



बैंक ऑफ़ बड़ौदा
Bank of Baroda



नाम

Name RAHUL INDRAJEET LAKDE

कर्मचारी कुट क्र.

E. C. No. 125722

NIKSH

जारीकर्ता प्राधिकारी
Issuing Authority

धारक के हस्ताक्षर

Signature of Holder



Siddhivinayak Hospital

Hosp. Reg. No.: TMC - Zone C - 386

INDUSTRIAL HEALTH SERVICES

FITNESS CERTIFICATE

Name : MR. RAHUL LAKADE

Medical Date - 23-9-23

Gender : MALE

AGE : 36 Y

PHYSICAL EXMINATION	Cardiovascular System	Respiratory System	Alimentary System
Height 173	Puls 70	Trachea : Normal	Liver NORMAL
Weight 63	BP 110/80	RR	Spleen NORMAL
BMI 21			Kidney NORMAL
SKIN NAD	Heart Sound:Normal	RS NAD	Hernia NO
NOSE NAD			Hydrocele NO
EAR & Tonsils: NAD			

Central Nervous System

X-Ray :- Normal

ECG :- WNL

PFT :- NA.

Employee Present History :-

NAD

Spects Without Glasses / With Glasses

VISION RIGHT LEFT

NEAR - N/ 8 N/ 12

DISTANT- 6/ 6 6/ 6

Colour Vision - NORMAL

Employee Family History :-

Father K1010 → HTN

ADVICE : Uric Acid → ↑↑



REMARK :- Employee is free from any infectious contagious & communicable diseases and joins his/her normal duties



S-1, Vedant Complex, Vartak Nagar, Thane (W) 400 606

E: ohs.svh@gmail.com W: www.siddhivinayakhospitals.org T.: 022 - 2588 3531 M.: 9769545533



23-09-2023 08:56:48 AM

ID: 1901

Rohit Lakade
Male
Years 36y 1m
Req. No. BP - 110/80 mm/hg
SpO₂ - 100%
PR - 70h

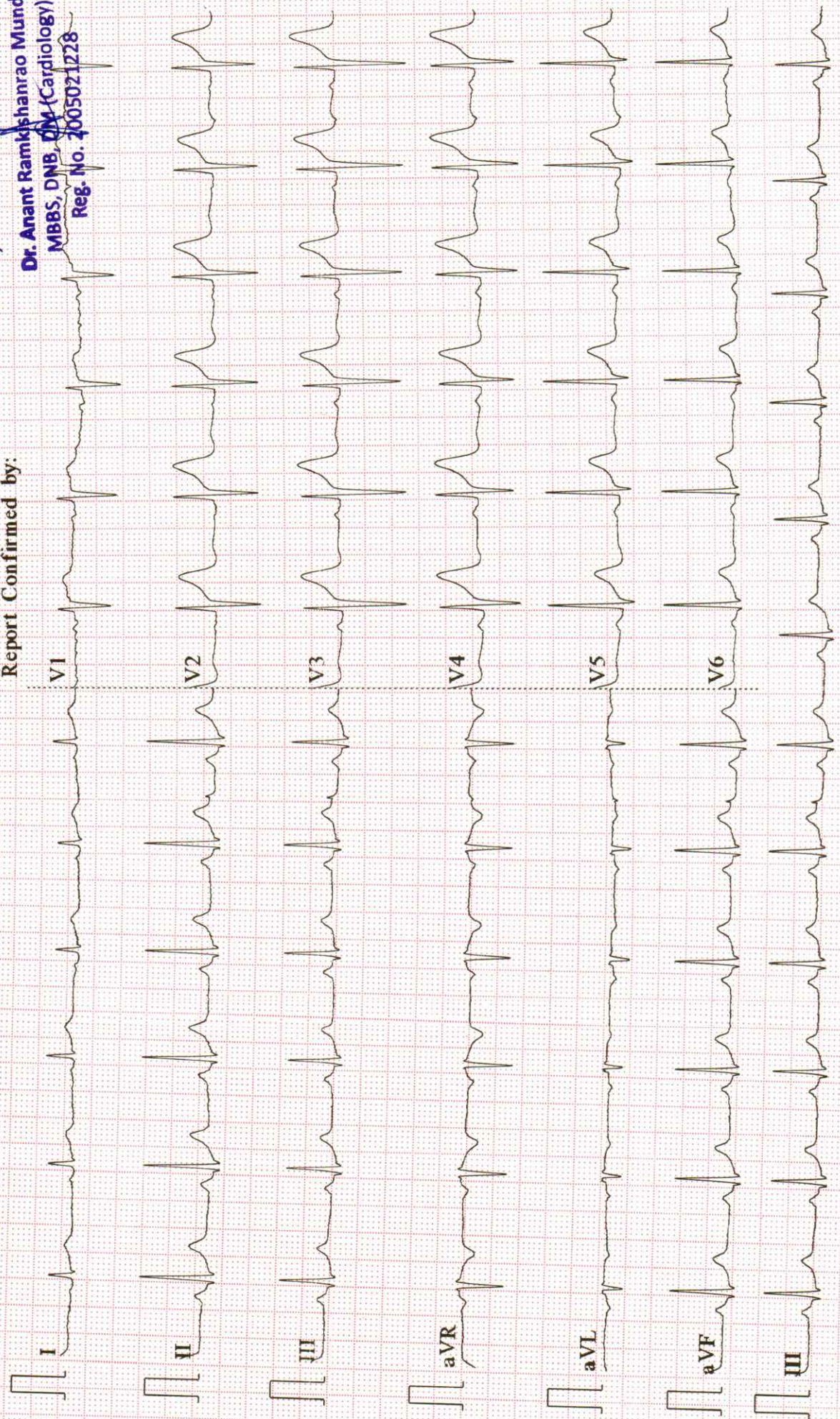
Diagnosis Information:
Sinus Rhythm
Normal ECG

