





PID NO. : CCA0530

Name

: ROYSTON MARTIS

Sex / Age : Male / 37 Years

Ref By : APOLLO HEALTH AND LIFESTYLE

LIMITED

Reference :

Sample Collected At:

Sea Bird Medicare

105-107 Gateway Plaza, Central Avenue, Hiranandani

Gardens, Powai, Mumbai-400076

Processing Location: - Sea Bird Medicare

105-107 Gateway Plaza, Central Avenue, Hiranandani

Gardens, Powai, Mumbai-400076

Reg. Date

09-Mar-2024 / 4:54 pm

Coll Date

09-Mar-2024 / 4:59 pm

Report Date

10-Mar-2024 / 7:06 pm

REPORT

BLOOD GLUCOSE

-	D 11	4.4	
Toet.	Pocult	11mite	PIOLOGICAL REFERENCE INTERVAL
Test	Result	Units	BIOLOGICAL REFERENCE INTERVAL
	The state of the s	The state of the s	The second secon

mg/dl

mg/dl

Blood Glucose (Fasting), plasma 90.82

(Plasma, Method- Hexokinase) Interpretation:

NORMAL : 70 - 100 mg/dl Pre-Diabetic : 100 - 125 mg/dl

Diabetic : >125 mg/di

(ON MORE THAN ONE OCCASION)

Reference : American diabetes association guidelines 2022

Urine Glucose (Fasting)

Absent

Absent

70.00 - 100.00 mg/dl

Urine Ketones (Fasting)

Absent

82.47

Absent

70.00 - 140.00

Blood Giucose (PP) plasma

(Plasma Method- Hexokinase)

Interpretation:

Non-Diabetic : 70 - 140 mg/di Pre-Diabetic : 140 - 199 mg/di

Diabetic: >200 mg/dl

(ON MORE THAN ONE OCCASION)

Reference: American diabetes association guidelines 2022

Urine Glucose (PP)

Absent

Absent

Urine Ketones (PP)

Power 022-25701053 / 25704157

Absent

Absent

Test Done on Fully Automated Mispa CXL PRO PLUS Biochemistry Analyser.

Pritam Dhanawade Lab Technician

anawade

DR.RITESH KHARCHE MBBS, MD PATHOLOGY Pathologist

MMC Reg No.2006031680

Kothi 0484- 2322022 / 4032022

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HO- Sea Bird Medicare Centre (ISO 900):2015): A-101-102, Heritage Plaza, Teli Cross Lane, Andheri East INr. Station), Mumbal- 69. Tel: 022- 46032704

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REPORT

BLOOD GLUCOSE

Test

Result

Units

BIOLOGICAL REFERENCE INTERVAL

End of Report -



Pritam Dhanawade Lab Technician

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DR. RITESH KHARCHE MBBS, MD PATHOLOGY Pathologist

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REPORT

Blood Group

Test

Result

Units

BIOLOGICAL REFERENCE INTERVAL

BLOOD GROUP

ABO Group

"B"

RH(D)

Positive

Method: Cell (Forward) grouping by Manual Side Method.

Sample: Whole Blood (EDTA)

- End of Report -

Pritam Dhanawade Lab Technician

anawade

DR.RITESH KHARCHE
MBBS, MD PATHOLOGY
Pathologist
MMC Reg No 2006031680

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REPORT

Complete Blood Count

	Comp	ete biood coul	IL.	
Test	Result	Units	BIOLOGICAL REFERENCE INTERVAL	
Hemoglobin	17.8	gm/dl	13.0 -17.0	
RED BLOOD CELLS				
R.B.C. Count	5.73	million / cumm	4.5-5.5	
PCV	50.4	%	40- 50	
MCV	88	fL.	83 - 101	
мсн	31.1	pg	27 - 32	
MCHC	35.3	gm / di	31.5 - 34.5	
RDW (CV)	12.2	%	11.6- 14.0	
Total W.B.C. Count	6390	/cu.mm.	4000 - 10000	
DIFFERENTIAL COUNT	t			
Neutrophils	63	%	40 - 80	
Lymphocytes	30	%	20 - 40	
Eosinophils	02	%	1 - 6	



Pritam Dhanawade Lab Technician

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REPORT

Complete Blood Count

Test	Result	Units	BIOLOGICAL REFERENCE INTERVAL
Monocytes	05	%	2 - 10
Basophils	00	%	0 - 1
Platelet Count	278000	/cumm	150000 - 410000
MORPHOLOGY RBC Morphology	Predominant	ly Normocytic and	Normochramia.

WBC Morphology

Normal Morphology

Platelets on Smear

Adequate on smear

(EDTA Whole Blood - Tests done Automated Three part cell counter (RBC, WBC, Platelets count by impedance, Haemoglobin by colorimetric Cyanmeth free method. Rest are calculated parameters. Microscopy and DLC is done manually by the Pathologist.)

--- End of Report -----



Pritam Dhanawade Lab Technician

anawade

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MMC Reg No 2006031680

Keehii 0484- 2322022 / 4032022

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REPORT

Erythrocyte Sedimentation Rate (ESR)

Test ESR

Result

05

Units

mm at thr

BIOLOGICAL REFERENCE INTERVAL

Method: Westergren.

Sample: Whole Blood (EDTA)

End of Report

Pritam Dhanawade Lab Technician

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REPORT

Glycosylated Haemoglobin (HbA1c)

Test	Result	Units	BIOLOGICAL REFERENCE INTERVAL
HbA1c Non-diabetic <= 5.7 % Pre-Diabetic : 5.7 - 6.4 % Diabetic :> = 6.5 (EDTA Whole Blood, Turbidimetric) Mean Blood Glucose (MBG)	5.51	% mg/dl	< 5.7

Interpretation & Remark:

HbA1c is used for mointoring diabetic control. It reflects the estimated average glacose (eAG).

2. HbA1c has been endorsed by clinical groups & ADA (American Diabetes Association guideline 2022, for diagnosis of diabetes using a cut-off

Trends in HbA1c are a better indicator of diabetic control than a solitary test.

 Low glycated haemoglobin (below 4%) in a non-diabetic individual are often associated with systemic inflammatory diseases, chronic anaemia (especially severe iron deficiency & haemolytic), chronic renal faiture and liver diseases. Clinical correlation sugested.

5. To estimate the eAG from the HbA1C value, the following equation is used : eAg(mg/dt)=28.7*A1o-46.7.

Interference of Haemoglobinopathies in HbA1c estimation.

