

Name : Mr. KIRAN S Register On : 09/02/2022 9:20 AM  
PID No. : MED120786591 Collection On : 09/02/2022 9:53 AM  
SID No. : 622003151 Report On : 09/02/2022 3:53 PM  
Age / Sex : 29 Year(s)/ Male Printed On : 14/02/2022 11:41 AM  
Ref. Dr : MEDIASSISTHEALTHCARESERVICESPRIVATELI Type : OP  
MITED----CORPORATE

Investigation Observed Value Unit Biological Reference Interval

## IMMUNOHAEMATOLOGY

BLOOD GROUPING AND Rh TYPING (Blood /Agglutination) 'O' 'Positive'


## HAEMATOLOGY

### Complete Blood Count With - ESR

Haemoglobin (Blood/Spectrophotometry)	14.63	g/dL	13.5 - 18.0
Packed Cell Volume(PCV)/Haematocrit (Blood/Derived from Impedance)	45.62	%	42 - 52
RBC Count (Blood/Impedance Variation)	05.72	mill/cu.mm	4.7 - 6.0
Mean Corpuscular Volume(MCV) (Blood/ Derived from Impedance)	79.78	fL	78 - 100
Mean Corpuscular Haemoglobin(MCH) (Blood/Derived from Impedance)	25.58	pg	27 - 32
Mean Corpuscular Haemoglobin concentration(MCHC) (Blood/Derived from Impedance)	32.06	g/dL	32 - 36
RDW-CV(Derived from Impedance)	13.7	%	11.5 - 16.0
RDW-SD(Derived from Impedance)	38.25	fL	39 - 46
Total Leukocyte Count (TC) (Blood/ Impedance Variation)	8140	cells/cu.mm	4000 - 11000
Neutrophils (Blood/Impedance Variation & Flow Cytometry)	54.80	%	40 - 75
Lymphocytes (Blood/Impedance Variation & Flow Cytometry)	38.70	%	20 - 45
Eosinophils (Blood/Impedance Variation & Flow Cytometry)	04.90	%	01 - 06
Monocytes (Blood/Impedance Variation & Flow Cytometry)	01.20	%	01 - 10
Basophils (Blood/Impedance Variation & Flow Cytometry)	00.40	%	00 - 02

**INTERPRETATION:** Tests done on Automated Five Part cell counter. All abnormal results are reviewed and confirmed microscopically.

Absolute Neutrophil count (Blood/ Impedance Variation & Flow Cytometry)	4.46	$10^3 / \mu\text{l}$	1.5 - 6.6
Absolute Lymphocyte Count (Blood/ Impedance Variation & Flow Cytometry)	3.15	$10^3 / \mu\text{l}$	1.5 - 3.5
Absolute Eosinophil Count (AEC) (Blood/ Impedance Variation & Flow Cytometry)	0.40	$10^3 / \mu\text{l}$	0.04 - 0.44
Absolute Monocyte Count (Blood/ Impedance Variation & Flow Cytometry)	0.10	$10^3 / \mu\text{l}$	< 1.0

  
DR SUPRAJA B. MD  
Consultant Pathologist  
Reg NO : 95961

The results pertain to sample tested.

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Investigation	Observed Value	Unit	Biological Reference Interval
Absolute Basophil count (Blood/Impedance Variation & Flow Cytometry)	0.03	10 <sup>3</sup> / $\mu$ l	< 0.2
Platelet Count (Blood/Impedance Variation)	240	10 <sup>3</sup> / $\mu$ l	150 - 450
MPV (Blood/Derived from Impedance)	08.19	fL	7.9 - 13.7
PCT(Automated Blood cell Counter)	0.20	%	0.18 - 0.28
ESR (Erythrocyte Sedimentation Rate) (Blood/Automated ESR analyser)	30	mm/hr	< 15

### BIOCHEMISTRY

Glucose Fasting (FBS) (Plasma - F/GOD-PAP)	92.9	mg/dL	Normal: < 100 Pre Diabetic: 100 - 125 Diabetic: >= 126
--------------------------------------------	------	-------	--------------------------------------------------------------

**INTERPRETATION:** Factors such as type, quantity and time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level.

Glucose, Fasting (Urine) (Urine - F) Negative Negative

Glucose Postprandial (PPBS) (Plasma - PP/ GOD-PAP) 106.5 mg/dL 70 - 140

### INTERPRETATION:

Factors such as type, quantity and time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level. Fasting blood glucose level may be higher than Postprandial glucose, because of physiological surge in Postprandial Insulin secretion, Insulin resistance, Exercise or Stress, Dawn Phenomenon, Somogyi Phenomenon, Anti-diabetic medication during treatment for Diabetes.

