

Mr. Pradeep Ku. Kisturid
Age - 34 Y/M

BP - 100/80

P - 90/nt

H - 173 C.M

WT - 77 Kg

BMI - 25.4



ID: 466
MR PRADIP KUMAR KIRTANIA
Male 34Ycars

09-03-2024 10:34:03 AM

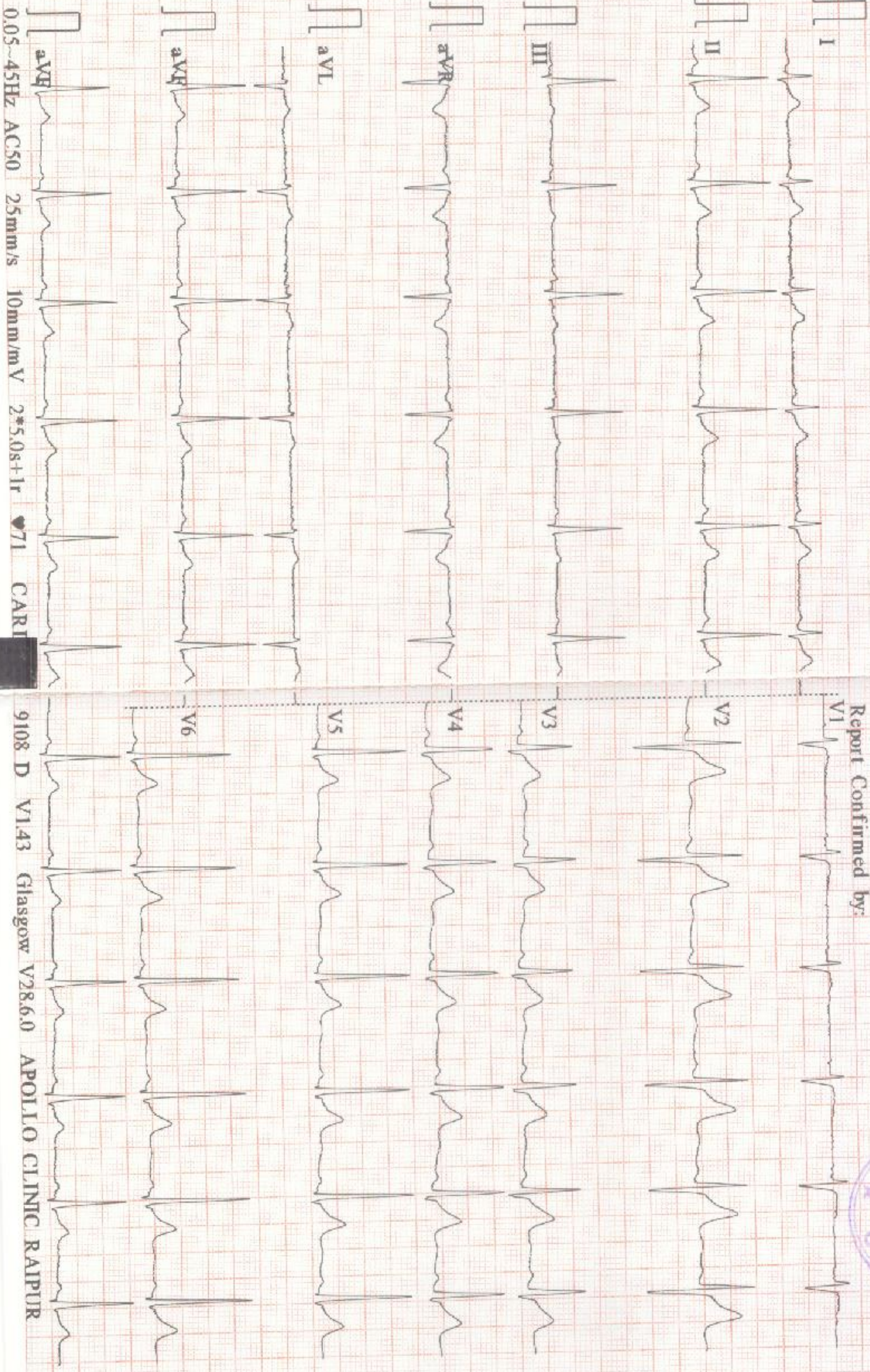
HR : 71 bpm
P : 104 ms
PR : 134 ms
QRS : 94 ms
QT/QTc : 354/385 ms
P/QRS/T : 61/78/45 °
RV5/SV1 : 1.74/0.539 mV