A. For HbF> 25%, an alternate platform (Fructosamine) is recommended for testing of HbA1c.

B. Homozygous hemoglobinopathy is detected, fructosamine is recommended for monitoring diabetic status.

C. Heterozygous state detected.

In known diabetic patients, following values can be considered as a guide for monitoring the glycemic control. Excellent Control - 6 to 7 % Fair to Good Control - 7 to 8 % Unsatisfactory Control - 8 to 10 % and Poor Control - More than 10 %

8. Test done on Mispa i3 Automated Cartridge Based Specific Protein Analyser.

- End of Report -

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Reg. Date

09-Mar-2024 / 4:54 pm

Coll Date

09-Mar-2024 / 4:59 pm

Report Date

10-Mar-2024 / 7:07 pm

REPORT

LIPID PROFILE

Test	Result	Units	BIOLOGICAL REFERENCE INTERVAL
Total Cholesterol Serum, Method: CHOD-PAP	219.96	mg/dl	CHILD Desirable - Less than: 170 CHILD Borderline High: 170 - 199 CHILD High - More than: 200 ADULT Desirable - Less than: 200 ADULT Borderline High: 200 - 239 ADULT High - More than: 240
Triglycerides Serum, Method: GPO-PAP	101.87	mg/dl	NORMAL: <150 Borderline High: 150 - 199 High: 200 - 499 Very High: >500
HDL Cholesterol-Direct Serum, Method: Cholesterol-esterase	53,48 e-Direct	mg/dl	Desirable - Above : 60 Borderline Risk : 40 - 59 Undesirable - Below : 40
LDL Cholesterol Calculated	146.11	mg/dl	Desirable - Below : 130 Borderline Risk : 130 - 159 Undesirable - Above : 160
VLDL-Cholesterol Calculated	20.37	mg/dl	5 - 51
T.CHOL/HDLC Ratio Calculated	4.11		Acceptable for Male : < 5.00 Acceptable for Female : <4.50



Pritam Dhanawade Lab Technician

ongwade

DR.RITESH KHARCHE MBBS, MD PATHOLOGY Pathologist MMC Reg No.2006031680

Page 6 of 15

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HO- Sea Bird Medicare Centre (ISO 9001-2015): A-101-102, Heritage Plaza, Teli Crass Lone, Andheri East (Nr. Station), Mumbai- 69, Tel: 022- 46032704 Kochi: 0484- 2322022 / 4032022

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NARI Accredited



PID NO. : CCA0530

Name

: ROYSTON MARTIS

Sex / Age : Male / 37 Years

Ref By

: APOLLO HEALTH AND LIFESTYLE

LIMITED

Reference:

Sample Collected At:

Sea Bird Medicare

105-107 Gateway Plaza, Central Avenue, Hiranandani

Gardens Powai Mumbai-400076

Processing Location: - Sea Bird Medicare

105-107 Gateway Plaza, Central Avenue, Hiranandani

Gardens, Powal, Mumbai-400076

Reg. Date

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10-Mar-2024 / 7:07 pm

REPORT

LIPID PROFILE

Test

Calculated

LDLC/HDLC Ratio

Result

2.73

Units

BIOLOGICAL REFERENCE INTERVAL

Acceptable for Males: < 3.60 Acceptable for Females: < 3.20

NOTE:

1) Biological Reference Interval is as per National Cholestrol Education Program (NCEP) guidelines.

2) Tests done on Fully Automated Mispa CXL PRO PLUS Biochemistry Analyser.

End of Report -----



Pritam Dhanawade Lab Technician

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DR.RITESH KHARCHE MBBS, MD PATHOLOGY **Pathologist**

MMC Reg No 2006031680

Kochi G464- 2322022 / 4032022

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Power 022-25701053 / 25704157

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PID NO. : CCA0530

Name

: ROYSTON MARTIS

Sex / Age : Male / 37 Years

Ref By

: APOLLO HEALTH AND LIFESTYLE

LIMITED

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10-Mar-2024 / 7:07 pm

REPORT

LIVER FUNCTION TEST

Test	Result	Units	BIOLOGICAL REFERENCE INTERVAL
S.G.O.T. (Serum Method-IFCC / UV without P5P)	21.9	U/L	0 - 40
Sr. Alkaline Phosphatase (Serum, Kinetic Method by IFCC)	83.50	U/L	40 - 129
S.G.P.T. (Serum,Method-IFCC / UV without P5P)	17.53	U/L	0 - 41
GGT (Serum ,Method- IFCC Method)	25.58	U/L	8 - 61
Bilirubin (Total) (Serum Method-Diazo- End point)	0.63	mg/dl	0.0 - 1.20
Bilirubin (Direct) (Serum,Method-Diazo-End point)	0.08	mg/dl	0.0 - 0.30
Bilirubin (Indirect) Calculated	0.55	mg/dl	0.0 - 0.90
Total Proteins (senan,Method-Biuret)	7.84	g/dl	6.6 - 8.7
Albumin (Serum, Method-Bromocresol Green)	4.41	gidi	3.5 - 5.2
Globulin Calculated	3.43	g/dl	1.90 - 3.70
A/G ratio Calculated	1.29		

Test Done on Fully Automated Mispa CXL PRO PLUS Biochemistry Analysier.



Power 022-25701053 / 25704157

Pritam Dhanawade Lab Technician

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DR. RITESH KHARCHE MBBS, MD PATHOLOGY Pathologist MMC Reg No.2006031680

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PID NO. : CCA0530

Name

: ROYSTON MARTIS

Sex / Age : Male / 37 Years

Ref By

: APOLLO HEALTH AND LIFESTYLE

LIMITED

Reference :

Sample Collected At:

Sea Bird Medicare

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Gardens, Powai, Mumbai-400076

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Report Date

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REPORT

LIVER FUNCTION TEST

Test

Result

Units

BIOLOGICAL REFERENCE INTERVAL

- End of Report --

Pritam Dhanawade Lab Technician

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DR. RITESH KHARCHE MBBS, MD PATHOLOGY Pathologist MMC Reg No.2006031680

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PID NO. : CCA0530

: ROYSTON MARTIS Name

Sex / Age : Male / 37 Years

Ref By

: APOLLO HEALTH AND LIFESTYLE

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REPORT

RENAL PROFILE

Test	Result	Units	BIOLOGICAL REFERENCE INTERVAL
Blood Urea Serum, Method-Urease	24.33	mg/dl	16.6- 48.5 mg/dl
Blood Urea Nitrogen Serum, Method-Urease	11.36	mg/di	06 - 20 mg/dl
Creatinine Serum, Method-Kinetic Jaffes	0.71	mg/dL	0.7 - 1.2 mg/dl
Unic Acid Serum, Method: Unicase-POD	6.8	mg/dl	3.4 - 7.0

Test Done on Fully Automated Mispa CXL PRO PLUS Biochemistry Analyser.

- End of Report ---



Pritam Dhanawade Lab Technician

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DR.RITESH KHARCHE MBBS, MD PATHOLOGY Pathologist

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REPORT

THYROID FUNCTION TEST

Test	Result	Units	BIOLOGICAL REFERENCE INTERVAL
TSH	1.3	μIU/mI	0.25-5 μIU/mI
T3	1.64	nmol/l	0.92-2.33 nmol/l
T4	94.93	nmol/l	60-120 nmol/l

The assay principle combines an enzyme immunoassay competition method with a final fluorescent detection (ELFA).