NSR
No Significant ST-T changes

Adv - No qstive interventioax
sequized right Noo

Dr. Anant Ramkhanrao Munde
MBBS, DNB, DM (Cardiology)
Reg. No. 2005021228

Report Confirmed by:





ECHOCARDIOGRAM

NAME	MR. RAHUL LAKDE
AGE/SEX	36YRS/M
REFERRED BY	SIDDHIVINAYAK HOSPITAL
DOCTOR	DR. ANANT MUNDE, DNB, DM (CARDIOLOGY)
DATE OF EXAMINATION	23/09/2023

2D/M-MODE ECHOCARDIOGRAPHY

VALVES: MITRAL VALVE: <ul style="list-style-type: none"> • AML: Normal • PML: Normal • Sub-valvular deformity: Absent AORTIC VALVE: Normal <ul style="list-style-type: none"> • No. of cusps: 3 PULMONARY VALVE: Normal TRICUSPID VALVE: Normal	CHAMBERS: LEFT ATRIUM: Normal LEFT VENTRICLE: Normal <ul style="list-style-type: none"> • RWMA: No • Contraction: Normal RIGHT ATRIUM: Normal RIGHT VENTRICLE: Normal <ul style="list-style-type: none"> • RWMA: No • Contraction: Normal
GREAT VESSELS: <ul style="list-style-type: none"> • AORTA: Normal • PULMONARY ARTERY: Normal 	SEPTAE: <ul style="list-style-type: none"> • IAS: Intact • IVS: Intact
CORONARIES: Proximal coronaries normal CORONARY SINUS: Normal PULMONARY VEINS: Normal	VENACAVAE: <ul style="list-style-type: none"> • SVC: Normal • IVC: Normal and collapsing >20% with respiration PERICARDIUM: Normal

MEASUREMENTS:

AORTA		LEFT VENTRICLE STUDY		RIGHT VENTRICLE STUDY	
PARAMETER	OBSERVED VALUE	PARAMETER	OBSERVED VALUE	PARAMETER	OBSERVED VALUE
Aortic annulus	20 mm	Left atrium	30 mm	Right atrium	mm
Aortic sinus	mm	LVIDd	45.2 mm	RVd (Base)	mm
Sino-tubular junction	mm	LVIDs	27.9 mm	RVEF	%
Ascending aorta	mm	IVSd	8.0 mm	TAPSE	mm
Arch of aorta	mm	LVPWd	8.0 mm	MPA	mm
Desc. thoracic aorta	mm	LVEF	71 %	RVOT	mm
Abdominal aorta	mm	LVOT	mm	IVC	13.9 mm





Name - Mr. Rahul Lkade	Age - 36 Y/M
Ref by Dr.- Siddhivinayak Hospital	Date -23/09/2023

USG ABDOMEN & PELVIS

Clinical details:- Routine

The Liver is normal in size and shows normal echogenicity. There is no obvious abnormal focal lesion seen. There is no IHBR dilatation seen in both the lobes of the liver.