Diagnosis Information:
Sinus rhythm
Normal ECG

Dr. Ankit Sharma
MD Medicine
Reg. No.- CGMC 7971/2018
Apollo Clinic, Raipur



Report Confirmed by:



0.05-45Hz AC50 25mm/s 10mm/mV 2*5.0s+1r 71 CARI

9108 D V1.43 Glasgow V28.6.0 APOLLO CLINIC RAIPUR

EXAMINATION OF EYES :- (BY OPHTHALMOLOGIST)

Patient Name Mr. Bisadip Kumar Khatana Date 09/03/24

Sex/Age M/34 year MR No Employee Id

EXTERNAL EXAMINATION				
SQUINT				
NYSTAGMUS				
COLOUR VISION				
FUNDUS:(RE):- <u>WNL</u> (LE):- <u>WNL</u>				
INDIVIDUAL COLOUR IDENTIFICATION				
DISTANT VISION:(RE):- <u>6/24 6/6 6/6</u> (LE):- <u>6/36 6/6 6/6</u>				
NEAR VISION:(RE):- <u>2/6</u> (LE):- <u>2/6</u>				
NIGHT BLINDNESS				
	SPH	CYL	AXIS	ADD
RIGHT	<u>-2.50</u>	<u>—</u>		
LEFT	<u>-3.50</u>	<u>-1.0</u>	<u>10°</u>	
REMARKS :-				

Dr. Vikas Khatana
MBBS, MS (Ophthalmologist)
Reg. No: CGMC 624/2006



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NAME OF PATIENT: MR. PRADIP KUMAR KIRTANIA

AGE: 34YRS/MALE

REFERRED BY: BOB

DATE: 09/03/2024

CHEST X - RAY PA VIEW

FINDINGS:

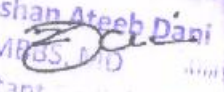
- Both the domes of diaphragm and CP angles are normal.
- Both the hila and mediastinum are normal.
- Both the lung fields are clear. No e/o focal parenchymal lesion.
- Cardio-thoracic ratio is normal.
- Soft tissues and bony cage are unremarkable.

IMPRESSION:

- **NO SIGNIFICANT ABNORMALITY SEEN.**

Advised: Clinical correlation and further evaluation if clinically indicated.




Dr. Zeeshan Ateeb Dani
MBBS, MD
Consultant Radiologist
Reg. No. CGMC
DR. ZEESHAN ATEEB DANI
(MD)
CONSULTANT RADIOLOGIST

This report is for perusal of the doctor only not the definitive diagnosis; findings have to be clinically correlated. This report is not for medico-legal purposes.

Apollo Clinic

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 **0771 4033341**

PATIENT NAME:- MR. PRADIP KUMAR KIRTANIA
REF BY :- BOB

AGE/SEX: 34YRS/M
DATE:- 09.03.2024

USG ABDOMEN

Liver : Liver is normal in size cm, smooth in outline with echotexture. IHBR's are not dilated. CBD is not dilated. Portal vein and hepatic veins are normal.

Gall bladder : MULTIPLE SMALL GB POLYP

Pancreas & Paraaortic Region : Normal.

Spleen : Is normal size measures cm and echotexture.

Kidneys	RIGHT	LEFT
SIZE	11.51X4.53cm	11.21X4.19cm
CORTICAL ECHOGENICITY	Normal	Normal
CORTICOMEDULLARY DIFFERENTIATION	Maintained	Maintained
PCS	Not dilated	Not dilated
Any other remarks	Nil	Nil

Urinary bladder.- Distended & normal

Prostate: is normal in size measures weight gm shape & echotexture.

No free fluid in abdomen.

Visualized bowel loops are normal.

No significant intra-abdominal lymphadenopathy seen.

IMPRESSION:

- MULTIPLE SMALL GALL BLADDER POLYP

Advised clinical correlation/further evaluation if clinically indicated.



Dr. Zeeshan Ateeb Dani
MBBS, MD
Consultant Radiologist
Reg. No. G.O. 120/2014
DR. ZEESHAN ATEEB DANI
(MD)
CONSULTANT RADIOLOGIST

This report is for perusal of the doctor only, not the definitive diagnosis; findings have to be clinically correlated. Ultrasound has its limitations in obese patients and in retroperitoneal organs. All congenital abnormalities cannot be detected on ultrasound. This report is not for medico-legal purposes.