INTERPRETATION

TSH : A high TSH result often means an under active thyroid gland that is not responding adequately to the stimulation of TSH due to some type of acute or

chronic thyroid dysfunction. A high TSH value can also occur when someone with a known thyroid disorder or who has had their thyroid gland removed is

receiving too little thyroid hormone medication. A low TSH result can indicate an over active thyroid gland (hyperthyroidism) or excessive amounts of thyroid

hormone medication in those who are being treated for an under active (or removed) thyroid gland. An abnormal TSH test result is usually followed by

additional testing to investigate the cause of the increase or decrease:

T3. Triindotfyronine T3 contributes significantly to the maintenance of the euthyroid state and the total T3 concentration has a role in screening for thyroid disease

in conjunction with other tests. T3 alone cannot diagnose hypothyroidism, but it may be more sensitive than thyroxine (T4) for hyperthyroidism.

T4 :Thyroxine accounts for at least 90% of circulating protein-bound lodine. While >99.9% of T4 is protein-bound, primarily to thyfoKine-binding alobutin(TBG), it

is the free fraction that is biologically active. In most patients the total T4 level is a good indicator of thyroid status, however it can sometimes be inadequate, and

diagnostic efficiency may be improved by use of a total T4 test in conjunction with other tests.

---- End of Report --

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Pritam Dhanawade

Lab Technician

DR.RITESH KHARCHE MBBS, MD PATHOLOGY

Pathologist

MMC Reg No 2006031680

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Sex / Age : Male / 37 Years

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REPORT

URINE ANALYSIS

Test	Result	Units	BIOLOGICAL REFERENCE INTERVAL
PHYSICAL EXAMINATION	N		
Colour	Pale Yellow		Pale Yellow
Quantity	30 ml	ml	20 - 50
Appearance	Clear		Clear
Reaction (pH)	5.0		5.0 - 9.0
Specific Gravity	1.015		1,000 - 1,030
CHEMICAL EXAMINATIO	N		
Proteins	Absent		Absent
Sugar	Absent		Absent
Ketone Bodies	Absent		Absent
Bile Salts	Absent		Absent
Bile Pigment	Absent		Absent
Urobilinogen	Normal	mg/dl	Normal (0.1 - 1.0 mg/dl)



Pritam Dhanawade Lab Technician

rangwoode

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A. SEA BIRD MEDICARE CENTRE

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- Enquiry and Home Visit Booking 022 25701053 / 9324924370 or admin@seabirdhf.com
- C. Sea Bird Medicare services are also available at: Powai (Mumbai), Andheri East (Mumbai), Kochi (Kerala)







PID NO. : CCA0530

Name : ROYSTON MARTIS

Sex / Age : Male / 37 Years

Ref By : APOLLO HEALTH AND LIFESTYLE

LIMITED

Reference:

Sample Collected At:

Sea Bird Medicare

105-107 Gateway Plaza, Central Avenue, Hiranandani

Gardens, Powai, Mumbai-400076

Processing Location: - Sea Bird Medicare

105-107 Gateway Plaza, Central Avenue, Hiranandani

Gardens, Powai, Mumbai-400076

Reg. Date

09-Mar-2024 / 4:54 pm

Coll Date

09-Mar-2024 / 4:59 pm

Report Date

10-Mar-2024 / 7:06 pm

REPORT

URINE ANALYSIS

	OTHER PROPERTION		
Test	Result	Units	BIOLOGICAL REFERENCE INTERVAL
Ocult Blood	Absent		Absent
MICROSCOPIC EXAMIN	IATION		
Pus Cells	1 - 2 / hpf		2 - 3 / hpf
Red Blood Ceils	Absent		Absent
Epithelial cells	1 - 2 / hpf		2 - 3 / hpf
Casts	Absent		Absent
Crystals	Absent		Absent
SECTION SECTION	22 23		

METHOD:

Other Findings

Physical Examination: Visual Strip Method.

Chemical Examination: Bilinubin(Azo-coupling), Blood(Peroxidase), Glucose(Specific glucose-oxidase/peroxidase reaction), Ketone(Rothera's test), Leukocytes(Reflectance Photometer(Leucocyte esterase)), Nitrite(Diazotization), pH(Double Indicator), Protein(Protein Error of Indicators), Specific Gravity(Refractometric method), Urobilinogen(Ehrlich).

Microscopy Examination : Automation/Manual Microscopy.

Absent

---- End of Report -----

anguade



Pritam Dhanawade Lab Technician

DR. RITESH KHARCHE MBBS, MD PATHOLOGY Pathologist MMC Reg No.2006031680

Kochi 0484- 2322022 / 4032022

Page 15 of 15

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This is computer generated medical diagnostics report that has been validated by an Authorized Medical Practitioner/Doctor. The report does not need physical signature. Results relate only to the sample as received. Refer to conditions of reporting overleaf.

HO- Sea Bird Medicare Centre (ISO 9001:2015): A-101-102, Heritage Plaza, Teli Crass Lane, Andheri East (Nr. Station), Mumbai- 69 Tel: 022- 46032704

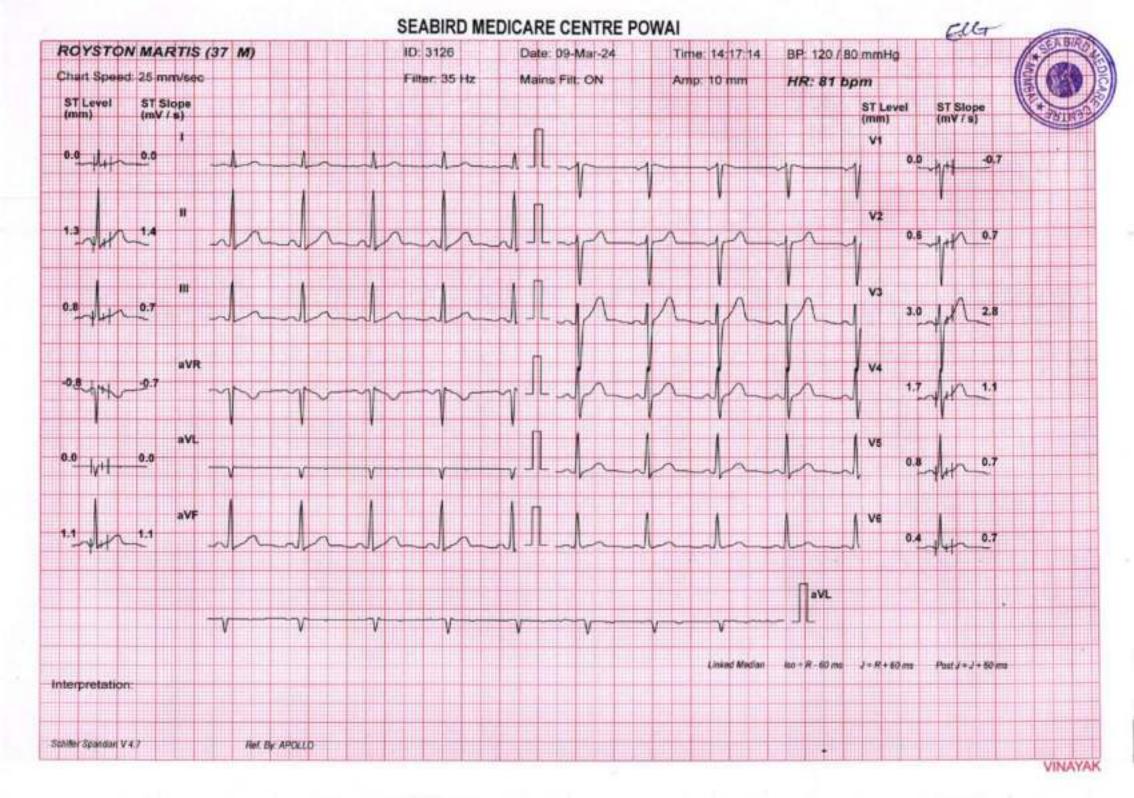
SEA BIRD MEDICARE CENTRE (DIVISION OF SEA BIRD MEDICARE PVT LTD)

