आधार - आम आदमी का अधिकार



भारत सरकार Government of India



अशिका साह Arshika Sahu जन्म तिथि / DOB : 11/03/1995 महिला / Female



2110 3340 9963

आधार - आम आदमी का अधिकार

handan Healthcare Ltd. entor

D63/6B-99, Shivaji Nagar Colony, Mahmoorganj, Varanasi, Uttar Pradesh 221010, India

Latitude 25.305347°

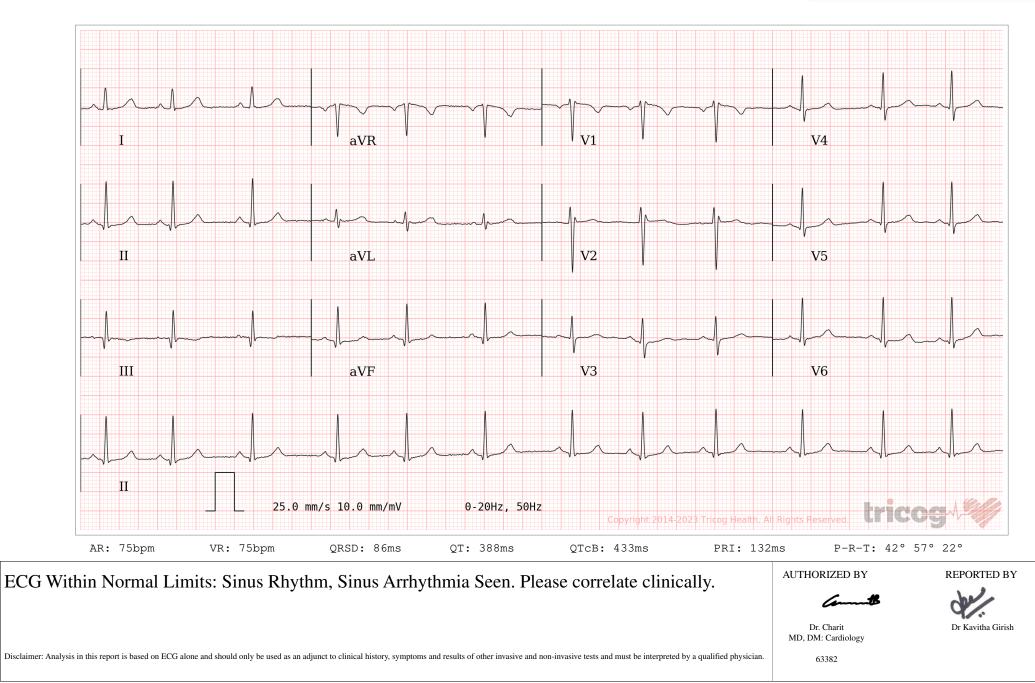
LOCAL 10:24:58 GMT 04:54:58 Longitude 82.979020°

SUNDAY 09.24.2023 ALTITUDE 37 METER

Chandan Diagnostic



Age / Gender:28/FemaleDate and Time:24th Sep 23 10:13 AMPatient ID:CVAR0055162324Patient Name:Mrs.ARSHIKA SAHU-BOBS46892



