



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. SMITHA RAJ
	2.	Mark of Identification	100	(Mole/Scar/any other (specify location)):
	3.	Age/Date of Birth	:	01-01-1976 Gender: (F/M
	4.	Photo ID Checked	:	(Passport/Election Card/PAN Card/Driving Licence/Company ID)
DI	IVC	ICAL DETAILS:		

a. Height	b. Weight5. & (Kgs) e. Blood Pressure:	c. Girth of Abdomen		
	1st Reading			
	2 nd Reading			

FAMILY HISTORY:

Relation	Age if Living	Health Status	If deceased, age at the time and cause
Father		_	
Mother			and the second s
Brother(s)		/ NS	
Sister(s)		FIT for employer and	On you thick not sees VEDICALEY FT or EN

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

Tobacco in any form	Sedative	Alcohol
na samo nastria.	bowe imavidual after verification i	confirm that I have examined the p

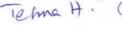
PERSONAL HISTORY

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

Have you ever suffered from any of the following?

- · Psychological Disorders or any kind of disorders of the Nervous System?
- · Any disorders of Respiratory system?
- · Any Cardiac or Circulatory Disorders?
- Enlarged glands or any form of Cancer/Tumour?
- · Any Musculoskeletal disorder?

- Any disorder of Gastrointestinal System?
- Unexplained recurrent or persistent fever, and/or weight loss
- · Have you been tested for HIV/HBsAg / HCV before? If yes attach reports
- Are you presently taking medication of any kind?









Any disorders of Urinary System?



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

FOR FEMALE CANDIDATES ONLY

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



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



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



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



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



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



CONFIDENTAIL COMMENTS FROM MEDICAL EXAMINER

➤ Was the examinee co-operative?



> Is there anything about the examine'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?

> Based on your clinical impression, please provide your suggestions and recommendations below;

M.	lica	l con	sult
			•••••

➤ 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

Dr. GEORGE THOMAS

Seal of Medical Examiner

MD, FCSI, FIAE MEDICAL EXAMINER Reg: 85011

Name & Seal of DDRC SRL Branch

DAVIL BUILDINGS

Date & Time

27/03/2023

DDRC SRL Diagnostics Limited







I have not done the below mentioned fests during thealth cheekup at PDRC Pamampi Mynagar on 25/3/2023.

1- TAMT

2. Porpenser
3. Motion Test

Smitha Rag









CLIENT CODE: CA00010147 - MEDIWHEEL CLIENT'S NAME AND ADDRESS! TUCADE LIMITED

MEDIWHEEL ARCOFEMI HEALTHCARE LIMITED F701A, LADO SARAI, NEW DELHI, SOUTH DELHI, DELHI, SOUTH DELHI 110030 DELHI INDIA 8800465156

DDRC SRL DIAGNOSTICS DDRC SRL Tower, G-131,Panampilly Nagar, PANAMPALLY NAGAR, 682036 KERALA, INDIA Tel: 93334 93334

Email: customercare.ddrc@srl.in

PATIENT NAME: MRS. SMITHA RAJ

PATIENT ID : SMITF2503774126

ACCESSION NO: 4126WC008889 AGE: 46 Years SEX: Female

ABHA NO:

DRAWN:

RECEIVED: 25/03/2023 09:15

REPORTED: 27/03/2023 08:57

CLIENT PATIENT ID:

