



\* 2 1 3 1 8 6 \*

Name : Mr. ADNAN KHAN Collected On : 9/11/2024 11:07 am  
 Lab ID. : 213186 Received On : 9/11/2024 11:17 am  
 Age/Sex : 22Years / Male Reported On : 9/11/2024 9:42 pm  
 Ref By : JINKUSHAL CARDIAC CARE & SUPER SPECIALITY HOS Report Status : FINAL

**COMPLETE BLOOD COUNT**

| TEST NAME                        | RESULTS                 | UNIT                 | REFERENCE RANGE |
|----------------------------------|-------------------------|----------------------|-----------------|
| <b>HEMOGLOBIN</b>                | 15.5                    | gm/dl                | 13 - 18         |
| HEMATOCRIT (PCV)                 | 46.5                    | %                    | 42 - 52         |
| RBC COUNT                        | 5.42                    | x10 <sup>6</sup> /uL | 4.70 - 6.50     |
| MCV                              | 86                      | fl                   | 80 - 96         |
| MCH                              | 28.6                    | pg                   | 27 - 33         |
| MCHC                             | 33                      | g/dl                 | 33 - 36         |
| RDW-CV                           | 12.9                    | %                    | 11.5 - 14.5     |
| <b>TOTAL LEUCOCYTE COUNT</b>     | 4220                    | /cumm                | 4000 - 11000    |
| <b><u>DIFFERENTIAL COUNT</u></b> |                         |                      |                 |
| NEUTROPHILS                      | 49                      | %                    | 40 - 80         |
| LYMPHOCYTES                      | <b>41</b>               | %                    | 20 - 40         |
| EOSINOPHILS                      | 03                      | %                    | 0 - 6           |
| MONOCYTES                        | 07                      | %                    | 2 - 10          |
| BASOPHILS                        | 00                      | %                    | 0 - 1           |
| <b>PLATELET COUNT</b>            | 239000                  | /cumm                | 150 to 410      |
| MPV                              | <b>12.1</b>             | fl                   | 6.5 - 11.5      |
| PDW                              | 16.3                    | %                    | 9.0 - 17.0      |
| PCT                              | 0.290                   | %                    | 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.**

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

Checked By  
SHAISTA Q

**DR. SMITA RANVEER.**  
**M.B.B.S.M.D. Pathology(Mum)**  
**Consultant Histocytopathologist**  
 Regd.No.: 3401/09/2007





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#### HAEMATOLOGY

| TEST NAME   | RESULTS                  | UNIT | REFERENCE RANGE |
|---|--------------------------|------|-----------------|
| <b><u>BLOOD GROUP</u></b>   |                          |      |                 |
| SPECIMEN  | WHOLE BLOOD EDTA & SERUM |      |                 |
| * ABO GROUP   | 'O'                      |      |                 |
| RH FACTOR   | NEGATIVE                 |      |                 |
| Method: Slide Agglutination and Tube Method (Forward grouping & Reverse grouping) |                          |      |                 |
| <b>Result relates to sample tested, Kindly correlate with clinical findings.</b>  |                          |      |                 |
| ----- END OF REPORT -----   |                          |      |                 |

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**\* BIOCHEMISTRY**

| TEST NAME                       | RESULTS                        | UNIT  | REFERENCE RANGE |
|---------------------------------|--------------------------------|-------|-----------------|
| <b><u>CREATININE, SERUM</u></b> |                                |       |                 |
| * <b>SERUM CREATININE</b>       | 0.77                           | mg/dL | 0.7 - 1.3       |
| METHOD                          | Enzymatic Colourimetric Method |       |                 |

Creatinine is critically important in assessing renal function. In blood, it is a marker of glomerular filtration rate. As the kidneys become impaired for any reason, the creatinine level in the blood will rise due to poor clearance of creatinine by the kidneys. Abnormally high levels of creatinine thus warn of possible malfunction or failure of the kidneys.