The CBD and the Portal vein appear normal.

The Gall bladder is well distended & appears normal. No calculi or filling defects are seen. No evidence of Pericholecystic collection. The wall thickness is normal.

Right Kidney measures 9.9 x 4.0 cm & appears normal in shape and position. There is no evidence of hydronephrosis or any calculi seen. Cortico-medullary differentiation is maintained.

Left Kidney measures 9.8 x 4.8 cm & appears normal in shape and position. There is no evidence of hydronephrosis or any calculi seen. Cortico-medullary differentiation is maintained.

The Pancreas is normal in size & shows homogenous echopattern. It shows no focal lesion.

The Spleen is normal in size (11.6 cm) with homogenous echotexture.

The urinary bladder is adequately distended and appears normal. There is no evidence of any obvious calculi or any mass lesion seen. Both Uretero-vesical junctions appear clear. No abnormal intraluminal lesion noted.


Prostate appears normal in size. The echotexture pattern is normal. there is no obvious focal lesion seen.

No free fluid or obvious lymphadenopathy is seen in abdomen and pelvis.

IMPRESSION:

- No significant abnormality seen.

Adv.: Clinical and lab correlation.


DR. MOHAMMAD SOHAIB
MBBS; DMRE
CONSULTANT RADIOLOGIST

Note: The above report represents interpretation of various radiographic / sonographic shadows, and hence has its own limitations. This report has to be co-related clinic-pathologically by the referring / physician and it does NOT represent the sole diagnosis. Second opinion is always advisable.





Name - Mr. Rahul Lakde	Age - 36 Y/M
Ref by Dr.- Siddhivinayak Hospital	Date - 23/09/2023

X- Ray chest (PA VIEW)

No obvious active parenchymal lesion seen in both lungs.

Cardiac and aortic shadows appear normal

No evidence of pleural of effusion is seen.

Both domes of diaphragm appear normal.

No obvious bony lesion is seen.

IMPRESSION:

- No significant abnormality seen.

Adv.: Clinical and lab correlation.


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Ref By	: SIDDHIVINAYAK HOSPITAL CGHS /ESIS	Report Status	: FINAL



***LIPID PROFILE**

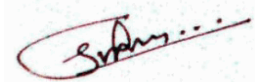
TEST NAME	RESULTS	UNIT	REFERENCE RANGE
TOTAL CHOLESTEROL (CHOLESTEROL OXIDASE, ESTERASE, PEROXIDASE)	185.0	mg/dL	Desirable blood cholesterol: - <200 mg/dl. Borderline high blood cholesterol: - 200 - 239 mg/dl. High blood cholesterol: - >239 mg/dl.
S.HDL CHOLESTEROL (DIRECT MEASURE - PEG)	35.6	mg/dL	Major risk factor for heart : <30 mg/dl. Negative risk factor for heart disease: >=80 mg/dl.
S. TRIGLYCERIDE (ENZYMATIC, END POINT)	217.5	mg/dL	Desirable level : <161 mg/dl. High : >= 161 - 199 mg/dl. Borderline High : 200 - 499 mg/dl. Very high : >499mg/dl.
VLDL CHOLESTEROL (CALCULATED VALUE)	44	mg/dL	UPTO 40
S.LDL CHOLESTEROL (CALCULATED VALUE)	106	mg/dL	Optimal: <100 mg/dl. Near Optimal: 100 - 129 mg/dl. Borderline High: 130 - 159 mg/dl. High : 160 - 189mg/dl. Very high : >= 190 mg/dl.
LDL CHOL/HDL RATIO (CALCULATED VALUE)	2.98		UPTO 3.5
CHOL/HDL CHOL RATIO (CALCULATED VALUE)	5.20		<5.0

Above reference ranges are as per **ADULT TREATMENT PANEL III** recommendation by **NCEP (May 2015)**.