Test Report Status

Preliminary

REFERRING DOCTOR: DR. MEDIWHEEL ARCOFEMI HEALTHCARE LIMITED

Results

Biological Reference Interval Units

MEDIWHEEL HEALTH CHECKUP ABOVE 40(F)TMT

TREADMILL TEST

TREADMILL TEST

TEST NOT DONE

OPTHAL

OPTHAL

TEST COMPLETED











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Test Report Status <u>Preliminary</u>	Results			Units
MEDIWHEEL HEALTH CHECKUP ABOVE 40(F)	IMI			
BLOOD UREA NITROGEN (BUN), SERUM				
BLOOD UREA NITROGEN METHOD: UREASE - UV	7	Adu	ılt(<60 yrs) : 6 to 20	mg/dL
BUN/CREAT RATIO				
BUN/CREAT RATIO	10.14			
CREATININE, SERUM				
CREATININE METHOD: JAFFE KINETIC METHOD	0.69	18	- 60 yrs : 0.6 - 1.1	mg/dL
GLUCOSE, POST-PRANDIAL, PLASMA				
GLUCOSE, POST-PRANDIAL, PLASMA	182	Imp Pred	betes Mellitus : > or = 200. paired Glucose tolerance/ diabetes : 140 - 199. poglycemia : < 55.	mg/dL
METHOD: HEXOKINASE		,,	rogiyeemia . < 55.	
IPID PROFILE, SERUM				
CHOLESTEROL	235		irable : < 200 derline : 200-239 h : >or= 240	mg/dL
METHOD : CHOD-POD				
TRIGLYCERIDES	162	High Nor High Hyp Ven		mg/dL
HDL CHOLESTEROL METHOD: DIRECT ENZYME CLEARANCE	41	Gen	eral range : 40-60	mg/dL
DIRECT LDL CHOLESTEROL	174	Boro High	ve Optimum : 100-139 derline High : 130-159	mg/dL
NON HDL CHOLESTEROL	194	High Des Abor Bord High	irable: Less than 130 ve Desirable: 130 - 159 derline High: 160 - 189 n: 190 - 219 y high: > or = 220	mg/dL
/ERY LOW DENSITY LIPOPROTEIN	32.4		irable value :	mg/dL











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CLIENT PATIENT ID:

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CHOL/HDL RATIO	5.7	High	3.3-4.4 Low Risk 4.5-7.0 Average Risk 7.1-11.0 Moderate Risk > 11.0 High Risk	
LDL/HDL RATIO	4.2	High	0.5 - 3.0 Desirable/Low Risk 3.1 - 6.0 Borderline/Moderate R	isk
LYCOSYLATED HEMOGLOBIN(HBA1C), EDTA	WHOLE		>6.0 High Risk	*
GLYCOSYLATED HEMOGLOBIN (HBA1C)	6.2		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%.	
MEAN PLASMA GLUCOSE IVER FUNCTION TEST WITH GGT	131.2	High	< 116.0	mg/dL
BILIRUBIN, TOTAL METHOD: DIAZO METHOD	0.67		General Range : < 1.1	mg/dL
ILIRUBIN, DIRECT METHOD: DIAZO METHOD	0.23		General Range : < 0.3	mg/dL
SILIRUBIN, INDIRECT	0.44		0.00 - 0.60	mg/dL
OTAL PROTEIN	7.9		Ambulatory: 6.4 - 8.3 Recumbant: 6 - 7.8	g/dL
LBUMIN	4.8		20-60yrs : 3.5 - 5.2	g/dL
GLOBULIN	3.1		2.0 - 4.0 Neonates - Pre Mature: 0.29 - 1.04	g/dL
LBUMIN/GLOBULIN RATIO	1.5		1.00 - 2.00	RATIO
SPARTATE AMINOTRANSFERASE AST/SGOT)	54		Adults: < 33	U/L
LANINE AMINOTRANSFERASE ALT/SGPT) METHOD: IFCC WITHOUT PDP	96		Adults : < 34	U/L
ALKALINE PHOSPHATASE	69		Adult (<60yrs) : 35 - 105	U/L