- Individual Laboratory Investigation should not be considered as conclusive and should be used along
 with other relevant clinical examination to achieve the final diagnosis. The reported results are for the
 information of the referring doctors only.
- The test results relate only to the item/ items in our laboratory.
- The values of a laboratory investigation are dependent on the quality of sample as well as the assay procedure used.
- 4. For test performed on specimens received from other locations (within and outside Mumbai), it is presumed that the specimen belongs to the patient named or identified, such verification having been carried out at the point of generation of the said specimen(s).
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आयकर विभाग

INCOME TAX DEPARTMENT



भारत सरकार GOVT. OF INDIA

ROYSTON MARTIS

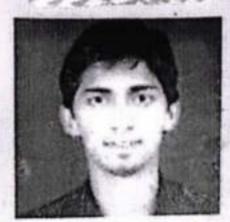
PETER MARTIS

16/11/1986

Permanent Account Number AVSPM5480D

Quartes

Signature



5092008



Report ID

RMM93161849

Reg.

: 09-Mar-2024

Patient Name : Mr. ROYSTON MARTIS

Report Date

: 11-Mar-2024 Company Name : M/S. APOLLO HEALTH AND LIFESTYLE

Rank Ref By

DR.PARAG ARVIND PRADHAN

: 37 Year / Male

CHEST X RAY REPORT

X-Ray No: 1543

Investigation: Chest PA View.

Bony thoracic cage is normal.

Cardiac silhouette appears normal in size and configuration.

Both lungs shows equal translucency and normal vasculature.

Both Hemidiaphragm visualised normal.

No evidence of any active parenchymal lesion seen.

Impression:

Normal Chest X-Ray.



SEABIRD MEDICARE CENTRE POWAI

Patient Details

Clinical History:

Date: 09-Mar-24

Time: 14:19:46

Name: ROYSTON MARTIS ID: 3126

Age: 37 y Sex: M

NIL

Height: 174 cms.

Weight: 69 Kg.

Medications: NII

Test Details

Protocol: Bruce

Pr.MHR: 183 bpm

THR: 155 (85 % of Pr.MHR) bpm

Total Exec. Time:

8 m 35 s

Max. HR: 157 (86% of Pr.MHR)bpm

Max. Mets: 10.20

Max. BP: 150 / 100 mmHg

Max. BP x HR: 23550 mmHg/min

Min. BP x HR:

6800 mmHg/min

Test Termination Criteria: THR ACHIEVED

Protocol Details

Stage Name	Stage Time (min : sec)	Mets	Speed (mph)	Grade (%)	Heart Rate (bpm)	Max. BP (mm/Hg)	Max. ST Level (mm)	Max. ST Slope (mV/s)
Supine	0:17	1.0	0	0	85	120 / 80	-0.85 aVR	2.48 V3
Standing	0:4	1.0	0	0	87	120 / 80	-1.06 aVR	2.48 V3
Hyperventilation	1:36	1.0	0	0	92	120 / 80	-1.06 aVR	2.83 V3
1	3:0	4.6	1.7	10	106	130 / 90	-1.27 aVR	3.54 V3
2	3:0	7.0	2.5	12	120	140 / 90	-1.27 aVR	4.60 V3
Peak Ex	2:35	10.2	3.4	14	157	150 / 100	-3.40 aVR	5.66 11
Recovery(1)	1:0	1.8	1	0	109	150 / 100	-2.12 aVR	5.66 II
Recovery(2)	1.0	1.0	0	0	90	130 / 90	-1.70 aVR	5.66 11
Recovery(3)	1:0	1.0	0	0	97	120 / 80	-0.85 aVR	3.89 V4
Recovery(4)	D:4	1.0	0	0	97	120 / 80	-0.64 aVR	2.48 II

Interpretation

The patient exercised according to the Bruce protocol for 8 m 35 s achieving a work level of Max. METS: 10.20. Resting heart rate initially 85 bpm, rose to a max, heart rate of 157 (86% of Pr.MHR) bpm. Resting blood Pressure 120 / 80 mmHg, rose to a maximum blood pressure of 150 / 100 mmHg., No sigificant ST-T changes, TMT negative for inducible ischemia for the workload achieved