	CHANDAN	DIAGNOS	TIC CENT	TRE	
Chandan	1	Mahmoorganj,Varanas	i		30
	Ph: 9235447795,0542				YEARS
Since 1991	CIN : U85110DL2003	PLC308206			
Patient Name	: Mrs.ARSHIKA SAHU-B	OBS46892	Registered C	0n : 24/Sep/2023 09	9:54:15
Age/Gender	: 28 Y 0 M 0 D /F		Collected	: 24/Sep/2023 1	
UHID/MR NO	: CVAR.0000041848		Received	: 24/Sep/2023 1	0:27:01
Visit ID	: CVAR0055162324		Reported	: 24/Sep/2023 1	1:11:48
Ref Doctor	: Dr.MEDIWHEEL VNS -		Status	: Final Report	
To at Name a	MEDIWHEL			MALE BELOW 40 YRS	
Test Name		Result	Unit	Bio. Ref. Interval	Method
Blood Group (AB	O&Rhtyping)*, Bloc	nd			
Blood Group	o a rin (yping) , biod	A			ERYTHROCYTE
вюба вгопр		A			MAGNETIZED
					TECHNOLOGY / TUBE
					AGGLUTINA
Rh (Anti-D)		POSITIVE	<i>,</i>		ERYTHROCYTE
					MAGNETIZED
					TECHNOLOGY / TUBE
					AGGLUTINA
Complete Blood (Count (CBC) * , Whole B	Blood			
		10.80	a (di	1 Day 14 5 22 5 g/dl	
Haemoglobin		10.80	g/dl	1 Day- 14.5-22.5 g/dl 1 Wk- 13.5-19.5 g/dl	
			A Charles	1 Mo- 10.0-18.0 g/dl	
				3-6 Mo- 9.5-13.5 g/dl	
				0.5-2 Yr- 10.5-13.5 g/dl	
				2-6 Yr- 11.5-15.5 g/dl	
				6-12 Yr- 11.5-15.5 g/dl	
				12-18 Yr 13.0-16.0 g/dl	
				Male- 13.5-17.5 g/dl Female- 12.0-15.5 g/dl	
TLC (WBC)	4	5,600.00	/Cu mm	4000-10000	ELECTRONIC IMPEDANCE
DLC		5,000.00	/ cu min	4000 10000	
Polymorphs (Neut	rophils)	68.00	%	55-70	ELECTRONIC IMPEDANCE
Lymphocytes		28.00	%	25-40	ELECTRONIC IMPEDANCE
Monocytes		2.00	%	3-5	ELECTRONIC IMPEDANCE
Eosinophils		2.00	%	1-6	ELECTRONIC IMPEDANCE
Basophils		0.00	%	<1	ELECTRONIC IMPEDANCE
ESR				-	
Observed		20.00	Mm for 1st hr.		
Corrected		10.00	Mm for 1st hr.	< 20	
PCV (HCT)		32.10	%	40-54	
Platelet count					
Platelet Count		2.71	LACS/cu mm	1.5-4.0	ELECTRONIC
					IMPEDANCE/MICROSCOPIC
PDW (Platelet Dist	tribution width)	nr	fL	9-17	ELECTRONIC IMPEDANCE
P-LCR (Platelet Lar	ge Cell Ratio)	nr	%	35-60	ELECTRONIC IMPEDANCE







Add: 99, Shivaji Nagar Mahmoorganj,Varanasi Ph: 9235447795,0542-3500227 CIN : U85110DL2003PLC308206



Patient Name	: Mrs.ARSHIKA SAHU-BOBS46892	Registered On	: 24/Sep/2023 09:54:15
Age/Gender	: 28 Y 0 M 0 D /F	Collected	: 24/Sep/2023 10:24:16
UHID/MR NO	: CVAR.0000041848	Received	: 24/Sep/2023 10:27:01
Visit ID	: CVAR0055162324	Reported	: 24/Sep/2023 11:11:48
Ref Doctor	: Dr.MEDIWHEEL VNS -	Status	: Final Report

DEPARTMENT OF HAEM ATOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
PCT (Platelet Hematocrit)	nr	%	0.108-0.282	ELECTRONIC IMPEDANCE
MPV (Mean Platelet Volume) RBCCount	nr	fL	6.5-12.0	ELECTRONIC IMPEDANCE
RBC Count Blood Indices (MCV, MCH, MCHC)	4.09	Mill./cu mm	3.7-5.0	ELECTRONIC IMPEDANCE
MCV	78.60	۶fl	80-100	CALCULATED PARAMETER
MCH	26.50	pg	28-35	CALCULATED PARAMETER
MCHC	33.70	%	30-38	CALCULATED PARAMETER
RDW-CV	16.10	%	11-16	ELECTRONIC IMPEDANCE
RDW-SD	48.40	fL	35-60	ELECTRONIC IMPEDANCE
Absolute Neutrophils Count	3,808.00	/cu mm	3000-7000	
Absolute Eosinophils Count (AEC)	112.00	/cu mm	40-440	