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Test Report Status <u>Preliminary</u>	Results		Units
METHOD : IFCC			
GAMMA GLUTAMYL TRANSFERASE (GGT) TOTAL PROTEIN, SERUM	36	Adult (female) : < 40	U/L
TOTAL PROTEIN METHOD: BIURET	7.9	Ambulatory: 6.4 - 8.3 Recumbant: 6 - 7.8	g/dL
JRIC ACID, SERUM			
URIC ACID METHOD: SPECTROPHOTOMETRY	5.3	Adults : 2.4-5.7	mg/dL
ABO GROUP & RH TYPE, EDTA WHOLE BLOOD			
ABO GROUP METHOD: GEL CARD METHOD	TYPE O		
RH TYPE	POSITIVE		
BLOOD COUNTS,EDTA WHOLE BLOOD			
HEMOGLOBIN METHOD: NON CYANMETHEMOGLOBIN	12.5	12.0 - 15.0	g/dL
RED BLOOD CELL COUNT METHOD: IMPEDANCE	4.10	3.8 - 4.8	mil/μL
WHITE BLOOD CELL COUNT METHOD: IMPEDANCE	7.66	4.0 - 10.0	thou/µL
PLATELET COUNT METHOD: IMPEDANCE	244	150 - 410	thou/µL
RBC AND PLATELET INDICES			
HEMATOCRIT METHOD: CALCULATED	37.4	36 - 46	%
MEAN CORPUSCULAR VOL METHOD: DERIVED FROM IMPEDANCE MEASURE	91.4	83 - 101	fL
MEAN CORPUSCULAR HGB. METHOD: CALCULATED	30.6	27.0 - 32.0	pg
MEAN CORPUSCULAR HEMOGLOBIN CONCENTRATION METHOD: CALCULATED	33.5	31.5 - 34.5	g/dL
RED CELL DISTRIBUTION WIDTH	14.3	12.0 - 18.0	%
MENTZER INDEX	22.3		
MEAN PLATELET VOLUME METHOD: DERIVED FROM IMPEDANCE MEASURE	8.5	6.8 - 10.9	fL
WBC DIFFERENTIAL COUNT			

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CIN: U85190MH2006PTC161480

(Refer to "CONDITIONS OF REPORTING" Overleaf)





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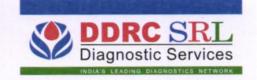
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Test Report Status <u>Preliminary</u>	Results			Units
SEGMENTED NEUTROPHILS METHOD: DHSS FLOWCYTOMETRY	57		40 - 80	%
LYMPHOCYTES METHOD: DHSS FLOWCYTOMETRY	34		20 - 40	%
MONOCYTES METHOD: DHSS FLOWCYTOMETRY	7		2 - 10	%
EOSINOPHILS METHOD: DHSS FLOWCYTOMETRY	2		1 - 6	%
BASOPHILS METHOD: IMPEDANCE	0		0 - 2	%
ABSOLUTE NEUTROPHIL COUNT METHOD: CALCULATED	4.37		2.0 - 7.0	thou/µL
ABSOLUTE LYMPHOCYTE COUNT METHOD: CALCULATED	2.60		1-3	thou/µL
ABSOLUTE MONOCYTE COUNT METHOD: CALCULATED	0.54		0.20 - 1.00	thou/µL
ABSOLUTE EOSINOPHIL COUNT METHOD: CALCULATED	0.15		0.02 - 0.50	thou/µL
ABSOLUTE BASOPHIL COUNT NEUTROPHIL LYMPHOCYTE RATIO (NLR) ERYTHROCYTE SEDIMENTATION RATE (ESR),W	0.00 1.7		0.00 - 0.10	thou/µL
BLOOD				
SEDIMENTATION RATE (ESR) METHOD: WESTERGREN METHOD	26	High	0 - 20	mm at 1 hr
SUGAR URINE - POST PRANDIAL				
SUGAR URINE - POST PRANDIAL CYTOLOGY - CS (PAP SMEAR)	NOT DETECTED RESULT PENDING		NOT DETECTED	
THYROID PANEL, SERUM				
ТЗ	136.80		Non-Pregnant Women 80.0 - 200.0 Pregnant Women 1st Trimester:105.0 - 230.0 2nd Trimester:129.0 - 262.0 3rd Trimester:135.0 - 262.0	ng/dL