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

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

Checked By  
 Rajashri\_Dumbre

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**HAEMATOLOGY**

| TEST NAME  | RESULTS   | UNIT    | REFERENCE RANGE |
|------------|-----------|---------|-----------------|
| <b>ESR</b> |           |         |                 |
| <b>ESR</b> | <b>37</b> | mm/1hr. | 0 - 20          |

METHOD - WESTERGREN

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

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

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**BIOCHEMISTRY**

| TEST NAME                                       | RESULTS     | UNIT  | REFERENCE RANGE |
|---|-------------|-------|-----------------|
| <b><u>BILIRUBIN (TOTAL,DIRECT,INDIRECT)</u></b> |             |       |                 |
| <b>TOTAL BILLIRUBIN</b>                         | <b>1.32</b> | mg/dL | 0.1 - 1.2       |
| <b>BILLIRUBIN (DIRECT)</b>                      | <b>0.62</b> | mg/dL | 0.0 - 0.4       |
| <b>BILLIRUBIN (INDIRECT)</b>                    | 0.70        | mg/dL | 0.0 - 1.1       |
| Method(Diazo)                                   |             |       |                 |
| <b><u>BLOOD GLUCOSE FASTING &amp; PP</u></b>    |             |       |                 |
| BLOOD GLUCOSE FASTING                           | 81.6        | mg/dL | 70 - 110        |
| BLOOD GLUCOSE PP                                | 99.5        | 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 :  $\geq 126$  mg/dl

**POSTPRANDIAL/POST GLUCOSE (75 grams)**

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

**CRITERIA FOR DIAGNOSIS OF DIABETES MELLITUS**

- Fasting plasma glucose  $\geq 126$  mg/dl
- Classical symptoms +Random plasma glucose  $\geq 200$  mg/dl
- Plasma glucose  $\geq 200$  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.

**SGPT (ALT)** 13.0 IU/L 0 - 40

UV Kinetic Without PLP (P-L-P)

**BLOOD UREA NITROGEN, SERUM**

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**BIOCHEMISTRY**

| TEST NAME             | RESULTS | UNIT  | REFERENCE RANGE |
|-----------------------|---------|-------|-----------------|
| * BLOOD UREA NITROGEN | 13.41   | mg/dL | 7 - 18          |

Result relates to sample tested, Kindly correlate with clinical findings.  
----- END OF REPORT -----

Checked By  
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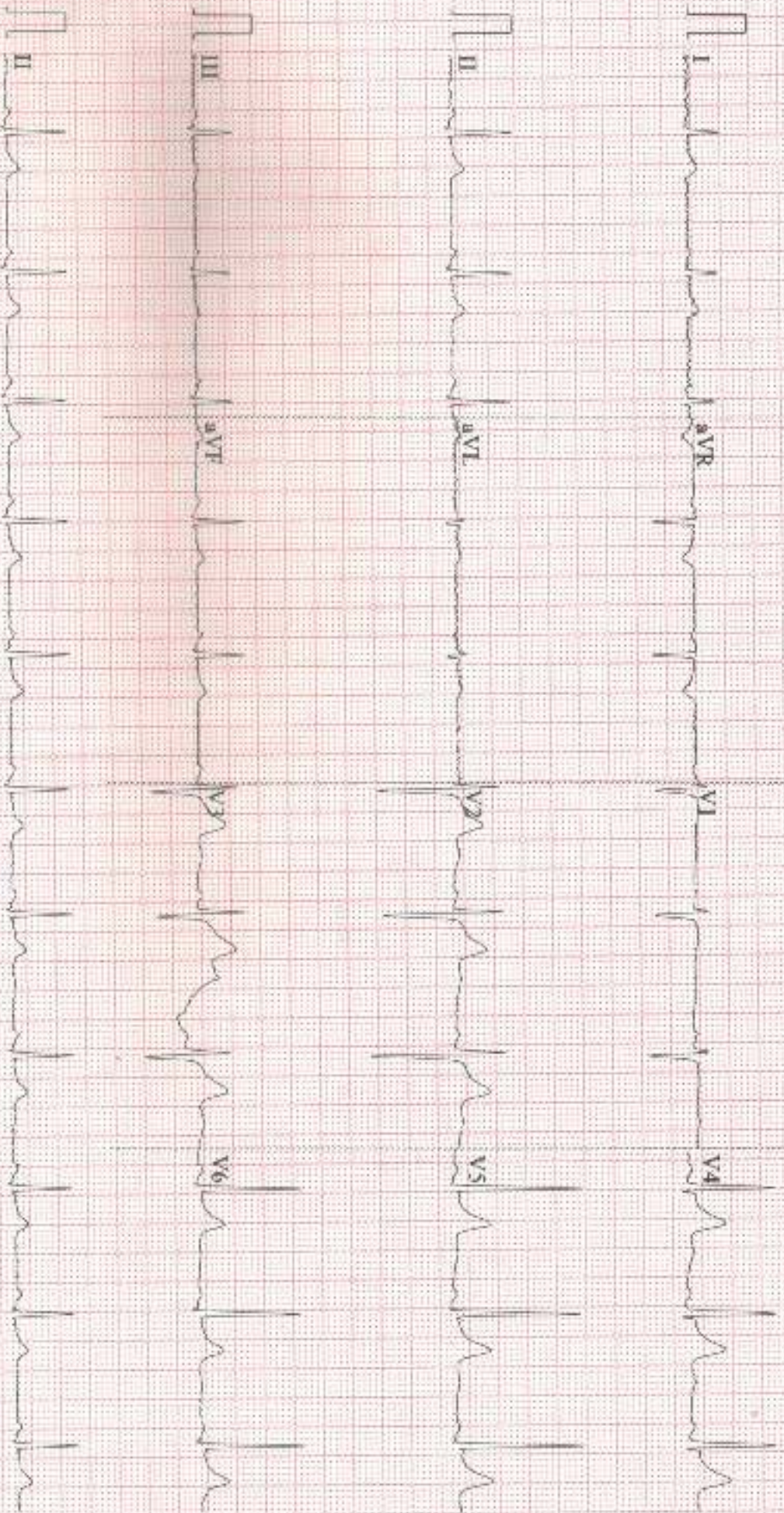