S.N. Sinton Dr.S.N. Sinha (MD Path)



Chaustan Since 1991	Add: 99, Shivaji Nagar Mahmoorganj, Varanasi Ph: 9235447795,0542-3500227 CIN : U85110DL2003PLC308206			
Patient Name	: Mrs.ARSHIKA SAHU-BOBS46892	Registered On	: 24/Sep/2023 09:54:16	
Age/Gender	: 28 Y 0 M 0 D /F	Collected	: 24/Sep/2023 15:53:18	
UHID/MR NO	: CVAR.0000041848	Received	: 24/Sep/2023 15:55:14	
Visit ID	: CVAR0055162324	Reported	: 24/Sep/2023 16:54:52	
Ref Doctor	: Dr.MEDIWHEEL VNS -	Status	: Final Report	

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE FASTING, Plasma				
Glucose Fasting	90.40	mg/dl	< 100 Normal 100-125 Pre-diabetes ≥ 126 Diabetes	GOD POD

Interpretation:

a) Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.
b) A negative test result only shows that the person does not have diabetes at the time of testing. It does not mean that the person will never get diabetics in future, which is why an Annual Health Check up is essential.
c) I.G.T = Impared Glucose Tolerance.

Glucose PP Sample:Plasma After Meal	126.00	mg/dl	<140 Normal 140-199 Pre-diabetes >200 Diabetes	GOD POD

Interpretation:

a) Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.b) A negative test result only shows that the person does not have diabetes at the time of testing. It does not mean that the person will never get diabetics in future, which is why an Annual Health Check up is essential.c) I.G.T = Impared Glucose Tolerance.

S.N. Sinta

Dr.S.N. Sinha (MD Path)

Page 3 of 10





Add: 99, Shivaji Nagar Mahmoorganj,Varanasi Ph: 9235447795,0542-3500227 CIN : U85110DL2003PLC308206



Patient Name	: Mrs.ARSHIKA SAHU-BOBS46892	Registered On	: 24/Sep/2023 09:54:17
Age/Gender	: 28 Y 0 M 0 D /F	Collected	: 24/Sep/2023 10:24:16
UHID/MR NO	: CVAR.0000041848	Received	: 25/Sep/2023 16:38:57
Visit ID	: CVAR0055162324	Reported	: 25/Sep/2023 18:27:49
Ref Doctor	: Dr.MEDIWHEEL VNS -	Status	: Final Report

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLYCOSYLATED HAEM OGLOBIN (HBA1C) * '				
Glycosylated Haemoglobin (HbA1c)	5.40	% NGSP		HPLC (NGSP)
Glycosylated Haemoglobin (HbA1c)	36.00	mmol/mol/IFCC		

mg/dl

Interpretation:

NOTE:-

Estimated Average Glucose (eAG)

- eAG is directly related to A1c.
- An A1c of 7% -the goal for most people with diabetes-is the equivalent of an eAG of 154 mg/dl.

108

• eAG may help facilitate a better understanding of actual daily control helping you and your health care provider to make necessary changes to your diet and physical activity to improve overall diabetes mnagement.

The following ranges may be used for interpretation of results. However, factors such as duration of diabetes, adherence to therapy and the age of the patient should also be considered in assessing the degree of blood glucose control.

Haemoglobin A1C (%)NGSP	mmol/mol / IFCC Unit	eAG (mg/dl)	Degree of Glucose Control Unit
> 8	>63.9	>183	Action Suggested*
7-8	53.0 -63.9	154-183	Fair Control
< 7	<63.9	<154	Goal**
6-7	42.1 -63.9	126-154	Near-normal glycemia
< 6%	<42.1	<126	Non-diabetic level

*High risk of developing long term complications such as Retinopathy, Nephropathy, Neuropathy, Cardiopathy, etc. **Some danger of hypoglycemic reaction in Type 1 diabetics. Some glucose intolerant individuals and "subclinical" diabetics may demonstrate HbA1C levels in this area.