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Test Report Status <u>Preliminary</u>	Results		Units
Т4	8.36	Non-Pregnant Women 5.10 - 14.10 Pregnant Women 1st Trimester: 7.33 - 14.80 2nd Trimester: 7.93 - 16.10 3rd Trimester: 6.95 - 15.70	μg/dl
TSH 3RD GENERATION SUGAR URINE - FASTING	3.550	Non-Pregnant : 0.4-4.2 Pregnant Trimester-wise : 1st : 0.1 - 2.5 2nd : 0.2 - 3 3rd : 0.3 - 3	μIU/mL
SUGAR URINE - FASTING PHYSICAL EXAMINATION, URINE	NOT DETECTED	NOT DETECTED	
COLOR APPEARANCE CHEMICAL EXAMINATION, URINE	PALE YELLOW CLEAR		
PH	6.5	4.8 - 7.4	
SPECIFIC GRAVITY PROTEIN GLUCOSE KETONES BLOOD BILIRUBIN UROBILINOGEN NITRITE LEUKOCYTE ESTERASE MICROSCOPIC EXAMINATION, URINE	NOT DETECTED NOT DETECTED NOT DETECTED NOT DETECTED NOT DETECTED NORMAL NOT DETECTED NOT DETECTED	1.015 - 1.030 NOT DETECTED NOT DETECTED NOT DETECTED NOT DETECTED NOT DETECTED NORMAL NOT DETECTED NOT DETECTED	
RED BLOOD CELLS	NOT DETECTED	NOT DETECTED	/HPF
WBC EPITHELIAL CELLS CASTS CRYSTALS	1-2 0-1 NOT DETECTED NOT DETECTED	0-5 0-5	/HPF /HPF
BACTERIA YEAST GLUCOSE FASTING, FLUORIDE PLASMA	NOT DETECTED NOT DETECTED	NOT DETECTED NOT DETECTED	











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Preliminary

Results

Units

GLUCOSE, FASTING, PLASMA

109

Diabetes Mellitus : > or = 126.

CLIENT PATIENT ID:

mg/dL

Impaired fasting Glucose/ Prediabetes: 101 - 125. Hypoglycemia : < 55.

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CIN: U85190MH2006PTC161480

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Units

MEDIWHEEL HEALTH CHECKUP ABOVE 40(F)TMT

ECG WITH REPORT

REPORT

TEST COMPLETED

MAMMOGRAPHY-BOTH

TEST COMPLETED

USG ABDOMEN AND PELVIS

TEST COMPLETED

CHEST X-RAY WITH REPORT

REPORT

TEST COMPLETED

End Of Report Please visit www.ddrcsrl.com for related Test Information for this accession

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

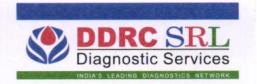
Immunology

DR.VIJAY K N,MBBS MD(PATH) (Reg No - KMC:91816) HEAD-HAEMATOLOGY & **CLINICAL PATHOLOGY**

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



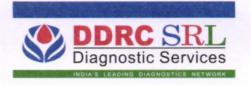




Date. 25. 03. 2023

OPHTHALMOLOGY REPORT

This is to certif	y that I have examined	
Mr / Ms : . Amil	Aged	
visual standard	s is as follows :	
Visual Acuity:	R:	
For far vision	L:616	
For near vision	R: MIO. PNG Rpurp NG L: NIO.	
Color Vision :	Normal	
	Nannu Elizabeth	+ 100
	(Optometrist)	



This is to certify that I have examined

MR/MS SMITHA	aged 46 and
	5-4

his / her oral findings are as follows

D - Decay

M - Missing

F - Filling

			M	1										M	V
8	7	6	(5)	4	3	2	1	1	2	3	4	5	(6)	7	8
8	7	6	5	4	3	2	1	1	2	3	4	5	6	(7)	8
D	E							+	-	+		+-		<u>_</u>	-