Blood Urea Nitrogen (BUN) (Serum/Urease UV / derived) 9.2 mg/dL 7.0 - 21

Creatinine (Serum/Modified Jaffe) 1.09 mg/dL 0.9 - 1.3

Uric Acid (Serum/Enzymatic) 6.9 mg/dL 3.5 - 7.2

### Liver Function Test

Bilirubin(Total) (Serum) 1.00 mg/dL 0.1 - 1.2

Bilirubin(Direct) (Serum/Diazotized Sulfanilic Acid) 0.25 mg/dL 0.0 - 0.3

Bilirubin(Indirect) (Serum/Derived) 0.75 mg/dL 0.1 - 1.0

SGOT/AST (Aspartate Aminotransferase) (Serum/Modified IFCC) 28.2 U/L 5 - 40

SGPT/ALT (Alanine Aminotransferase) (Serum) 84.7 U/L 5 - 41

GGT(Gamma Glutamyl Transpeptidase) (Serum/IFCC / Kinetic) 21.9 U/L < 55

Alkaline Phosphatase (SAP) (Serum/ Modified IFCC) 63.0 U/L 53 - 128

Total Protein (Serum/Biuret) 6.07 gm/dl 6.0 - 8.0

Albumin (Serum/Bromocresol green) 4.8 gm/dl 3.5 - 5.2

*B. Supraja*  
DR SUPRAJA, B. MD  
Consultant Pathologist  
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 Report On : 14/02/2022 11:59 AM  
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Investigation	Observed Value	Unit	Biological Reference Interval
Absolute Basophil count (Blood/Impedance Variation & Flow Cytometry)	0.03	10 <sup>3</sup> / $\mu$ l	< 0.2
Platelet Count (Blood/Impedance Variation)	240	10 <sup>3</sup> / $\mu$ l	150 - 450
MPV (Blood/Derived from Impedance)	08.19	fL	7.9 - 13.7
PCT(Automated Blood cell Counter)	0.20	%	0.18 - 0.28
ESR (Erythrocyte Sedimentation Rate) (Blood/Automated ESR analyser)	30	mm/hr	< 15

### BIOCHEMISTRY

Glucose Fasting (FBS) (Plasma - F/GOD-PAP)	92.9	mg/dL	Normal: < 100 Pre Diabetic: 100 - 125 Diabetic: >= 126
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**INTERPRETATION:** Factors such as type, quantity and time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level.

Glucose, Fasting (Urine) (Urine - F)	Negative	Negative
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Glucose Postprandial (PPBS) (Plasma - PP/GOD-PAP)	106.5	mg/dL	70 - 140
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### **INTERPRETATION:**

Factors such as type, quantity and time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level. Fasting blood glucose level may be higher than Postprandial glucose, because of physiological surge in Postprandial Insulin secretion, Insulin resistance, Exercise or Stress, Dawn Phenomenon, Somogyi Phenomenon, Anti-diabetic medication during treatment for Diabetes.

Urine Glucose(PP-2 hours) (Urine - PP)	Negative	Negative
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Blood Urea Nitrogen (BUN) (Serum/Urease UV / derived)	9.2	mg/dL	7.0 - 21
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Creatinine (Serum/Modified Jaffe)	1.09	mg/dL	0.9 - 1.3
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Uric Acid (Serum/Enzymatic)	6.9	mg/dL	3.5 - 7.2
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### Liver Function Test

Bilirubin(Total) (Serum)	1.00	mg/dL	0.1 - 1.2
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Bilirubin(Direct) (Serum/Diazotized Sulfanilic Acid)	0.25	mg/dL	0.0 - 0.3
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Bilirubin(Indirect) (Serum/Derived)	0.75	mg/dL	0.1 - 1.0
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SGOT/AST (Aspartate Aminotransferase) (Serum/Modified IFCC)	28.2	U/L	5 - 40
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SGPT/ALT (Alanine Aminotransferase) (Serum)	84.7	U/L	5 - 41
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GGT(Gamma Glutamyl Transpeptidase) (Serum/IFCC / Kinetic)	21.9	U/L	< 55
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Alkaline Phosphatase (SAP) (Serum/Modified IFCC)	63.0	U/L	53 - 128
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 DR SUPRAJA .B MD  
 Consultant Pathologist  
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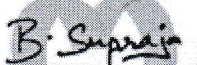
Investigation	Observed Value	Unit	Biological Reference Interval
Globulin (Serum/Derived)	1.27	gm/dL	2.3 - 3.6
A : G RATIO (Serum/Derived)	3.78		1.1 - 2.2
<b>Lipid Profile</b>			
Cholesterol Total (Serum/CHOD-PAP with ATCS)	202.1	mg/dL	Optimal: < 200 Borderline: 200 - 239 High Risk: >= 240
Triglycerides (Serum/GPO-PAP with ATCS)	157.1	mg/dL	Optimal: < 150 Borderline: 150 - 199 High: 200 - 499 Very High: >= 500

**INTERPRETATION:** The reference ranges are based on fasting condition. Triglyceride levels change drastically in response to food, increasing as much as 5 to 10 times the fasting levels, just a few hours after eating. Fasting triglyceride levels show considerable diurnal variation too. There is evidence recommending triglycerides estimation in non-fasting condition for evaluating the risk of heart disease and screening for metabolic syndrome, as non-fasting sample is more representative of the "usual" circulating level of triglycerides during most part of the day.

HDL Cholesterol (Serum/Immuno-inhibition)	50.6	mg/dL	Optimal(Negative Risk Factor): >= 60 Borderline: 40 - 59 High Risk: < 40
LDL Cholesterol (Serum/Calculated)	120.1	mg/dL	Optimal: < 100 Above Optimal: 100 - 129 Borderline: 130 - 159 High: 160 - 189 Very High: >= 190
VLDL Cholesterol (Serum/Calculated)	31.4	mg/dL	< 30
Non HDL Cholesterol (Serum/Calculated)	151.5	mg/dL	Optimal: < 130 Above Optimal: 130 - 159 Borderline High: 160 - 189 High: 190 - 219 Very High: >= 220

**INTERPRETATION:** 1.Non-HDL Cholesterol is now proven to be a better cardiovascular risk marker than LDL Cholesterol. 2.It is the sum of all potentially atherogenic proteins including LDL, IDL, VLDL and chylomicrons and it is the "new bad cholesterol" and is a co-primary target for cholesterol lowering therapy.