N.B.: Test carried out on Automated VARIANT II TURBO HPLC Analyser.

<u>Clinical Implications:</u>

*Values are frequently increased in persons with poorly controlled or newly diagnosed diabetes.

*With optimal control, the HbA 1c moves toward normal levels.

*A diabetic patient who recently comes under good control may still show higher concentrations of glycosylated hemoglobin. This level declines gradually over several months as nearly normal glycosylated *Increases in glycosylated hemoglobin occur in the following non-diabetic conditions: a. Iron-deficiency anemia b. Splenectomy

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Page 4 of 10



Chauday Since 1991	Add: 99, Shivaji Nagar Mahmoorganj, Varanasi Ph: 9235447795,0542-3500227 CIN : U85110DL2003PLC308206			30 YEARS SINCE 1991
Patient Name	: Mrs.ARSHIKA SAHU-BOBS46892	Registered On	: 24/Sep/2023 09:54:17	
Age/Gender	: 28 Y 0 M 0 D /F	Collected	: 24/Sep/2023 10:24:16	
UHID/MR NO	: CVAR.0000041848	Received	: 25/Sep/2023 16:38:57	
Visit ID	: CVAR0055162324	Reported	: 25/Sep/2023 18:27:49	
Ref Doctor	: Dr.MEDIWHEEL VNS -	Status	: Final Report	
	DEPARTMENT	OF BIOCHEM ISTR	RY .	
	M EDIWHEEL BANK OF BAROD	AMALE& FEMA	LE BELOW 40 YRS	

Test Name Result Unit Bio. Ref. Interval	Method
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c. Alcohol toxicity d. Lead toxicity

*Decreases in A 1c occur in the following non-diabetic conditions: a. Hemolytic anemia b. chronic blood loss

CHANDAN DIAGNOSTIC CENTRE

*Pregnancy d. chronic renal failure. Interfering Factors:

*Presence of Hb F and H causes falsely elevated values. 2. Presence of Hb S, C, E, D, G, and Lepore (autosomal recessive mutation resulting in a hemoglobinopathy) causes falsely decreased values.

Dr. Anupam Singh (MBBS MD Pathology)

Page 5 of 10





Add: 99, Shivaji Nagar Mahmoorganj,Varanasi Ph: 9235447795,0542-3500227 CIN : U85110DL2003PLC308206



Age/Gender : UHID/MR NO : Visit ID :	Mrs.ARSHIKA SAHU-BOBS 28 Y 0 M 0 D /F CVAR.0000041848 CVAR0055162324 Dr.MEDIWHEEL VNS -	46892	Registered On Collected Received Reported Status	: 24/Sep/2023 09:54 : 24/Sep/2023 10:24 : 24/Sep/2023 10:27 : 24/Sep/2023 11:54 : Final Report	:16 :02
	C	EPARTMENT (OF BIOCHEM IST	RY	
	M EDIWHEEL BAI	NK OF BAROD	AMALE& FEMA	LE BELOW 40 YRS	
Test Name		Result	Unit	Bio. Ref. Interval	Method
BUN (Blood Urea Nitr Sample:Serum	rogen)	9.70	mg/dL	7.0-23.0	CALCULATED
Oreatinine Sample:Serum		1.10	mg/dl	0.5-1.30 Spot Urine-Male- 20-275 Female-20-320	MODIFIED JAFFES
Uric Acid Sample:Serum		4.70	mg/dl	2.5-6.0	URICASE
LFT (WITH GAMMA	AGT) * , <i>S</i> erum				
SGOT / Aspartate A	minotransferase (AST)	31.50	U/L	< 35	IFCC WITHOUT P5P
SGPT / Alanine Ami		19.80	U/L	< 40	IFCC WITHOUT P5P
Gamma GT (GGT)	and the second second	19.70	IU/L	11-50	OPTIMIZED SZAZING
Protein		7.40	gm/dl	6.2-8.0	BIURET
Albumin		4.00	gm/dl	3.4-5.4	B.C.G.
Glob <mark>ulin</mark>		3.40	gm/dl	1.8-3.6	CALCULATED
A:G Ratio		1.18		1.1-2.0	CALCULATED
Alkaline Phosphata	se (Total)	69.70	U/L	42.0-165.0	IFCC METHOD
Bilirubin (Total)		0.60	mg/dl	0.3-1.2	JENDRASSIK & GROF
Bilirubin (Direct)		0.30	mg/dl	< 0.30	JENDRASSIK & GROF
Bilirubin (Indirect)		0.30	mg/dl	< 0.8	JENDRASSIK & GROF
LIPID PROFILE (M	NI), Serum				
Cholesterol (Total)		123.00	mg/dl	<200 Desirable 200-239 Borderline High > 240 High	CHOD-PAP
HDL Cholesterol (Go	ood Cholesterol)	44.00	mg/dl	30-70	DIRECT ENZYMATIC
LDL Cholesterol (Ba	d Cholesterol)	68	mg/dl	< 100 Optimal 100-129 Nr. Optimal/Above Optima	
			الم 1	130-159 Borderline High 160-189 High > 190 Very High	
VLDL		19.00	mg/dl	10-33	CALCULATED
Triglycerides		95.00	mg/dl	< 150 Normal 150-199 Borderline High 200-499 High >500 Very High	GPO-PAP