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 **0771 4033341**

Patient Name : Mr.PRADEEP KU. KIRTARIA	Collected : 09/Mar/2024 12:38PM
Age/Gender : 34 Y 0 M 0 D /M	Received : 09/Mar/2024 01:27PM
UHID/MR No : DSUS.000006706	Reported : 09/Mar/2024 03:06PM
Visit ID : DSUSOPV7818	Status : Final Report
Ref Doctor : APOLLO CLINIC	Client Name : PUP APOLLO CLINIC SAMRIDDI AR
IP/OP NO :	Patient location : Raipur,Raipur

DEPARTMENT OF HAEMATOLOGY

Test Name	Result	Unit	Bio. Ref. Range	Method
COMPLETE BLOOD COUNT (CBC) , WHOLE BLOOD EDTA				
HAEMOGLOBIN	16.1	g/dL	13-17	Spectrophotometer
PCV	47.10	%	40-50	Electronic pulse & Calculation
RBC COUNT	5.03	Million/cu.mm	4.5-5.5	Electrical Impedance
MCV	93.6	fL	83-101	Calculated
MCH	32.0	pg	27-32	Calculated
MCHC	34.1	g/dL	31.5-34.5	Calculated
R.D.W	13.1	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	4,280	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	61.4	%	40-80	Electrical Impedance
LYMPHOCYTES	28.4	%	20-40	Electrical Impedance
EOSINOPHILS	3.3	%	1-6	Electrical Impedance
MONOCYTES	5.9	%	2-10	Electrical Impedance
BASOPHILS	1.0	%	<1-2	Electrical Impedance
CORRECTED TLC	4,280	Cells/cu.mm		Calculated
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	2627.92	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	1215.52	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	141.24	Cells/cu.mm	20-500	Calculated
MONOCYTES	252.52	Cells/cu.mm	200-1000	Calculated
BASOPHILS	42.8	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	2.16		0.78- 3.53	Calculated
PLATELET COUNT	159000	cells/cu.mm	150000-410000	Electrical impedance



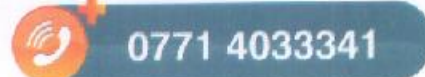
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DR. MAIKAJAL KIJUR
M.B.B.S, M.D(Pathology)

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Age/Gender : 34 Y 0 M 0 D /M	Received : 09/Mar/2024 01:23PM
UHID/MR No : DSUS.0000006706	Reported : 09/Mar/2024 06:17PM
Visit ID : DSUSOPV7818	Status : Final Report
Ref Doctor : APOLLO CLINIC	Client Name : PUP APOLLO CLINIC SAMRIDDI AR
IP/OP NO :	Patient location : Raipur,Raipur

DEPARTMENT OF IMMUNOLOGY

Test Name	Result	Unit	Bio. Ref. Range	Method
THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM				
TRI-iodothyronine (T3, TOTAL)	1.61	ng/mL	0.6-1.81	CLIA
THYROXINE (T4, TOTAL)	12.6	µg/dL	3.2-12.6	CLIA
THYROID STIMULATING HORMONE (TSH)	3.73	µIU/mL	0.35-5.5	CLIA

Comment:

For pregnant females	Bio Ref Range for TSH in uIU/ml (As per American Thyroid Association)
First trimester	0.1 - 2.5
Second trimester	0.2 - 3.0
Third trimester	0.3 - 3.0

- TSH is a glycoprotein hormone secreted by the anterior pituitary. TSH activates production of T3 (Triiodothyronine) and its prohormone T4 (Thyroxine). Increased blood level of T3 and T4 inhibit production of TSH.
- TSH is elevated in primary hypothyroidism and will be low in primary hyperthyroidism. Elevated or low TSH in the context of normal free thyroxine is often referred to as sub-clinical hypo- or hyperthyroidism respectively.
- Both T4 & T3 provides limited clinical information as both are highly bound to proteins in circulation and reflects mostly inactive hormone. Only a very small fraction of circulating hormone is free and biologically active.
- Significant variations in TSH can occur with circadian rhythm, hormonal status, stress, sleep deprivation, medication & circulating antibodies.