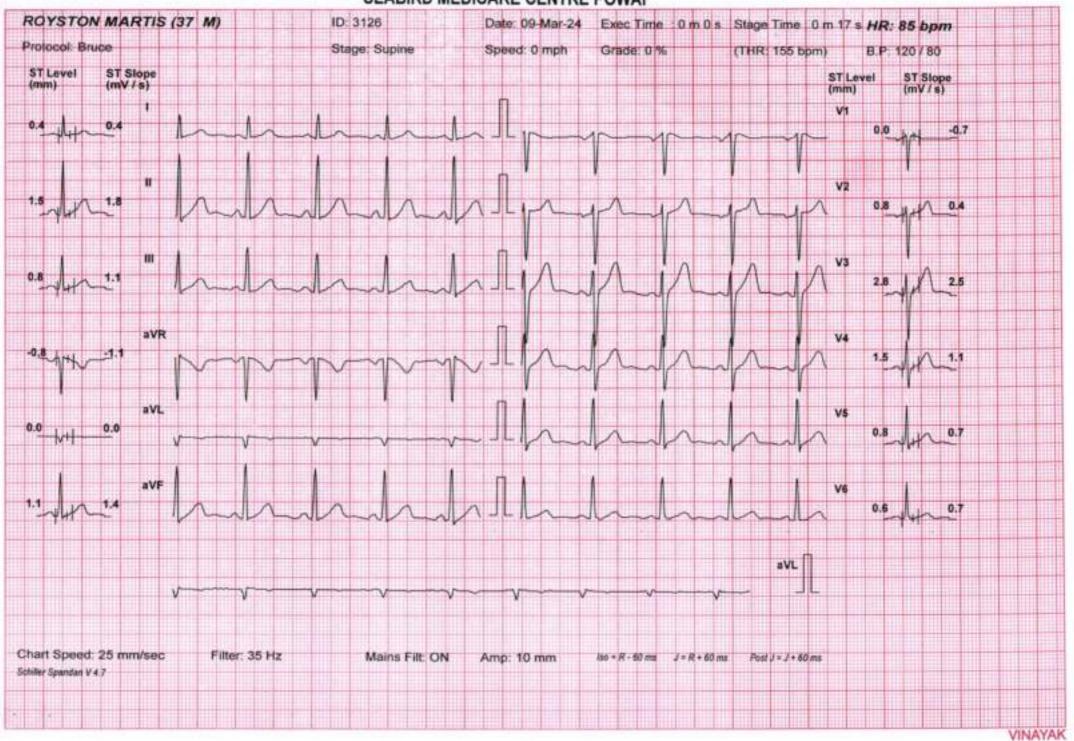
Ref. Doctor: APOLLO

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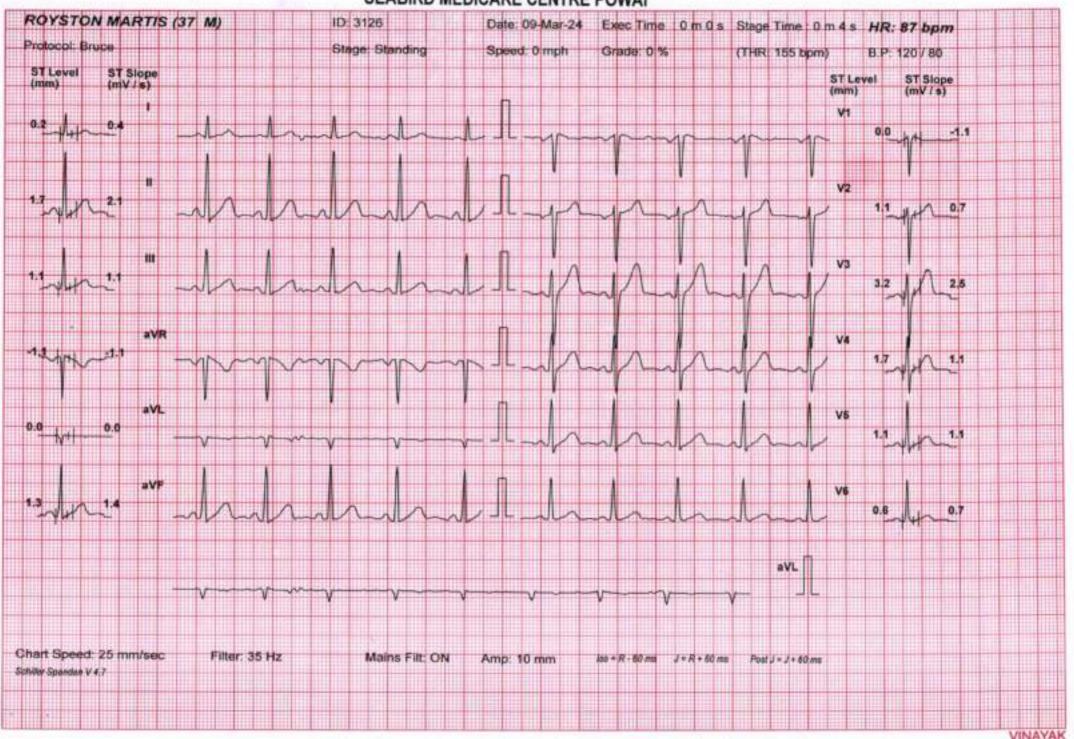
Dr. PARAG A. FRADHAN Enproved By Dr. ST. Toung (GOI) 33-108, S. L. Plazz, Central Ren No. (MILL)