Page 6 of 10



Add: 99, Shivaji Nagar Mahmoorganj,Varanasi Ph: 9235447795,0542-3500227 CIN : U85110DL2003PLC308206



Patient Name	: Mrs.ARSHIKA SAHU-BOBS46892	Registered On	: 24/Sep/2023 09:54:17
Age/Gender	: 28 Y 0 M 0 D /F	Collected	: 24/Sep/2023 10:24:16
UHID/MR NO	: CVAR.0000041848	Received	: 24/Sep/2023 10:27:02
Visit ID	: CVAR0055162324	Reported	: 24/Sep/2023 11:54:41
Ref Doctor	: Dr.MEDIWHEEL VNS -	Status	: Final Report

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name

Result

Unit

Method

Bio. Ref. Interval

S.N. Sinton Dr.S.N. Sinha (MD Path)

ISO 9001:2015

Page 7 of 10



	CHANDAN	DIAGNOST	TIC CENTR	RE	
Chaudau Since 1991	Add: 99, Shivaji Nagar M Ph: 9235447795,0542-3: CIN : U85110DL2003PI	500227			TRANS
					(Charles)
Patient Name Age/Gender	: Mrs.ARSHIKA SAHU-BOI : 28 Y 0 M 0 D /F	BS46892	Registered On Collected	: 24/Sep/2023 09 : 24/Sep/2023 10	
UHID/MR NO	: 28 1 0 1 0 D 71		Received	: 24/Sep/2023 10	
Visit ID	: CVAR0055162324		Reported	: 24/Sep/2023 11	
Ref Doctor	: Dr.MEDIWHEEL VNS -		Status	: Final Report	
	DE	PARTMENT OF (CLINICAL PATHO	DLOGY	
	MEDIWHEELB.	ANK OF BARODA	AMALE & FEMA	ALE BELOW 40 YRS	
Test Name		Result	Unit	Bio. Ref. Interval	Method
URINE EXAMINA Color Specific Gravity	ATION, ROUTINE* , Urine	LIGHT YELLOW 1.030			
Reaction PH		Acidic (6.5)			DIPSTICK
Protein		ABSENT	mg %	< 10 Absent 10-40 (+)	DIPSTICK
				40-200 (++)	
				200-500 (+++)	
		Section of the		> 500 (++++)	
Sugar		ABSENT	gms%	< 0.5 (+) 0.5-1.0 (++) 1-2 (+++)	DIPSTICK
Katana		ADCENT	mag/dl	>2 (++++)	
Ketone Bile Salts		ABSENT ABSENT	mg/dl	0.1-3.0	BIOCHEMISTRY
Bile Pigments		ABSENT			
Urobilinogen(1:2	0 dilution)	ABSENT			
Microscopic Exan		ADJENT		and a start of	
Epithelial cells		1-2/h.p.f			MICROSCOPIC EXAMINATION
Pus cells		ABSENT			
RBCs		ABSENT			MICROSCOPIC EXAMINATION
Cast		ABSENT			
Crystals		ABSENT			MICROSCOPIC
Others		ABSENT			EXAMINATION
SUGAR, FASTING	GSTAGE*, Urine				
Sugar, Fasting sta		ABSENT	gms%		
Interpretation:					
(+) < 0.5			,		1-
(++) 0.5-1.0					S.N. Sintos