Total Cholesterol/HDL Cholesterol Ratio (Serum/Calculated)	4		Optimal: < 3.3 Low Risk: 3.4 - 4.4 Average Risk: 4.5 - 7.1 Moderate Risk: 7.2 - 11.0 High Risk: > 11.0
Triglyceride/HDL Cholesterol Ratio (TG/HDL) (Serum/Calculated)	3.1		Optimal: < 2.5 Mild to moderate risk: 2.5 - 5.0 High Risk: > 5.0

  
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Investigation	Observed Value	Unit	Biological Reference Interval
LDL/HDL Cholesterol Ratio (Serum/ Calculated)	2.4		Optimal: 0.5 - 3.0 Borderline: 3.1 - 6.0 High Risk: > 6.0

**Glycosylated Haemoglobin (HbA1c)**

HbA1C (Whole Blood/Ion exchange HPLC by D10)	5.1	%	Normal: 4.5 - 5.6 Prediabetes: 5.7 - 6.4 Diabetic: >= 6.5
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**INTERPRETATION:** If Diabetes - Good control : 6.1 - 7.0 % , Fair control : 7.1 - 8.0 % , Poor control >= 8.1 %

Estimated Average Glucose (Whole Blood)	99.67	mg/dL
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**INTERPRETATION: Comments**

HbA1c provides an index of Average Blood Glucose levels over the past 8 - 12 weeks and is a much better indicator of long term glycemic control as compared to blood and urinary glucose determinations.

Conditions that prolong RBC life span like Iron deficiency anemia, Vitamin B12 & Folate deficiency, hypertriglyceridemia, hyperbilirubinemia, Drugs, Alcohol, Lead Poisoning, Asplenia can give falsely elevated HbA1C values.

Conditions that shorten RBC survival like acute or chronic blood loss, hemolytic anemia, Hemoglobinopathies, Splenomegaly, Vitamin E ingestion, Pregnancy, End stage Renal disease can cause falsely low HbA1c.

**IMMUNOASSAY**

Prostate specific antigen - Total(PSA) (Serum/Manometric method)	1.07	ng/mL	Normal: 0.0 - 4.0 Inflammatory & Non Malignant conditions of Prostate & genitourinary system: 4.01 - 10.0 Suspicious of Malignant disease of Prostate: > 10.0
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**INTERPRETATION:** Analytical sensitivity: 0.008 - 100 ng/mL

PSA is a tumor marker for screening of prostate cancer. Increased levels of PSA are associated with prostate cancer and benign conditions like bacterial infection, inflammation of prostate gland and benign hypertrophy of prostate/ benign prostatic hyperplasia (BPH).

Transient elevation of PSA levels are seen following digital rectal examination, rigorous physical activity like bicycle riding, ejaculation within 24 hours.

PSA levels tend to increase in all men as they age.

Clinical Utility of PSA:

- In the early detection of Prostate cancer.
- As an aid in discriminating between Prostate cancer and Benign Prostatic disease.
- To detect cancer recurrence or disease progression.

**THYROID PROFILE / TFT**

T3 (Triiodothyronine) - Total (Serum/ Chemiluminescent Immunometric Assay (CLIA))	0.91	ng/ml	0.7 - 2.04
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**INTERPRETATION:**

**Comment :**

Total T3 variation can be seen in other condition like pregnancy, drugs, nephrosis etc. In such cases, Free T3 is recommended as it is Metabolically active.

*B. Supraja*  
 DR SUPRAJA .B MD  
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Investigation	Observed Value	Unit	Biological Reference Interval
T4 (Tyroxine) - Total (Serum/ Chemiluminescent Immunometric Assay (CLIA))	10.01	µg/dl	4.2 - 12.0

**INTERPRETATION:**

**Comment :**

Total T4 variation can be seen in other condition like pregnancy, drugs, nephrosis etc. In such cases, Free T4 is recommended as it is Metabolically active.

TSH (Thyroid Stimulating Hormone) (Serum /Chemiluminescent Immunometric Assay (CLIA))	2.16	µIU/mL	0.35 - 5.50
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**INTERPRETATION:**

Reference range for cord blood - upto 20

1 st trimester: 0.1-2.5

2 nd trimester 0.2-3.0

3 rd trimester : 0.3-3.0

(Indian Thyroid Society Guidelines)

**Comment :**

1.TSH reference range during pregnancy depends on Iodine intake, TPO status, Serum HCG concentration, race, Ethnicity and BMI.

2.TSH Levels are subject to circadian variation, reaching peak levels between 2-4am and at a minimum between 6-10PM.The variation can be of the order of 50%,hence time of the day has influence on the measured serum TSH concentrations.

3.Values&lt;0.03 µIU/mL need to be clinically correlated due to presence of rare TSH variant in some individuals.

**CLINICAL PATHOLOGY**

Urine Analysis - Routine

Colour (Urine)	Pale yellow		Yellow to Amber
Appearance (Urine)	Clear		Clear
Protein (Urine)	Negative		Negative
Glucose (Urine)	Negative		Negative
Pus Cells (Urine)	0-1	/hpf	NIL
Epithelial Cells (Urine)	1-2	/hpf	NIL
RBCs (Urine)	Nil	/hpf	NIL