Oral hygiene status : Good / Fair / Poor

Calculus / Stains:

Calculust

Any other findings:

6 1 6 Crown. Adv. Scaling

Date:

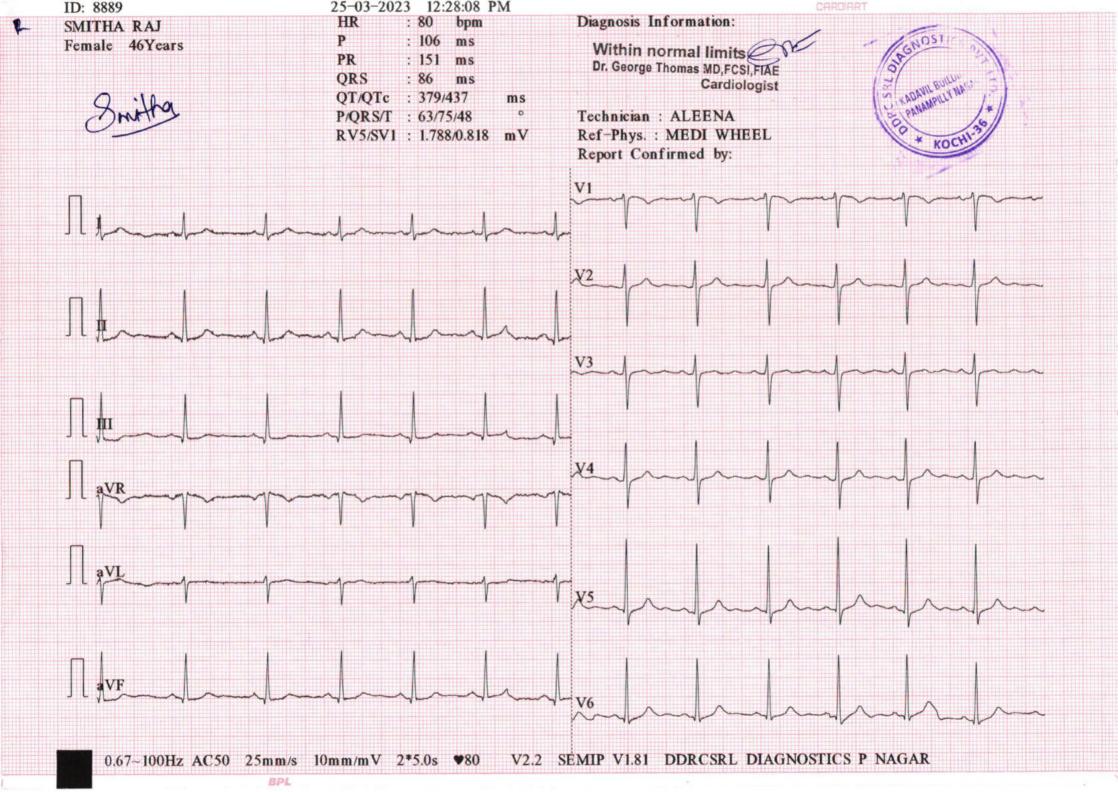
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Dr. Sain Corol

FOR KALARICKAL DENTAL CARE

CIN: U85190MH2006PTC161480

(Refer to "CONDITIONS OF REPORTING" Overleaf)





NAME: MRS SMITHA RAJ	STUDY DATE 25/03/2023
AGE / SEX: 46 YRS / F	REPORTING DATE 25/03/2023
REFERRED BY :MEDIWHEEL	ACC NO: 4126WC008889

X - RAY - CHEST PA VIEW

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

IMPRESSION: NORMAL STUDY

Kindly correlate clinically

Dr. NAVNEET KAUR, MBBS,MD Consultant Radiologist.