Result relates to sample tested, Kindly correlate with clinical findings.

----- END OF REPORT -----

Checked By
SHAISTA Q



DR. SMITA RANVEER.
M.B.B.S.M.D. Pathology(Mum)
Consultant Histocytopathologist



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COMPLETE BLOOD COUNT

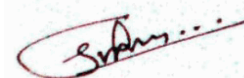
TEST NAME	RESULTS	UNIT	REFERENCE RANGE
HEMOGLOBIN	14.0	gm/dl	13 - 18
HEMATOCRIT (PCV)	42.0	%	42 - 52
RBC COUNT	4.88	x10 ⁶ /uL	4.70 - 6.50
MCV	86	fl	80 - 96
MCH	28.7	pg	27 - 33
MCHC	33	g/dl	33 - 36
RDW-CV	13.4	%	11.5 - 14.5
TOTAL LEUCOCYTE COUNT	4700	/cumm	4000 - 11000
<u>DIFFERENTIAL COUNT</u>			
NEUTROPHILS	59	%	40 - 80
LYMPHOCYTES	32	%	20 - 40
EOSINOPHILS	02	%	0 - 6
MONOCYTES	07	%	2 - 10
BASOPHILS	00	%	0 - 1
PLATELET COUNT	160000	/ cumm	150000 - 450000
MPV	11.4	fl	6.5 - 11.5
PDW	16.4	%	9.0 - 17.0
PCT	0.180	%	0.200 - 0.500
RBC MORPHOLOGY	Normocytic Normochromic		
WBC MORPHOLOGY	Normal		
PLATELETS ON SMEAR	Adequate		

Method : EDTA Whole Blood- Tests done on Automated Six Part Cell Counter.RBC and Platelet count by Electric Impedance ,WBC by SF Cube method and Differential by flow cytometry . Hemoglobin by Cyanide free reagent for hemoglobin test (Colorimetric Method).Rest are calculated parameters.

Result relates to sample tested, Kindly correlate with clinical findings.

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HEMATOLOGY

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
ESR			
ESR	15	mm/1hr.	0 - 20

METHOD - WESTERGREN

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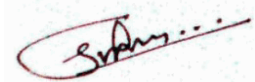
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URINE ROUTINE EXAMINATION

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
<u>URINE ROUTINE EXAMINATION</u>			
<u>PHYSICAL EXAMINATION</u>			
VOLUME	20ml		
COLOUR	Colourless	Text	Pale Yellow
APPEARANCE	Clear		CLEAR
<u>CHEMICAL EXAMINATION</u>			
REACTION (methyl red and Bromothymol blue indicator)	Acidic		Acidic
SP. GRAVITY (Bromothymol blue indicator)	1.005		1.005 - 1.022
PROTEIN (Protein error of PH indicator)	Absent		Absent
BLOOD (Peroxidase Method)	Absent		Absent
SUGAR (GOD/POD)	Absent		Absent
KETONES (Acetoacetic acid)	Absent		Absent
BILE SALT & PIGMENT (Diazonium Salt)	Absent		Absent
UROBILINOGEN (Red azodye)	Absent		Normal
LEUKOCYTES (pyrrole amino acid ester diazonium salt)	Absent	Text	Absent
NITRITE (Diazonium compound With tetrahydrobenzo quinolin 3-phenol)	Absent		Negative
<u>MICROSCOPIC EXAMINATION</u>			
RED BLOOD CELLS	Absent		
PUS CELLS	0-2	/ HPF	0 - 5
EPITHELIAL	0-2	/ HPF	0 - 5
CASTS	Absent		

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URINE ROUTINE EXAMINATION

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
CRYSTALS	Absent		
BACTERIA	Absent		Absent
YEAST CELLS	Absent		Absent
ANY OTHER FINDINGS	Absent		

REMARK Result relates to sample tested. Kindly correlate with clinical findings.