TSH	T3	T4	FT4	Conditions
High	Low	Low	Low	Primary Hypothyroidism, Post Thyroidectomy, Chronic Autoimmune Thyroiditis
High	N	N	N	Subclinical Hypothyroidism, Autoimmune Thyroiditis, Insufficient Hormone Replacement Therapy.
N/Low	Low	Low	Low	Secondary and Tertiary Hypothyroidism
Low	High	High	High	Primary Hyperthyroidism, Goitre, Thyroiditis, Drug effects, Early Pregnancy
Low	N	N	N	Subclinical Hyperthyroidism
Low	Low	Low	Low	Central Hypothyroidism, Treatment with Hyperthyroidism
Low	N	High	High	Thyroiditis, Interfering Antibodies
N/Low	High	N	N	T3 Thyrotoxicosis, Non thyroidal causes
High	High	High	High	Pituitary Adenoma; TSHoma/Thyrotropinoma

*** End Of Report ***



Patient Name : MR PRADIP KUMAR KIRTANIA
UHID/ MR No : 9616
Visit Date : 09/03/2024
Sample Collected On : 09/03/2024 03:05PM
Ref. Doctor : SELF
Sponsor Name :

Age/Gender : 34 Y Male
OP Visit No : OPD-UNIT-II-1
Reported On : 09/03/2024 03:59PM


HAEMATOLOGY

Investigation	Observed Value	Unit	Biological Reference Interval
Blood Group (ABO Typing)			
Blood Group (ABO Typing)	O		
RhD factor (Rh Typing)	POSITIVE		

End of Report
Results are to be correlated clinically

Lab Technician / Technologist
path

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DR DHANANJAY RAMCHANDRA PRASAD
M.D. PATHOLOGY

Patient Name : MR PRADIP KUMAR KIRTANIA
UHID/ MR No : 9616
Visit Date : 09/03/2024
Sample Collected On : 09/03/2024 03:05PM
Ref. Doctor : SELF
Sponsor Name :

Age/Gender : 34 Y Male
OP Visit No : OPD-UNIT-II-2
Reported On : 09/03/2024 03:59PM

BIO CHEMISTRY

Investigation	Observed Value	Unit	Biological Reference Interval
HbA1c (Glycosalated Haemoglobin)	5.5	%	Non-diabetic: ≤5.6, Pre-Diabetic 5.7-6.4, Diabetic: ≥6.5

1. HbA1c is used for monitoring diabetic control. It reflects the estimated average glucose (eAG).
2. HbA1c has been endorsed by clinical groups & ADA (American Diabetes Association) guidelines 2017, for diagnosis of diabetes using a cut-off point of 6.5%.

3. Trends in HbA1c are a better indicator of diabetic control than a solitary test.
4. Low glycosylated haemoglobin (below 4%) in a non-diabetic individual are often associated with systemic inflam

1. HbA1c is used for monitoring diabetic control. It reflects the estimated average glucose (eAG).
2. HbA1c has been endorsed by clinical groups & ADA (American Diabetes Association) guidelines 2017, for diagnosis of diabetes using a cut-off point of 6.5%.

3. Trends in HbA1c are a better indicator of diabetic control than a solitary test.
4. Low glycosylated haemoglobin (below 4%) in a non-diabetic individual are often associated with systemic inflammatory diseases, chronic anaemia (especially severe iron deficiency & haemolytic), chronic renal failure and liver diseases. Clinical correlation suggested.

5. To estimate the eAG from the HbA1C value, the following equation is used: $eAG(mg/dl) = 28.7 \times A1c - 46.7$

6. 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 dete

End of Report

Results are to be correlated clinically

Lab Technician / Technologist
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DR DHANANJAY RAMCHANDRA PRASAD
M.D. PATHOLOGY

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Patient Name : MR PRADIP KUMAR KIRTANIA
UHID/ MR No : 9616
Visit Date : 09/03/2024
Sample Collected On : 09/03/2024 03:05PM
Ref. Doctor : SELF
Sponsor Name :

Age/Gender : 34 Y. Male
OP Visit No : OPD-UNIT-II-2
Reported On : 09/03/2024 03:59PM

BIO CHEMISTRY

Investigation	Observed Value	Unit	Biological Reference Interval
GLUCOSE - (POST PRANDIAL)			
Glucose -Post prandial Method: REAGENT GRADE WATER	115.0	mg/dl	70-140
GLUCOSE (FASTING)			
Glucose- Fasting SUGAR REAGENT GRADE WATER	106.0	mg/dl	70 - 120
KFT - RENAL PROFILE - SERUM			
BUN-Blood Urea Nitrogen METHOD: Spectrophotometric	10	mg/dl	7 - 20
Creatinine METHOD: Spectrophotometric	0.98	mg/dl	0.6-1.4
Uric Acid Method: Spectrophotometric	3.65	mg/dL	2.6 - 7.2

End of Report
Results are to be correlated clinically

Lab Technician / Technologist
 path



Patient Name : MR PRADIP KUMAR KIRTANIA
UHID/ MR No : 9616
Visit Date : 09/03/2024
Sample Collected On : 09/03/2024 03:05PM
Ref. Doctor : SELF
Sponsor Name :