-- End of Report --

*B. Supraja*  
 DR SUPRAJA .B MD  
 Consultant Pathologist  
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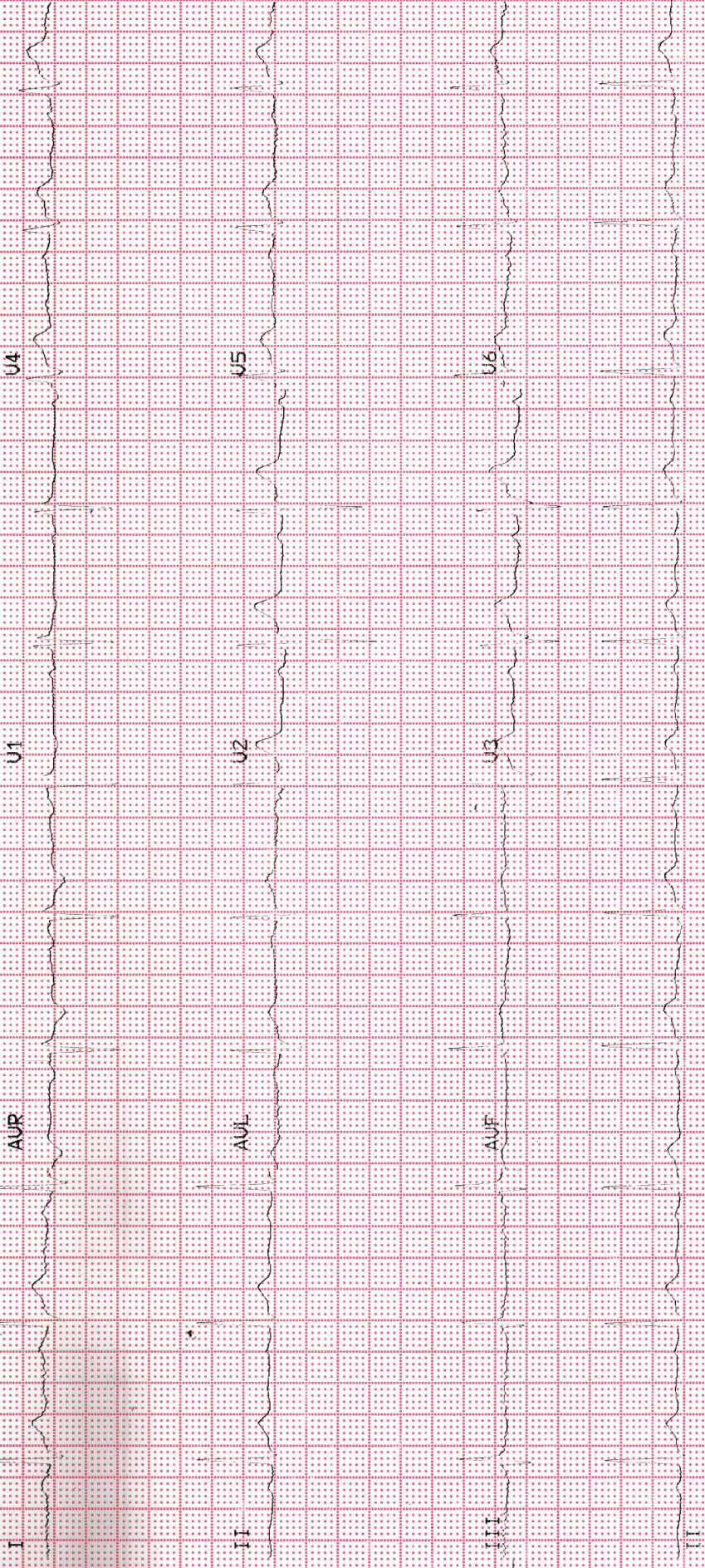
Measurement Results

PRP : 678 / 870 ms  
 P : 120 ms  
 PRP : 394 / 420 ms  
 P : 120 ms  
 PRP : 134 ms  
 P : 134 ms  
 PRP : 52 / 55 ms  
 P : 55 ms  
 PRP : 1.7 mV  
 P : 1.7 mV

Interpretation

Intra-ventricular block  
 RSR pattern  
 probably abnormal ECG

Unconfirmed report



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*Thanks for your reference*

**ECHOCARDIOGRAM WITH COLOUR DOPPLER:**

LVID d ... 4.6 cm  
 LVID s ... 2.9cm  
 EF ... 68%  
 IVS d ...1.1cm  
 IVS s ... 0.8cm  
 LVPW d ... 0.8cm  
 LVPW s ... 1.2cm  
 LA ... 3.1cm  
 AO ... 3.2cm  
 TAPSE ... 22mm  
 IVC ... 0.6 cm

Left ventricle, Left atrium normal.

Right ventricle, Right atrium normal.

No regional wall motion abnormality present.

Mitral valve, Aortic valve, Tricuspid valve & Pulmonary valve normal.

Aorta normal.

Inter atrial septum intact.

Inter ventricular septum intact.

No pericardial effusion .





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Doppler:

Mitral valve : E: 0.73m/s      A: 0.60m/s  
E/A Ratio: 1.22      E/E: 8.02

Aortic valve: AV Jet velocity: 1.49 m/s

Tricuspid valve: TV Jet velocity: 1.47 m/s      TRPG: 8.60 mmHg.