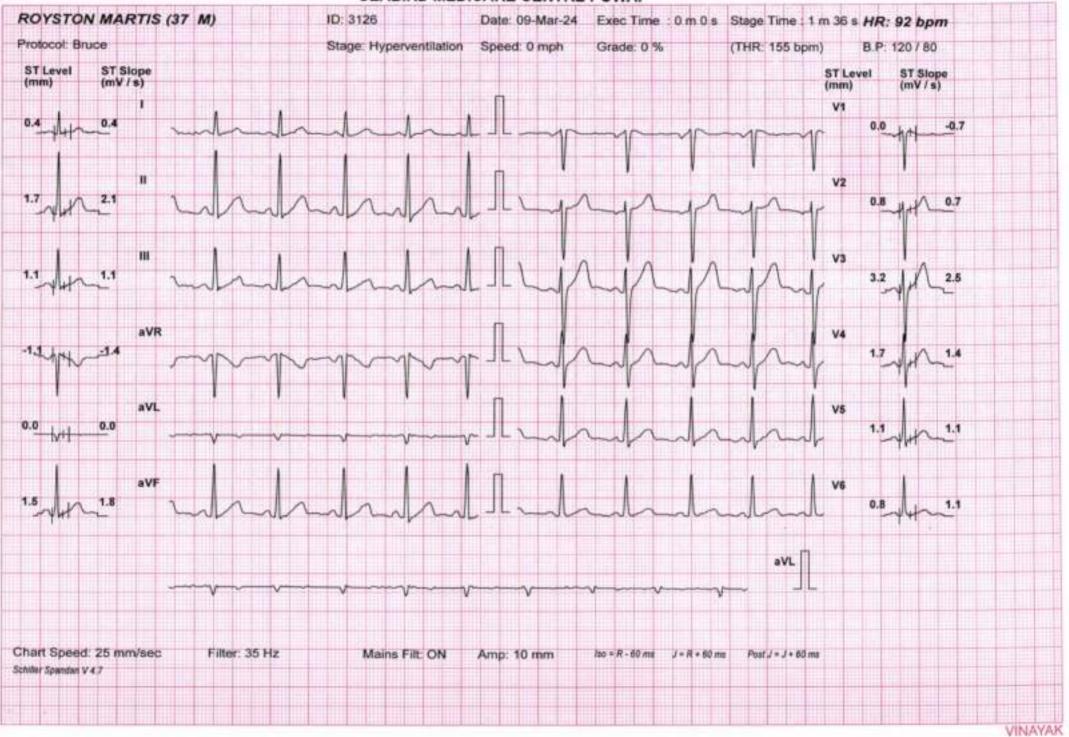
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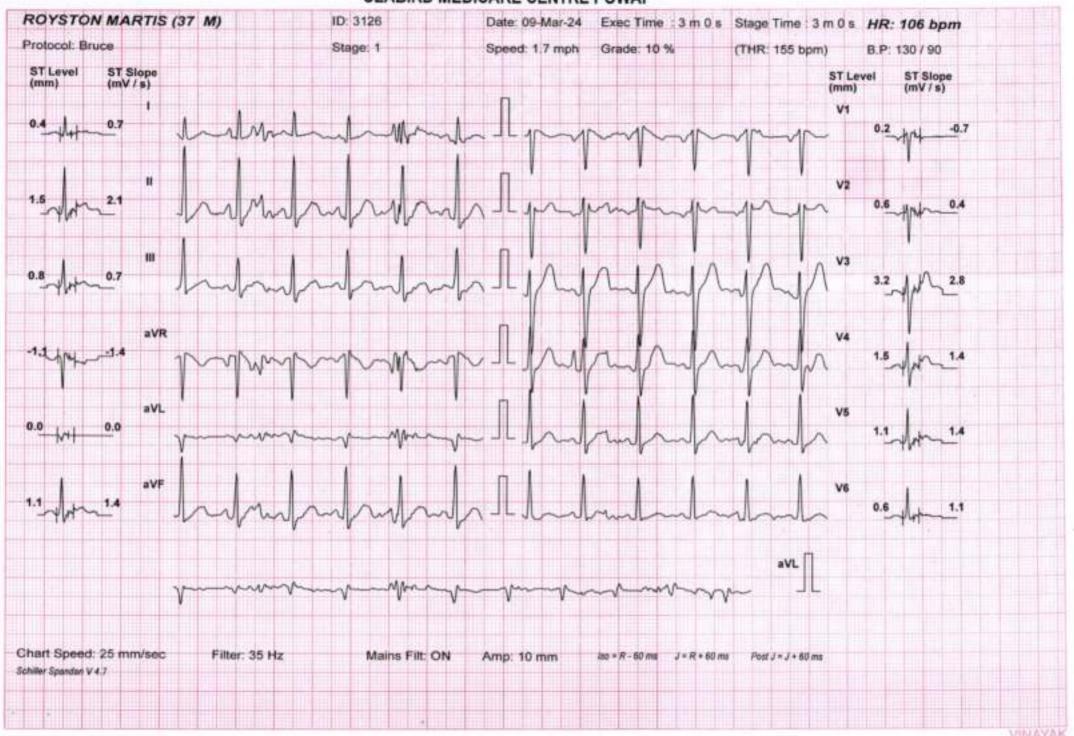
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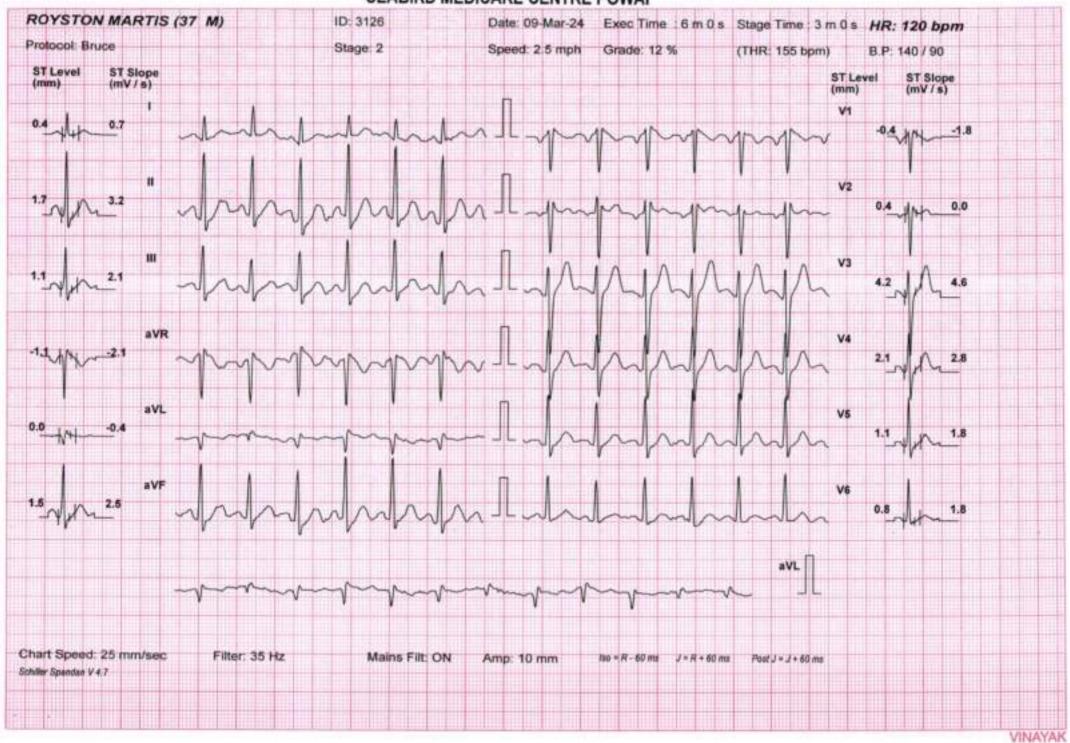