NAME	MRS SMITHA RAJ	AGE	46 YRS
SEX	FEMALE	DATE	March 25, 2023
REFERRAL	MEDIWHEEL	ACC NO	4126WC008889

MAMMOGRAPHY

Technique: Bilateral MLO and CC views Clinical details: Screening mammography.

Findings:

- Both breasts show ACR type B composition.
- Prominent left axillary folds are seen. Post operative changes are noted in right axilla.
- Breast parenchymal architecture is preserved.
- No evidence of micro/macro calcifications seen in breast.
- The skin, nipple-areola complex and retro-areolar zone are normal.
- The retro-mammary clear zone and underlying pectoralis muscle appear normal

ULTRASOUND SCREENING:

RIGHT BREAST

- · Normal stromal echogenicity.
- · No focal lesions seen in the present study.
- Nipple & areola normal.
- · No evidence of axillary lymphadenopathy

LEFT BREAST

- Few tiny cysts are seen, largest measuring 2.7 x 1.5 mm at 1o' clock location about 2cm away from the nipple.
- · Nipple & areola normal.
- No evidence of axillary lymphadenopathy. Unencapsulated prominent left axillary fat is noted. No definite mass lesion seen.

IMPRESSION:

- Prominent left axillary fat pad.

Dr. NAVNEET KAUR MBBS . MD Consultant Radiologist

NAMPILLY NAGAR

ACR BIRADS Category

More information is needed to give a final mammogram report
Your mammogram is normal.
Your mammogram shows only minor abnormalities that are not suspicious for cancer. No additional testing is needed.
Your mammogram shows minor abnormalities that are probably benign. The radiologist may recommend follow-up testing to make sure the suspicious area has not changed.
Your mammogram shows a suspicious change, and a biopsy should probably be performed.
Your mammogram shows a worrisome change. A biopsy is strongly recommended.
Known biopsy - proven malignancy; Surgical excision when clinically appropriate.

For Emergency Call: 9496005127. Thanks for referral. Your feedback will be appreciated. (Please bring relevant investigation reports during all visits)

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NAME	MRS SMITHA RAJ	AGE	46 YRS
SEX	FEMALE	DATE	March 25, 2023
REFERRAL	MEDIWHEEL	ACC NO	4126WC008889

USG ABDOMEN AND PELVIS

LIVER Measures ~ 11.6 cm. Bright echotexture.

> Smooth margins and no obvious focal lesion within. No IHBR dilatation. Portal vein normal in caliber.

GB Partially contracted.

SPLEEN Measures ~ 8.3 cm, normal to visualized extent. Splenic vein normal.

PANCREAS Normal to visualized extent. PD is not dilated.

KIDNEYS RK: 9.2 x 3.7 cm, appears normal in size and echotexture.

LK: 10.2 x 4.5 cm, shows 3.8 mm calculus in lower calyx.

Maintained corticomedullary differentiation and normal parenchymal thickness.

No hydroureteronephrosis.

BLADDER Normal wall caliber, no internal echoes/calculus within.

UTERUS Post hysterectomy status.

OVARIES RT OV: $2.1 \times 1.3 \times 1.2 \text{ cm}$ [volume ~ 1.9 cc].

LT OV: 2.4 x 1.2 x 1.7 cm [volume ~ 2.9 cc].

NODES/FLUID Nil to visualized extent.

BOWEL Visualized bowel loops appear normal.

IMPRESSION Grade I fatty liver. Left renal calculus.

Kindly correlate clinically.

Dr. NAVNEET KAUR MBBS . MD **Consultant Radiologist**

KOCHI

Thank you for referral. Your feedback will be appreciated.

ge finding and not a diagnosis by itself. It has to be correlated and interpre

(Refer to "CONDITIONS OF REPORTING" Overleaf)

CIN: U85190MH2006PTC161480