Pulmonary valve: PV Jet velocity: 1.10 m/s

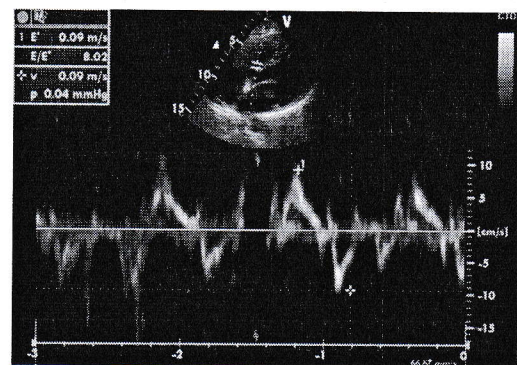
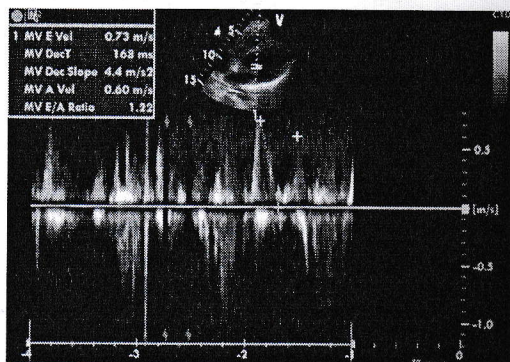
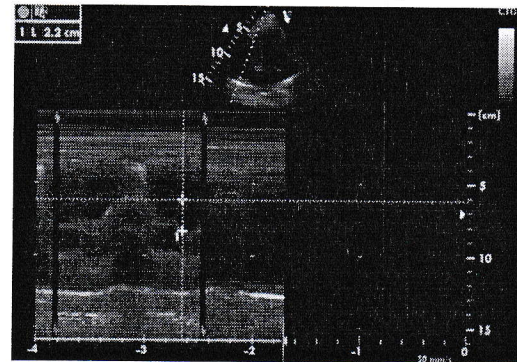
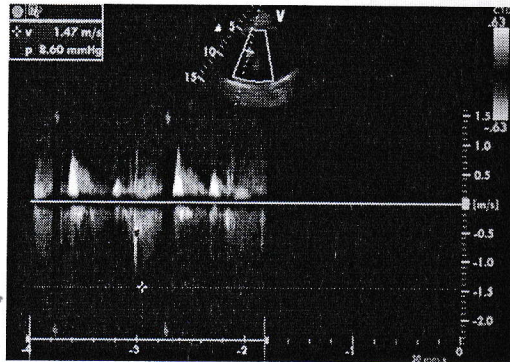
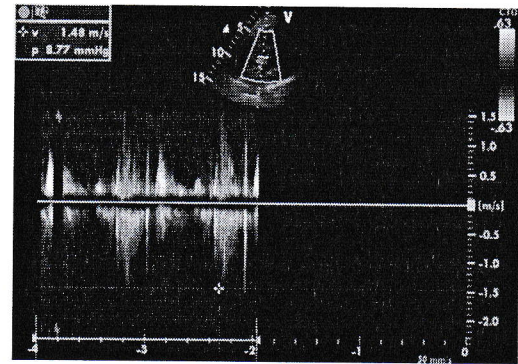
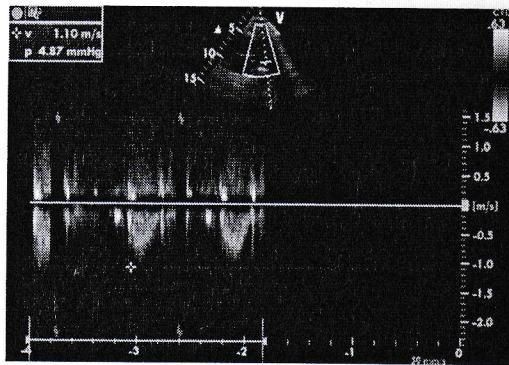
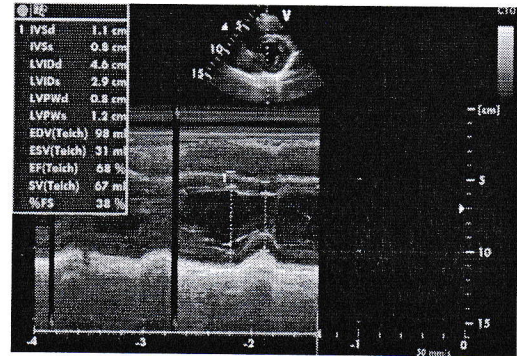
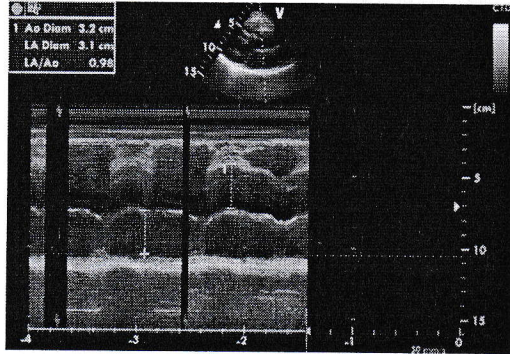
IMPRESSION:

1. Normal chambers & Valves.
2. No regional wall motion abnormality present.
3. Normal LV systolic function.
4. Pericardial effusion - Nil.
5. No pulmonary artery hypertension.

  
Dr. S. MANIKANDAN. MD.DM.(Cardio)  
Cardiologist

Medall Healthcare Pvt Ltd 10/5, HARSHA COMPLEX,  
 NORTH BYE PASS ROAD, Vannarapetai, Tirunelveli-627003

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*Thanks for your reference*

**REAL - TIME 2D & 4D ULTRASOUND DONE WITH VOLUSON 730 EXPERT .  
SONOGRAM REPORT**

**WHOLE ABDOMEN**

**Liver:** The liver is normal in size. Parenchymal echoes are increased in intensity. No focal lesions. Surface is smooth. There is no intra or extra hepatic biliary ductal dilatation.

**Gallbladder:** The gall bladder is normal sized and smooth walled and contains no calculus.

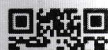
**Pancreas:** The pancreas shows a normal configuration and echotexture. The pancreatic duct is normal.

**Spleen:** The spleen is normal.

**Kidneys:** The right kidney measures 9.4 x 4.2 cm. Normal architecture. The collecting system is not dilated.

The left kidney measures 9.3 x 4.1 cm. Normal architecture. The collecting system is not dilated.

**Urinary bladder:** The urinary bladder is smooth walled and uniformly transonic. There is no intravesical mass or calculus.





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**Prostate:** The prostate measures 3.6 x 2.7 x 2.6 cm and is normal sized.  
Corresponds to a weight of about 13.55 gms.  
The echotexture is homogeneous.  
The seminal vesicles are normal.

**RIF:** Iliac fossae are normal.  
No mass or fluid collection is seen in the right iliac fossa.  
The appendix is not visualized.  
There is no free or loculated peritoneal fluid.  
No para aortic lymphadenopathy is seen.