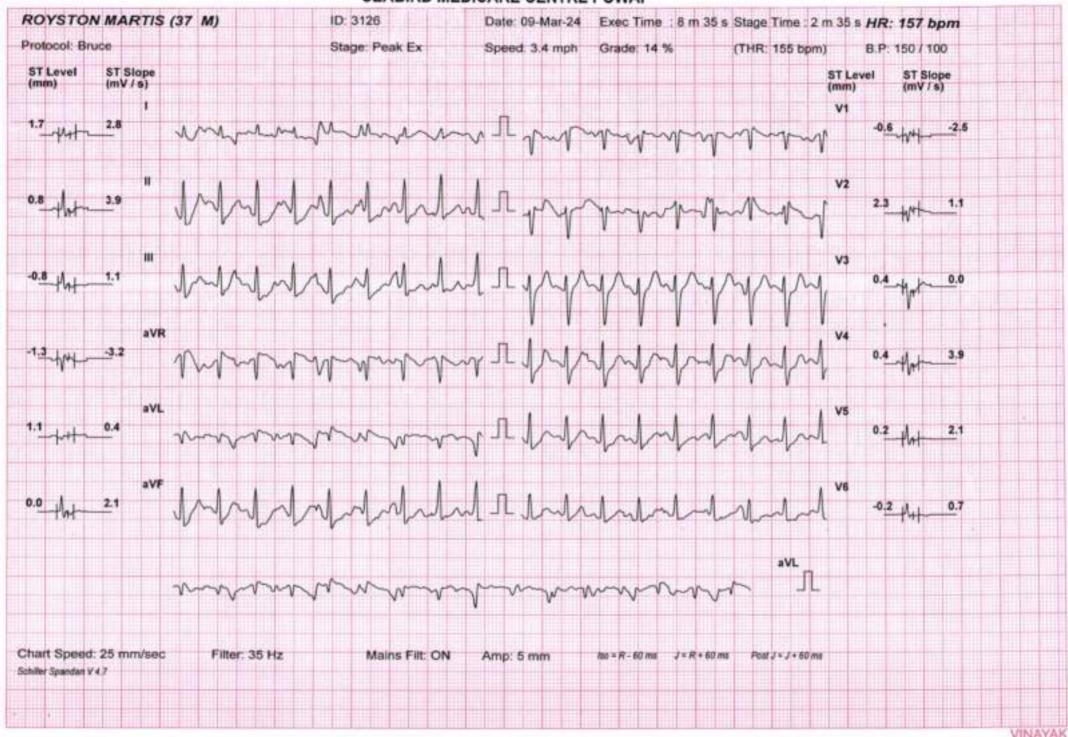
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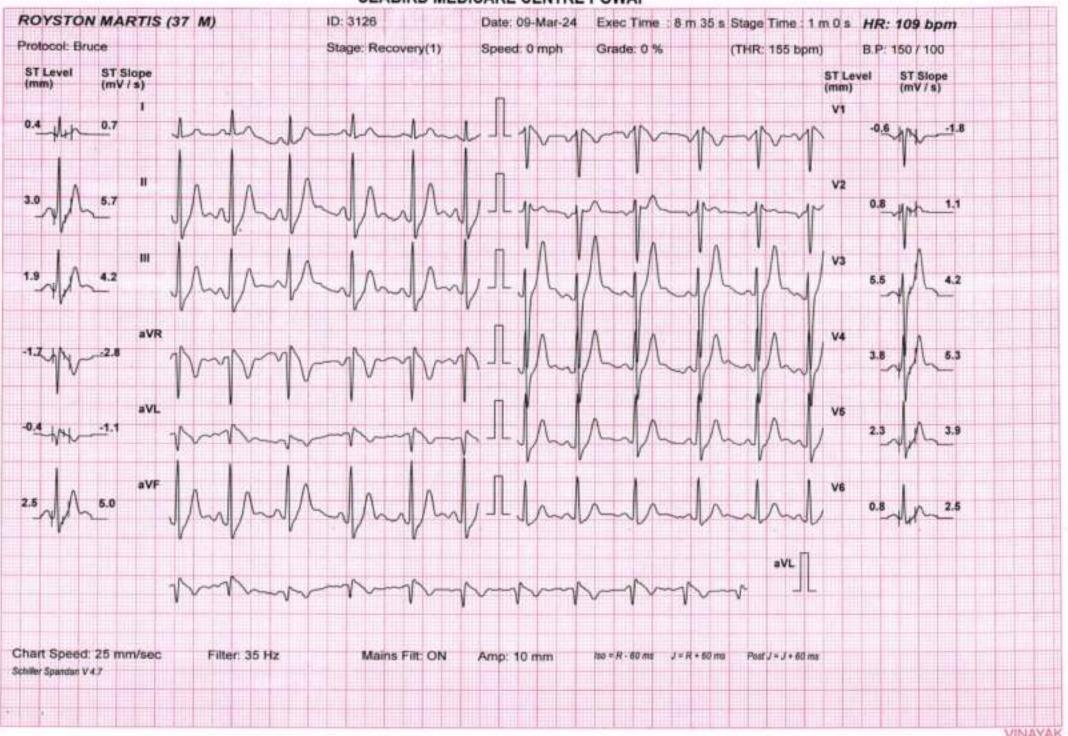