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IMMUNO ASSAY

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
<u>TFT (THYROID FUNCTION TEST)</u>			
SPACE		Space	-
SPECIMEN	Serum		
T3	120.2	ng/dl	84.63 - 201.8
T4	8.63	µg/dl	5.13 - 14.06
TSH	0.806	µIU/ml	0.270 - 4.20
T3 (Triiodo Thyronine hormone)	T4 (Thyroxine)	TSH(Thyroid stimulating hormone)	
AGE	RANGE	AGE	RANGES
1-30 days	100-740	1-14 Days	11.8-22.6
1-11 months	105-245	1-2 weeks	9.9-16.6
1-5 yrs	105-269	1-4 months	7.2-14.4
6-10 yrs	94-241	4 -12 months	7.8-16.5
11-15 yrs	82-213	1-5 yrs	7.3-15.0
0.1-2.5			
15-20 yrs	80-210	5-10 yrs	6.4-13.3
0.20-3.0			
		11-15 yrs	5.6-11.7
0.30-3.0			

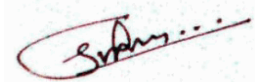
INTERPRETATION :

TSH stimulates the production and secretion of the metabolically active thyroid hormones, thyroxine (T4) and triiodothyronine (T3), by interacting with a specific receptor on the thyroid cell surface. The synthesis and secretion of TSH is stimulated by Thyrotropin releasing hormone (TRH), in response to low levels of circulating thyroid hormones. Elevated levels of T3 and T4 suppress the production of TSH via a classic negative feedback mechanism. Failure at any level of regulation of the hypothalamic-pituitary-thyroid axis will result in either underproduction (hypothyroidism) or overproduction (hyperthyroidism) of T4 and/or T3.

Result relates to sample tested, Kindly correlate with clinical findings.

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HAEMATOLOGY

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
<u>BLOOD GROUP</u>			
SPECIMEN	WHOLE BLOOD EDTA & SERUM		
* ABO GROUP	'B'		
RH FACTOR	POSITIVE		

Method: Slide Agglutination and Tube Method (Forward grouping & Reverse grouping)
Result relates to sample tested, Kindly correlate with clinical findings.
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***BIOCHEMISTRY**

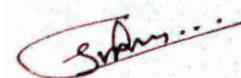
TEST NAME	RESULTS	UNIT	REFERENCE RANGE
BLOOD UREA (Urease UV GLDH Kinetic)	31.4	mg/dL	19 - 45
BLOOD UREA NITROGEN (Calculated)	14.67	mg/dL	5 - 20
S. CREATININE (Enzymatic)	1.20	mg/dL	0.6 - 1.4
S. URIC ACID (Uricase)	8.10	mg/dL	3.5 - 7.2
S. SODIUM (ISE Direct Method)	137.7	mEq/L	137 - 145
S. POTASSIUM (ISE Direct Method)	5.06	mEq/L	3.5 - 5.1
S. CHLORIDE (ISE Direct Method)	100.1	mEq/L	98 - 110
S. PHOSPHORUS (Ammonium Molybdate)	3.27	mg/dL	2.5 - 4.5
S. CALCIUM (Arsenazo III)	9.8	mg/dL	8.6 - 10.2
PROTEIN (Biuret)	6.7	g/dl	6.4 - 8.3
S. ALBUMIN (BGC)	3.95	g/dl	3.2 - 4.6
S.GLOBULIN (Calculated)	2.75	g/dl	1.9 - 3.5
A/G RATIO calculated	1.44		0 - 2

NOTE BIOCHEMISTRY TEST DONE ON FULLY AUTOMATED (EM 200) ANALYZER.

Result relates to sample tested, Kindly correlate with clinical findings.

