEDIWHEEL	ACC NO : 4126XC000418

X - RAY - CHEST PA VIEW

- Both the lung fields are clear.
- B/L hila and mediastinal shadows are normal.
- Cardiac silhouette appears normal.
- Cardiac thoracic ratio is normal
- Bilateral CP angles and domes of diaphragm appear normal.

IMPRESSION: Normal study.**Kindly correlate clinically**

Dr. Hrishikesh C
DR. HRISHIKESH C MBBS DMRD
Consultant Radiologist.



Date...02/03/24

OPHTHALMOLOGY REPORT

This is to certify that I have examined

Mr / Ms : ...Vinothkumar D.....Aged...40.....and his / her

visual standards is as follows :

Visual Acuity:

R:6/6.....

For far vision

L:6/6.....

R:N6.....

For near vision

L:N6.....

Color Vision :Normal.....

.....

CIYA MARY P ROCKY

(Optometrist)