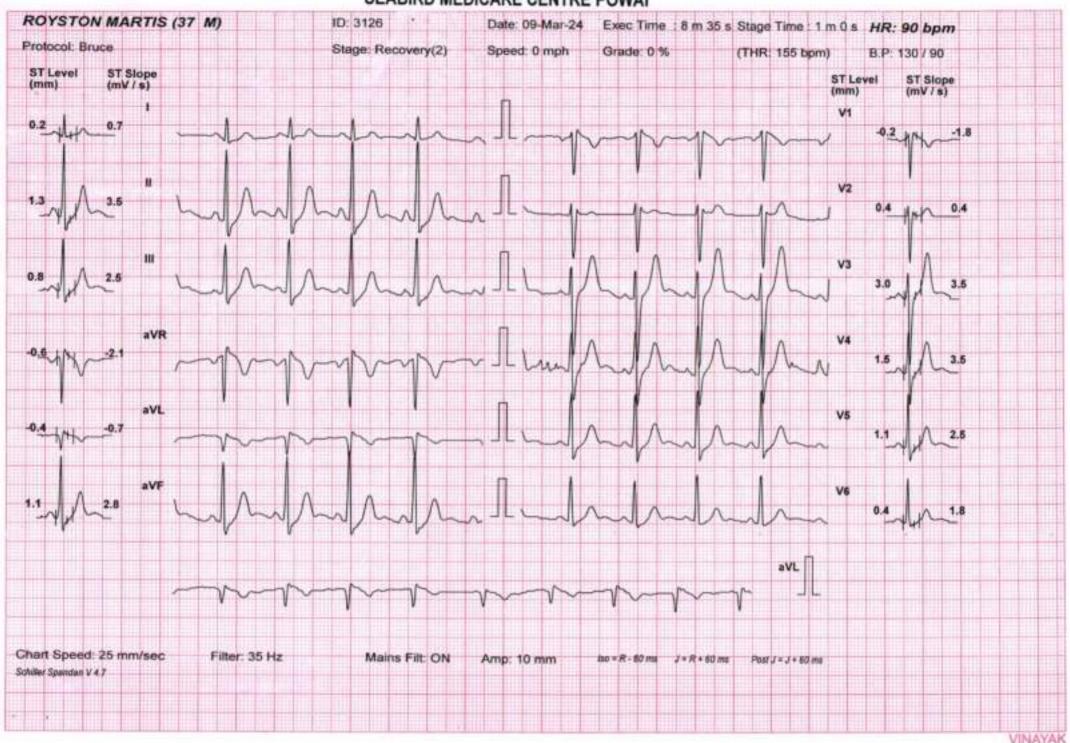


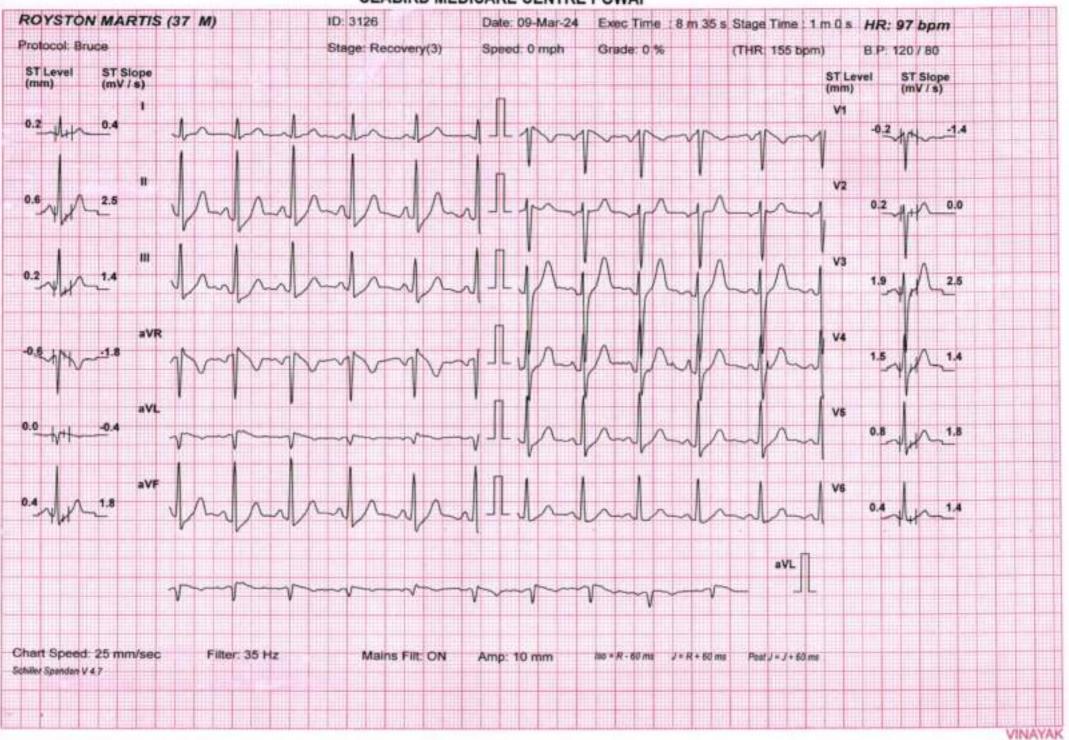














Name: Mr. ROYSTON MARTIS Age: 37Y Sex : Male

Date: 09/03/2024 Ref Dr : SELF

USG ABDOMEN AND PELVIS

LIVER: Liver appears normal in size and echotexture. There is no intra-hepatic biliary radical dilatation. No evidence of any focal lesion.

GALL BLADDER: Gall bladder is distended and appears normal. Wall thickness is within normal limits. There is no evidence of any calculus. Portal vein is normal. CBD is normal.

PANCREAS: Pancreas appears normal in echotexture. There is no evidence of any focal lesion or calcification. Pancreatic duct is not dilated.

KIDNEYS: Both kidneys are normal in shape and echotexture. Corticomedullary differentiation is maintained. There is no evidence of any hydronephrosis, hydroureter or

Right kidney measures 11.2 x 4.5cm. Left kidney measures 11.2 x 5.0cm.

SPLEEN: Spleen is normal in size, shape and echotexture. No focal lesion is seen.

URINARY BLADDER: Urinary bladder is distended and normal. Wall thickness is within normal limits.

PROSTATE: Prostate is normal in size measuring 2.9 x 3.3 x 3.8 x cm (19.9gm) and echotexture. No evidence of any focal lesion.

No free fluid or significant lymphadenopathy is seen.

IMPRESSION: No significant abnormality detected.

Advice: Clinical co-relation and further evaluation.

DR. PRIYANKA NERULKAR

CONSULTANT RADIOLOGIST

Thanks For Reference: Note the above report represents interpretation of various radiographic shadows, and has its own limitations. This report has to be co-related clinico-pathologically by the referring physician and it does not represent the sole diagnosis.

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Powel: 022-25701053 / 25704157

Kochi: 0484-2322022 / 4032022

Annexure-2

Self-Health Declaration

(Please √ Mark Where Applicable)

PASTE VOUR RECENT PASSPORT SIZE PHOTOGRAPH

1 PERSONA	AL DETAILS:		
Name:	First Name ROYSTON	Middle Name	mantis
Address:	B 503	mig pain	view new
TI	are mag		
	numbai	_Pin: 89	
Birth Place	e:Birth D	ate: 16 11 1986 Religio	n:
		n/yyyy)	
Post applie	ed for:	Marital Status: Married / U	nmarried Gender: M / F
PREVIOUS	S EMPLOYMENT: Yes/	No If yes specify	
	Name	Nature of work	Duration
1)			
10	AL		
iii)	FAMILY DOCTOR:		
Address	E		
Contact	Details:		
	AL HABITS:		
i) Smok	- 411)	
11174	coo criewing []		
iii) Alcoh			
iv) Any o	other NP		
MEDICAL	HISTORY:		
i) ANY	DISABILITY: Yes / No If	yes specify with disability %	10
		1.2	
ii) PERS	ONAL HISTORY:		
eganaan			Yes No
	u in good health and cap		
	얼마 가는 사람이 가는 물론 살아 있는데 뭐.	ob related disease or injury?	. H –
Have y	ou ever been discharge	d or rejected on medical grounds	·

Y		N
	Hypertension	Hepatitis-B
-	Diabetes	Cancer
	Heart disease	Stroke
	Kidney diseases Tuberculosis	Bronchitis
	Chronic lung disease	Any allergy
	(e.g. Pleurisy Pneumonia etc.)	Any chronic ear or hearing probler (e.g. sinusitis, rhinitis otitis etc.)
	Epilepsy, Fits, Fainting or Dizziness	Mental disorder of any kind
	Any major operation or injury	Any other illness
(For fer	nale candidates only)	ate of L.M.P.

6 FAMILY HISTORY:

Has anyone of your parents	suffered from any of	the following:	Yes / No
----------------------------	----------------------	----------------	----------

(If yes, Please V Mark Where Applicable)

	Father	Mother	
Hypertension			
Heart Disease			1797
Cancer			ND
Diabetes			
Tuberculosis			
Epilepsy			
Any other Disease			

	IF LIVING		IF DEAD	
	AGE	HEALTH (Good, Bad, Fair)	AGE AT DEATH	CAUSE OF DEATH
Father	67	9000		
Mother	67	HTM		
Spouse				
Children-1				
Children -2				

7 I declare that the above statements are true and complete to the best of my knowledge and belief. In case this information is found to be false by the company, then the company reserves the right to terminate my services without giving any notice. I agree that the results of this medical examination in general terms may be revealed to the company if required. I also fully understand that in case I am declared medically unfit due to any reason, I shall not be entitled for the employment in the company. However, the decision taken by recruitment committee about my medical fitness will be final and binding to me.

Date:	(Signature of Candidate

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ROYSTON MARTIS

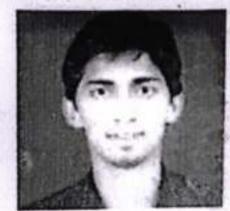
PETER MARTIS

16/11/1986

Permanent Account Number AVSPM5480D

marty

Runation



5092008

Signature