adnan khan  
Male 22Years  
Req. No. :

|          |   |             |     |
|----------|---|-------------|-----|
| HR       | : | 66          | bpm |
| P        | : | 91          | ms  |
| PR       | : | 132         | ms  |
| QRS      | : | 92          | ms  |
| QT/QTcBz | : | 369/388     | ms  |
| PQRST    | : | 69/59/44    | ms  |
| RV5SV1   | : | 2.168/0.677 | mV  |

Diagnosis in form of:  
Sinus Arrhythmia  
Slight ST Elevation(V4,V5)

Report Confirmed by:



**CERTIFICATE OF MEDICAL FITNESS**

This is to certify that I have conducted the clinical examination of,

 Mr./Ms./Mrs. Mr. Adnan Khan on { DD / MM / YYYY }:-

After reviewing the medical history and upon clinical examination, it has been found that he/she is:

| Fitness Status   | Mark (✓) Below, where applicable |
|--|----------------------------------|
| <ul style="list-style-type: none"> <li>• <b>Medically Fit</b></li> </ul>   | ✓                                |
| <ul style="list-style-type: none"> <li>• <b>Fit with restriction/recommendations</b><br/>                     Though following restriction have been revealed, in my opinion, these are not impediments to the prospective job</li> <li>1. ....</li> <li>2. ....</li> <li>3. ....</li> </ul> <p>However the employee should follow the advice/medication that has been communicated to him/her.</p> <p>Review after _____ days is recommended.</p> | He is fit to Resume his work.    |
| <ul style="list-style-type: none"> <li>• <b>Currently Unfit</b><br/>                     Review after _____ days is recommended.</li> </ul>  |                                  |
| <ul style="list-style-type: none"> <li>• <b>Unfit</b></li> </ul>   |                                  |



Signature  
 Dr. Mayur Jain  
 Medical Officer  
**Jinkushal Cardiac Care and Super specialty Hospital**  
 Second floor, Rosa Vista, Opp. Suraj Water Park,  
 Kavesar, Ghodbunder Road, Thane(W) - 400607.

**DR. MAYUR JAIN**  
**DM CARDIOLOGY**  
 2007/04/0618

*This certificate is not meant for medico-legal purposes.*



# SEFRA DIGITAL X-RAY

JINKUSHAL HOSPITAL, Rosa Vista, Opp. Suraj Water Park, Waghbill, G.B. Road, Thane (W)

Mob.: 7678031047 / 9833520607 | Time : 9 am. to 9 pm. | SUNDAY ON CALL)

PORTABLE X-RAY AVAILABLE

|                               |                      |
|-------------------------------|----------------------|
| PATIENT NAME : MR. ADNAN KHAN | AGE / SEX 22 YRS / M |
| REF BY DR: JINKUSHAL HOSPITAL | DATE : 09/11/2024    |

## X-ray Chest PA

Bilateral lung fields appear clear. No obvious pleural/parenchymal lesion noted.