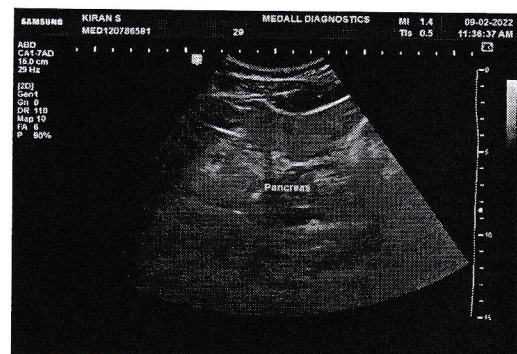
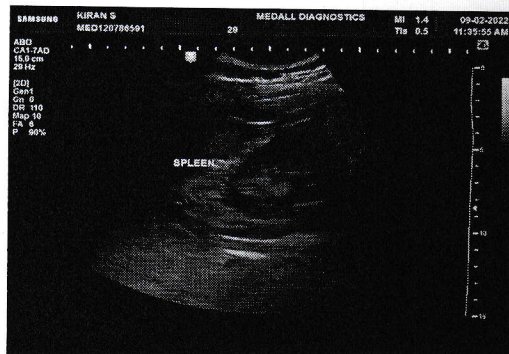
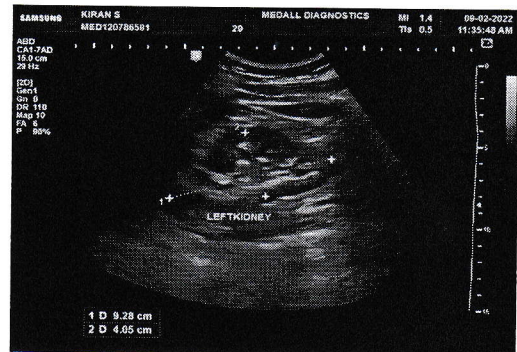
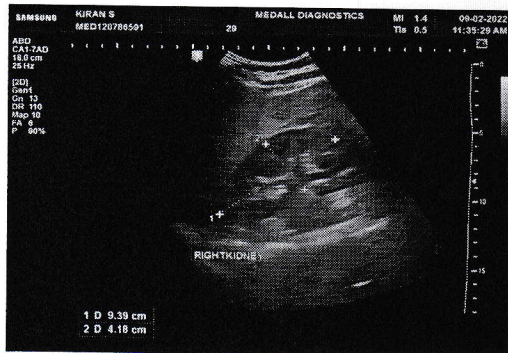
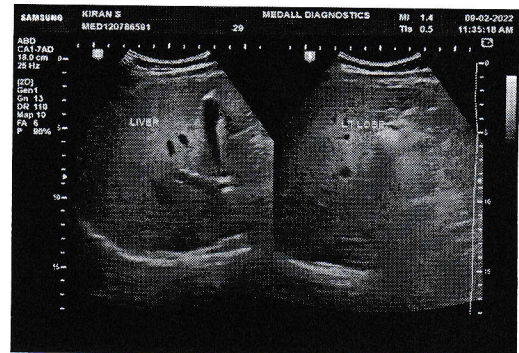
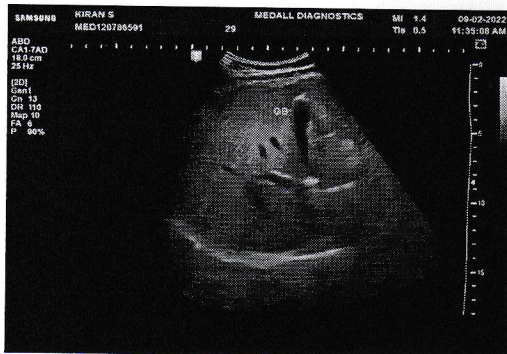
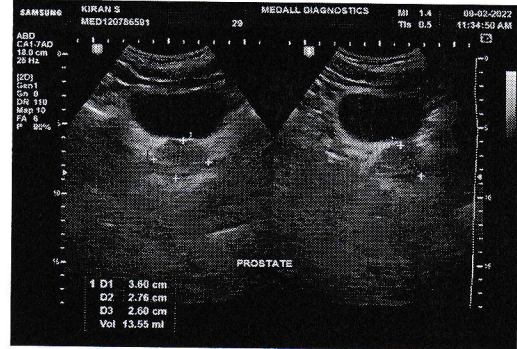
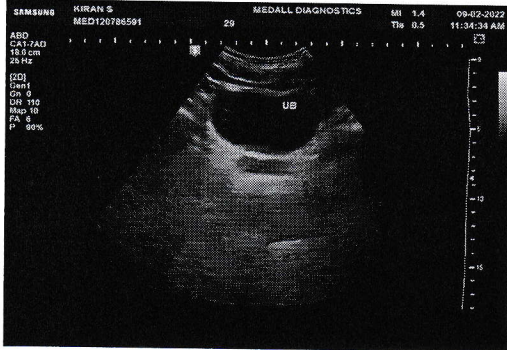
**IMPRESSION :**

- Grade I fatty liver.