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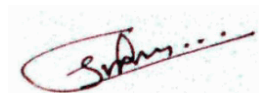
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Peripheral smear examination

TEST NAME	RESULTS
SPECIMEN RECEIVED	Whole Blood EDTA
RBC	Normocytic Normochromic
WBC	Total leucocyte count is normal on smear.
	Neutrophils:58 %
	Lymphocytes:32 %
	Monocytes:07 %
	Eosinophils:03 %
	Basophils:00 %
PLATELET	Adequate on smear.
HEMOPARASITE	No parasite seen.
Result relates to sample tested, Kindly correlate with clinical findings.	
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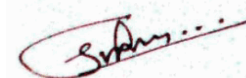
LIVER FUNCTION TEST

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
TOTAL BILLIRUBIN (Method-Diazo)	0.99	mg/dL	0.0 - 2.0
DIRECT BILLIRUBIN (Method-Diazo)	0.36	mg/dL	0.0 - 0.4
INDIRECT BILLIRUBIN Calculated	0.63	mg/dL	0 - 0.8
SGOT(AST) (UV without PSP)	23.1	U/L	0 - 37
SGPT(ALT) UV Kinetic Without PLP (P-L-P)	30.6	U/L	UP to 40
ALKALINE PHOSPHATASE (Method-ALP-AMP)	66.0	U/L	53 - 128
S. PROTIEN (Method-Biuret)	6.70	g/dl	6.4 - 8.3
S. ALBUMIN (Method-BCG)	3.95	g/dl	3.5 - 5.2
S. GLOBULIN Calculated	2.75	g/dl	1.90 - 3.50
A/G RATIO Calculated	1.44		0 - 2

Result relates to sample tested, Kindly correlate with clinical findings.

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BIOCHEMISTRY

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
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BLOOD GLUCOSE FASTING & PP

BLOOD GLUCOSE FASTING	82.3	mg/dL	70 - 110
BLOOD GLUCOSE PP	92.2	mg/dL	70 - 140

Method (GOD-POD). DONE ON FULLY AUTOMATED ANALYSER (EM200).

1. Fasting is required (Except for water) for 8-10 hours before collection for fasting specimen. Last dinner should consist of bland diet.
2. Don't take insulin or oral hypoglycemic agent until after fasting blood sample has been drawn

INTERPRETATION

- Normal glucose tolerance : 70-110 mg/dl
- Impaired Fasting glucose (IFG) : 110-125 mg/dl
- Diabetes mellitus : ≥ 126 mg/dl

POSTPRANDIAL/POST GLUCOSE (75 grams)

- Normal glucose tolerance : 70-139 mg/dl
- Impaired glucose tolerance : 140-199 mg/dl
- Diabetes mellitus : ≥ 200 mg/dl

CRITERIA FOR DIAGNOSIS OF DIABETES MELLITUS

- Fasting plasma glucose ≥ 126 mg/dl
- Classical symptoms + Random plasma glucose ≥ 200 mg/dl
- Plasma glucose ≥ 200 mg/dl (2 hrs after 75 grams of glucose)
- Glycosylated haemoglobin $> 6.5\%$

***Any positive criteria should be tested on subsequent day with same or other criteria.

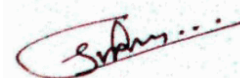
GAMMA GT	33.0	U/L	13 - 109
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GLYCOCELATED HEMOGLOBIN (HBA1C)

HBA1C (GLYCOSALATED HAEMOGLOBIN)	5.1	%	Hb A1c > 8 Action suggested < 7 Goal < 6 Non - diabetic level
AVERAGE BLOOD GLUCOSE (A. B. G.)	99.7	mg/dL	NON - DIABETIC : ≤ 5.6 PRE - DIABETIC : 5.7 - 6.4 DIABETIC : > 6.5

METHOD Particle Enhanced Immunoturbidimetry

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Age/Sex : 36 Years /Male
Ref By : SIDDHIVINAYAK HOSPITAL CGHS /ESIS

Collected On : 23-Sep-2023 11:39 AM
Received On : 23-Sep-2023 11:49 AM
Reported On : 23-Sep-2023 7:52 PM
Report Status : FINAL



BIOCHEMISTRY

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
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HbA1c : Glycosylated hemoglobin concentration is dependent on the average blood glucose concentration which is formed progressively and irreversibly over a period of time and is stable till the life of the RBC/erythrocytes.Average Blood Glucose (A.B.G) is calculated value from HbA1c : Glycosylated hemoglobin concentration in whole Blood.It indicates average blood sugar level over past three months.

Result relates to sample tested, Kindly correlate with clinical findings.

----- END OF REPORT -----

Checked By
SHAISTA Q

DR. SMITA RANVEER.
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Consultant Histocytopathologist