Bilateral hila are normal.

Both costo-phrenic and cardio-phrenic angles appear clear.

Cardiac silhouette is within normal limits.

Both domes of diaphragm appear normal.

Bony thoracic cage & soft tissues appear normal.

**Impression: No significant abnormality detected.**

Suggest Clinical correlation and further evaluation.

Thanks for referral

*Dr. Patil*

**Dr. Devendra Patil**  
**MD Radiology**

Disclaimer: report is done by teleradiology after the images acquired by PACS ( picture archiving and communication system) and this report is not meant for medicolegal purpose Investigations have their limitations. Solitary pathological/Radiological and other investigations never confirm the final diagnosis. They only help in diagnosing the disease in correlation to clinical symptoms and other related tests. Please interpret accordingly. Patient's identification in online reporting is not established, so in no way patient identification is possible for medico-legal cases.

## MEDICAL EXAMINATION REPORT

|                                      |  |  |
|--------------------------------------|--|--|
| Name Mr./Mrs./Miss                   | Mr. Adnan Khan   |  |
| Sex                                  | M  | Male/ Female Male  |
| Age (yrs.)                           | 22   | UHID :   |
| Date                                 | 09/11/24   | Bill No. :   |
| Marital Status                       | Married/ No. of Children / <u>Unmarried</u> / Widow :  |  |
| Present Complaints                   | No Any Complaints .  |  |
| Past Medical :<br>History Surgical : | No Any Past History of Surgical .  |  |
| Personal History                     | Diet : Veg <input type="checkbox"/> / Mixed <input checked="" type="checkbox"/> :<br>Addiction : Smoking <input type="checkbox"/> / Tobacco Chewing <input type="checkbox"/> / Alcohol <input type="checkbox"/> /<br>Any Other |  |
| Family History                       | Father =<br>Mother =<br>Siblings =   | HT / DM / IHD / Stroke / Any Other<br>Mother = HT / DM / IHD / Stroke / Any Other<br>Siblings = HT / DM / IHD / Stroke / Any Other |
| History of Allergies                 | Drug Allergy<br>Any Other  |  |
| History of Medication                | For HT / DM / IHD / Hypothyroidism<br>Any Other  |  |
| On Examination (O/E)                 | G.E.: N.A.D.<br>R.S.: A.E.B.E clear<br>C.V.S.: S <sub>1</sub> S <sub>2</sub> ⊕<br>C.N.S.: Conscious & oriented<br>P/A: Soft/NT.<br>Any Other Positive Findings :   |  |

|  |   |                            |                 |
|--|---|----------------------------|-----------------|
| Height   | 154 cms   | Weight                     | 49 Kgs          |
| BMI  |   |                            |                 |
| Pulse (per min.)                                   | 77/min  | Blood Pressure ( mm of Hg) | 110/70 mm of Hg |
| <b>Gynaecology</b>                                 |   |                            |                 |
| Examined by  | Dr.   |                            |                 |
| Complaint & Duration                               |   |                            |                 |
| Other symptoms (Mict, bowels etc)                  |   |                            |                 |
| Menstrual History                                  | Menarche  | Cycle                      | Loss            |
|  | Pain  | I.M.B.                     | P.C.B.          |
|  | L.M.P.  | Vaginal Discharge          |                 |
|  | Cx. Smear   | Contraception              |                 |
| Obstetric History                                  |   |                            |                 |
| Examination :                                      |   |                            |                 |
| Breast   |   |                            |                 |
| Abdomen  |   |                            |                 |
| P.S.   |   |                            |                 |
| P.V.   |   |                            |                 |
| <b>Gynaecology Impression &amp; Recommendation</b> |   |                            |                 |
| <b>Recommendation</b>                              |   |                            |                 |
| <b>Physician Impression</b>                        | Wait for Reports.<br>Symptomatically & Clinically stable.<br>No complaints. |                            |                 |
| <b>Examined by :</b>                               | - Overweight = To Reduce Weight<br>- Underweight = To Increase Weight       |                            |                 |