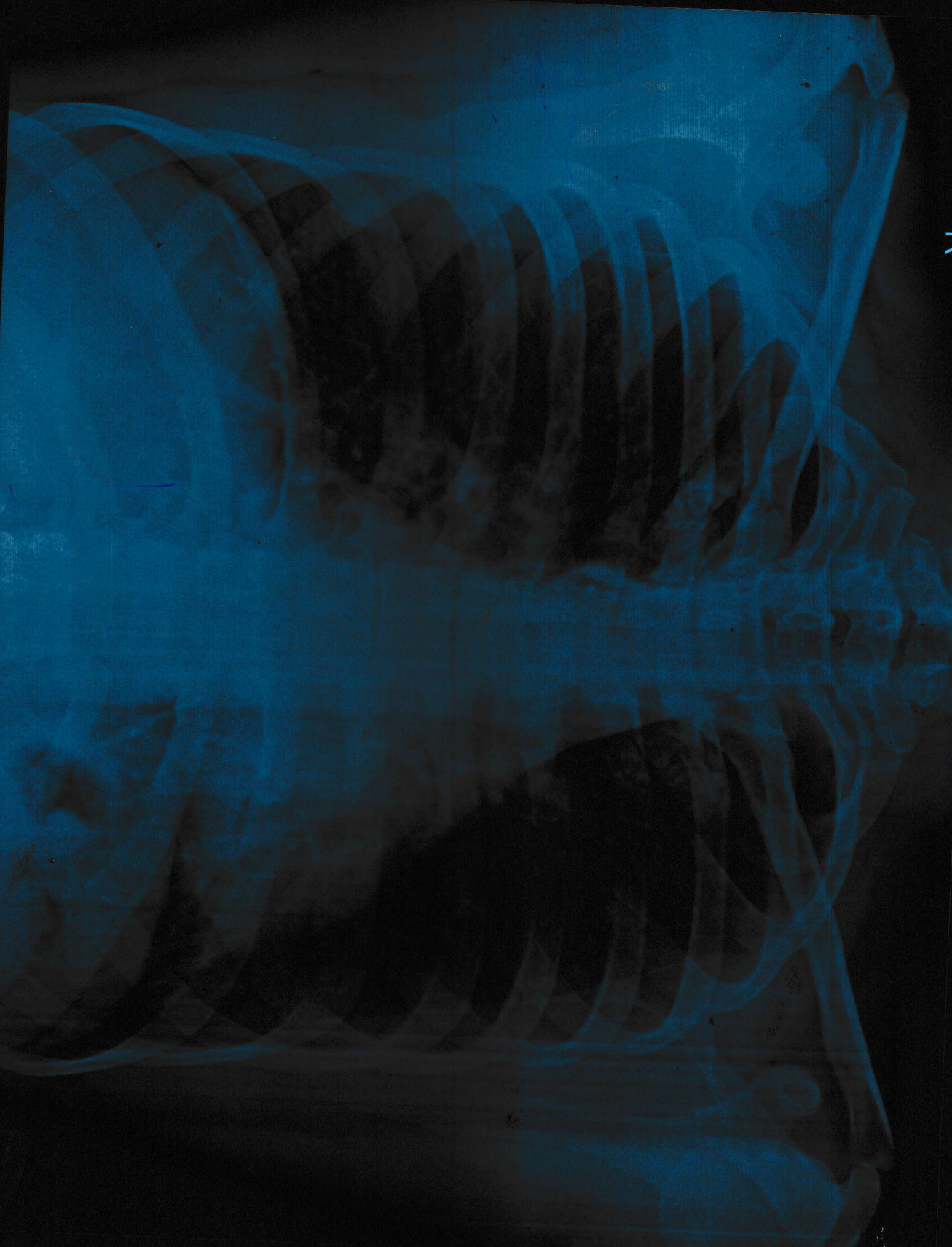
  
DR. PRARTHANA ANTOLINE ABHIA. DNB RD.,  
CONSULTANT RADIOLOGIST.

Medall Healthcare Pvt Ltd 10/5, HARSHA COMPLEX,  
NORTH BYE PASS ROAD, Vannarapetai, Tirunelveli-627003

Customer Name	MR.KIRAN S	Customer ID	MED120786591
Age & Gender	29Y/MALE	Visit Date	09/02/2022
Ref Doctor	MEDIASSISTHEALTHCARESERVICESPRIVATELIMITED---CORPORATE		



R



KIRAN S 29 M MED120786591 TEN84133141066 M RT 09-Feb-22  
MEDALL DIAGNOSTICS

Customer Name	MR.KIRAN S	Customer ID	MED120786591
Age & Gender	29Y/MALE	Visit Date	09/02/2022
Ref Doctor	MEDIASSISTHEALTHCARESERVICESPRIVATELIMITED----CORPORATE		

*Thanks for your reference*

**DIGITAL X- RAY CHEST PA VIEW**

Trachea appears normal.

Cardiothoracic ratio is within normal limits.

Bilateral lung fields appear normal.

Costo and cardiophrenic angles appear normal.

Visualised bony structures appear normal.

Extra thoracic soft tissues shadow grossly appears normal.

**IMPRESSION:**

❖ NO SIGNIFICANT ABNORMALITY DEMONSTRATED.



**DR. PRARTHANA ANTOLINE ABHIA, DNB, RD.,**  
Consultant Radiologist  
Reg. No: 112512





# MEDICAL EXAMINATION REPORT

Name  Gender  M /  F Date of Birth   
 Position Selected For  Identification marks

**A. HISTORY:**

1. Do you have, or are you being treated for, any of the following conditions? (please tick all that apply)?

- |                                                         |                                                                                                  |                                                                     |
|---------------------------------------------------------|--------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|
| <input type="checkbox"/> Anxiety                        | <input type="checkbox"/> Cancer                                                                  | <input type="checkbox"/> High Blood Pressure                        |
| <input type="checkbox"/> Arthritis                      | <input type="checkbox"/> Depression/ bipolar disorder                                            | <input type="checkbox"/> High Cholesterol                           |
| <input type="checkbox"/> Asthama, Bronchitis, Emphysema | <input type="checkbox"/> Diabetes                                                                | <input type="checkbox"/> Migraine Headaches                         |
| <input type="checkbox"/> Back or spinal problems        | <input type="checkbox"/> Heart Disease                                                           | <input type="checkbox"/> Sinusitis or Allergic Rhinitis (Hay Fever) |
| <input type="checkbox"/> Epilepsy                       | <input type="checkbox"/> Any other serious problem for which you are receiving medical attention |                                                                     |