Dr.S.N. Sinha (MD Path)



(+++) 1-2

(++++) > 2

CHANDAN DIAGNOSTIC CENTRE Add: 99, Shivaji Nagar Mahmoorganj,Varanasi



Add: 99, Shivaji Nagar Mahmoorganj, Varana Ph: 9235447795,0542-3500227 CIN : U85110DL2003PLC308206



Patient Name	: Mrs.ARSHIKA SAHU-BOBS46892	Registered On	: 24/Sep/2023 09:54:17
Age/Gender	: 28 Y 0 M 0 D /F	Collected	: 24/Sep/2023 10:24:16
UHID/MR NO	: CVAR.0000041848	Received	: 24/Sep/2023 16:13:53
Visit ID	: CVAR0055162324	Reported	: 24/Sep/2023 17:47:17
Ref Doctor	: Dr.MEDIWHEEL VNS -	Status	: Final Report

DEPARTMENT OF IMMUNOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
THYROID PROFILE - TOTAL * , Serum				
T3, Total (tri-iodothyronine)	128.00	ng/dl	84.61–201.7	CLIA
T4, Total (Thyroxine)	10.80	ug/dl	3.2-12.6	CLIA
TSH (Thyroid Stimulating Hormone)	3.030	μlU/mL	0.27 - 5.5	CLIA
Interpretation:				
		0.3-4.5 μIU/ 0.5-4.6 μIU/		2 1

0.3-4.3	µ10/mL	First Trimester
0.5-4.6	µIU/mL	Second Trimester
0.8-5.2	µIU/mL	Third Trimester
0.5-8.9	µIU/mL	Adults 55-87 Years
0.7-27	µIU/mL	Premature 28-36 Week
2.3-13.2	µIU/mL	Cord Blood > 37Week
0.7-64	µIU/mL	Child(21 wk - 20 Yrs.)
1-39	µIU/mL	Child 0-4 Days
1.7-9.1	µIU/mL	Child 2-20 Week

1) Patients having low T3 and T4 levels but high TSH levels suffer from primary hypothyroidism, cretinism, juvenile myxedema or autoimmune disorders.

2) Patients having high T3 and T4 levels but low TSH levels suffer from Grave's disease, toxic adenoma or sub-acute thyroiditis.

3) Patients having either low or normal T3 and T4 levels but low TSH values suffer from iodine deficiency or secondary hypothyroidism.

4) Patients having high T3 and T4 levels but normal TSH levels may suffer from toxic multinodular goiter. This condition is mostly a symptomatic and may cause transient hyperthyroidism but no persistent symptoms.

5) Patients with high or normal T3 and T4 levels and low or normal TSH levels suffer either from T3 toxicosis or T4 toxicosis respectively.

6) In patients with non thyroidal illness abnormal test results are not necessarily indicative of thyroidism but may be due to adaptation to the catabolic state and may revert to normal when the patient recovers.

7) There are many drugs for eg. Glucocorticoids, Dopamine, Lithium, Iodides, Oral radiographic dyes, etc. which may affect the thyroid function tests.

8) Generally when total T3 and total T4 results are indecisive then Free T3 and Free T4 tests are recommended for further confirmation along with TSH levels.