2. List the medications taken Regularly.

3. List allergies to any known medications or chemicals

4. Alcohol : Yes  No  Occasional

5. Smoking : Yes  No  Quit (more than 3 years)

**6. Respiratory Function :**

- a. Do you become unusually short of breath while walking fast or taking stair - case? Yes  No
- b. Do you usually cough a lot first thing in morning? Yes  No
- c. Have you vomited or coughed out blood? Yes  No

**7. Cardiovascular Function & Physical Activity :**

- a. Exercise Type: (Select 1)
- No Activity
  - Very Light Activity (Seated At Desk, Standing)
  - Light Activity (Walking on level surface, house cleaning)
  - Moderate Activity (Brisk walking, dancing, weeding)
  - Vigorous Activity (Soccer, Running)
- b. Exercise Frequency: Regular (less than 3 days/ week) / Irregular (more than 3 days/ Week)
- c. Do you feel pain in chest when engaging in physical activity? Yes  No

**8. Hearing :**

- a. Do you have history of hearing troubles? Yes  No
- b. Do you experiences ringing in your ears? Yes  No
- c. Do you experience discharge from your ears? Yes  No
- d. Have you ever been diagnosed with industrial deafness? Yes  No

**9. Musculo - Skeletal History**

- |                                   |                                            |                              |                                        |
|-----------------------------------|--------------------------------------------|------------------------------|----------------------------------------|
| a. Neck :                         | Have you ever injured or experienced pain? | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| b. Back :                         | If Yes ; approximate date (MM/YYYY)        |                              |                                        |
| c. Shoulder, Elbow, Wrists, Hands | Consulted a medical professional ?         | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| d. Hips, Knees, Ankles, Legs      | Resulted in time of work?                  | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
|                                   | Surgery Required ?                         | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
|                                   | Ongoing Problems ?                         | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |

**10. Function History**

- a. Do you have pain or discomfort when lifting or handling heavy objects? Yes  No
- b. Do you have knee pain when squatting or kneeling? Yes  No
- c. Do you have back pain when forwarding or twisting? Yes  No
- d. Do you have pain or difficulty when lifting objects above your shoulder height? Yes  No
- e. Do you have pain when doing any of the following for prolonged periods (Please circle appropriate response)
  - Walking : Yes  No
  - Kneeling : Yes  No
  - Squatting : Yes  No
  - Climbing : Yes  No
  - Sitting : Yes  No
  - Standing : Yes  No
  - Bending : Yes  No
- f. Do you have pain when working with hand tools? Yes  No
- g. Do you experience any difficulty operating machinery? Yes  No
- h. Do you have difficulty operating computer instrument? Yes  No

**B. CLINICAL EXAMINATION :**

a. Height	<input type="text" value="175"/>	b. Weight	<input type="text" value="78"/>	Blood Pressure	<input type="text" value="130 / 80"/>	mmhg
Chest measurements:	<input type="checkbox"/>	a. Normal	<input checked="" type="checkbox"/>	b. Expanded	<input type="checkbox"/>	
Waist Circumference	<input checked="" type="checkbox"/>	Ear, Nose & Throat	<input checked="" type="checkbox"/>			
Skin	<input checked="" type="checkbox"/>	Respiratory System	<input checked="" type="checkbox"/>			
Vision	<input checked="" type="checkbox"/>	Nervous System	<input checked="" type="checkbox"/>			
Circulatory System	<input checked="" type="checkbox"/>	Genito- urinary System	<input checked="" type="checkbox"/>			
Gastro-intestinal System	<input checked="" type="checkbox"/>	Colour Vision	<input checked="" type="checkbox"/>			

Discuss Particulars of Section B :-

*Dental - Normal.*

**C. REMARKS OF PATHOLOGICAL TESTS :**

Chest X-ray	<input checked="" type="checkbox"/>	ECG	<input checked="" type="checkbox"/>
Complete Blood Count	<input checked="" type="checkbox"/>	Urine routine	<input checked="" type="checkbox"/>
Serum cholesterol	<input checked="" type="checkbox"/>	Blood sugar	<input checked="" type="checkbox"/>
Blood Group	<input checked="" type="checkbox"/>	S.Creatinine	<input checked="" type="checkbox"/>

**D. CONCLUSION :**

Any further investigations required

Any precautions suggested



**E. FITNESS CERTIFICATION**

Certified that the above named recruit does not appear to be suffering from any disease communicable or otherwise, constitutional weakness or bodily infirmity except \_\_\_\_\_ . I do not consider this as disqualification for employment in the Company. S

Candidate is free from Contagious/Communicable disease

Date : 9-2-22

Signature of Medical Adviser

*Arjun*  
**ARJUN M.D.D.M., (Cardio**

Professor of Cardiology

MEDICAL COLLEGE, TIRUNELVELI

## Eye Examination Report

Candidate Name: Mr. Kiran S

Age/ Gender: 29 Y / M.

Date: 9/2/22

This is to certify that I have examined Mr. /Ms. Kiran S hereby, his/her visual standards are as follows :

Without Glasses		With Glasses		Color Vision (Normal/Defective)
R <u>N/N</u>	L <u>6/6</u>	R <u>N/N</u>	L <u>6/6</u>	<u>Normal</u>

Doctor Signature:

Doctor Stamp

**Dr. S. MANIKANDAN M.D.D.M., (Cardio)**  
**Asst. Professor of Cardiology**  
**TIRUNELVELI MEDICAL COLLEGE HOSPITAL**  
**TIRUNELVELI.**  
**Reg No : 61785**