S.n. Sinta

Dr.S.N. Sinha (MD Path)



Home Sample Collection 1800-419-0002



Add: 99, Shivaji Nagar Mahmoorganj,Varanasi Ph: 9235447795,0542-3500227 CIN : U85110DL2003PLC308206



Patient Name	: Mrs.ARSHIKA SAHU-BOBS46892	Registered On	: 24/Sep/2023 09:54:18
Age/Gender	: 28 Y 0 M 0 D /F	Collected	: N/A
UHID/MR NO	: CVAR.0000041848	Received	: N/A
Visit ID	: CVAR0055162324	Reported	: 25/Sep/2023 10:28:34
Ref Doctor	: Dr.MEDIWHEEL VNS -	Status	: Final Report

DEPARTMENT OF X-RAY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

X-RAY DIGITAL CHEST PA *

X- Ray Digital Chest P.A. View

- Haziness seen in right mid lung zone.
- Rest of the lung fields are clear.
- Pleural spaces are clear.
- Both hilar shadows appear normal.
- Trachea and carina appear normal.
- Heart size within normal limits.
- Both the diaphragms appear normal.
- Soft tissues and Bony cage appear normal.

IMPRESSION

- SEGMENTAL AIR SPACE CONSOLIDATION
- KINDLY CORRELATE CLINICALLY

*** End Of Report ***

(**) Test Performed at Chandan Speciality Lab.

Result/s to Follow:

STOOL, ROUTINE EXAMINATION, SUGAR, PP STAGE, ECG / EKG, ULTRASOUND WHOLE ABDOMEN (UPPER & LOWER)



Dr Raveesh Chandra Roy (MD-Radio)

This report is not for medico legal purpose. If clinical correlation is not established, kindly repeat the test at no additional cost within seven days

Facilities: Pathology, Bedside Sample Collection, Health Check-ups, Digital X-Ray, ECG (Bedside also), Allergy Testing, Test And Health Check-ups, Ultrasonography, Sonomammography, Bone Mineral Density (BMD), Doppler Studies, 2D Echo, CT Scan, MRI, Blood Bank, TMT, EEG, PFT, OPG, Endoscopy, Digital Mammography, Electromyography (EMG), Nerve Condition Velocity (NCV), Audiometry, Brainstem Evoked Response Audiometry (BERA), Colonoscopy, Ambulance Services, Online Booking Facilities for Diagnostics, Online Report Viewing * 365 Days Open *Facilities Available at Select Location

Page 10 of 10









Name of Company: Medi wheel (BOB)
Name of Executive: MR / MRS. Authika Sarty
Date of Birth:
Sex: Mate / Fernale
Height:
Weight:
BMI (Body Mass Index): 26.7
Chest (Expiration / Inspiration)
Abdomen:CMs
Blood Pressure: 106
Pulse:
Respiration Rate:
Ident. Mark: Mole on Note
Any Allergies: Itching - 64eon
Vertigo: NO
Any Medications: (I) NO
Any Surgical History: (I)
Habits of alcoholism/smoking/tobacco: (I) れつ
Chief Complaints if any: NO
Lab Investigation Reports: NO
Eye Check up - vision & Color vision: Almal E Powlar Glass - 5;
Left eye: Nouma ? Provide the company
Eye Check up - vision & Color vision: Normal & power Glads - 5; Left eye: Normal & Power not Corofdium by Client, Right eye: Normal & Power not Corofdium by Client,









N16 Near vision: Far vision : Dental check up : Normal ENT Check up : Eye Checkup:

616E Whapp Nonma Normal

Final impression

Certified that I examined Anghika Sahy S/O D/O W/O is presently in good health and free from any cardio-respiratory / communicable ailment, he/she is fit / Unfit to join any organization.

Client Signature: -

Dr. R.C. RO MRRS. MD. (Radio D Reg No .-

Signature of Medical Examiner

Name & Qualification - Dr. R. C. Roy (MBBS, MD) Place - VARANASI handan Diagnostic Center 19, Shivaji Nagar, Mahmoorgani Varanasi-221010 (U.P. Phone No.:0542-2223232