Age/Gender : 34 Y. Male
OP Visit No : OPD-UNIT-II-2
Reported On : 09/03/2024 03:59PM

BIO CHEMISTRY

Investigation	Observed Value	Unit	Biological Reference Interval
LIPID PROFILE TEST (PACKAGE)			
Cholesterol - Total	172.0	mg/dl	Desirable: < 200 Borderline High: 200-239 High: >= 240
Triglycerides level	159.0	mg/dl	Normal : < 150 Borderline High : 150-199 Very High : >=500
Method: Spectrophotometric HDL Cholesterol	42.0	mg/dl	Major risk factor for heart disease: < 40 Negative risk factor for heart disease :>60
Method: Spectrophotometric LDL Cholesterol	98.20	mg/dl	Optimal:< 100 Near Optimal :100 – 129 Borderline High : 130-159 High : 160-189 Very High : >=190
Method: Spectrophotometric VLDL Cholesterol	31.80	mg/dl	6 - 38
Total Cholesterol/HDL Ratio	4.10		3.5-5
Method: Spectrophotometric			

End of Report
Results are to be correlated clinically

Lab Technician / Technologist
path



Patient Name : MR PRADIP KUMAR KIRTANIA
UHID/ MR No : 9616
Visit Date : 09/03/2024
Sample Collected On : 09/03/2024 03:05PM
Ref. Doctor : SELF
Sponsor Name :

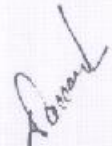
Age/Gender : 34 Y Male
OP Visit No : OPD-UNIT-II-2
Reported On : 09/03/2024 03:59PM

BIO CHEMISTRY

Investigation	Observed Value	Unit	Biological Reference Interval
LIVER FUNCTION TEST			
Bilirubin - Total Method: Spectrophotometric	1.2	mg/dl	0.1- 1.2
Bilirubin - Direct Method: Spectrophotometric	0.3	mg/dl	0.05-0.3
Bilirubin (Indirect) Method: Calculated	0.90	mg/dl	0 - 1
SGOT (AST) Method: Spectrophotometric	24	U/L	0 - 40
SGPT (ALT) Method: Spectrophotometric	30	U/L	0 - 41
ALKALINE PHOSPHATASE	79	U/L	25-147
Total Proteins Method: Spectrophotometric	6.7	g/dl	6 - 8
Albumin Method: Spectrophotometric	4.0	mg/dl	3.4 - 5.0
Globulin Method: Calculated	2.7	g/dl	1.8 - 3.6
A/G Ratio Method: Calculated	1.48	%	1.1 - 2.2

End of Report
Results are to be correlated clinically

Lab Technician / Technologist
path



Patient Name : MR PRADIP KUMAR KIRTANIA
UHID/ MR No : 9616
Visit Date : 09/03/2024
Sample Collected On : 09/03/2024 03:05PM
Ref. Doctor : SELF
Sponsor Name :

Age/Gender : 34 Y. Male
OP Visit No : OPD-UNIT-II-1
Reported On : 09/03/2024 03:59PM


CLINICAL PATHOLOGY

Investigation	Observed Value	Unit	Biological Reference Interval
URINE ROUTINE EXAMINATION			
Physical Examination			
Volum of urine	30ML		
Appearance	Clear		Clear
Colour	Pale Yellow		Colourless
Specific Gravity	1.000		1.001 - 1.030
Reaction (pH)	6.0		
Chemical Examination			
Protein(Albumin) Urine	Absent		Absent
Glucose(Sugar) Urine	Absent		Absent
Blood	Absent		Absent
Leukocytes	Absent		Absent
Ketone Urine	Absent		Absent
Bilirubin Urine	Absent		Absent
Urobilinogen	Absent		Absent
Nitrite (Urine)	Absent		Absent
Microscopic Examination			
RBC (Urine)	NIL	/hpf	0 - 2
Pus cells	2 - 4	/hpf	0 - 5
Epithelial Cell	1 - 2	/hpf	0 - 5
Crystals	Not Seen	/hpf	Not Seen
Bacteria	Not Seen	/hpf	Not Seen
Budding yeast	Not Seen	/hpf	

End of Report
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Page 1 of 2


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UR EMail:

MR PRADIP / 34 Yrs / M / 173 Cms / 77 Kg
09 / 03 / 2024

Time	Duration	Speed(Kmph)	Elevation	MEIs	Rate	%THR	BP	RPP	PVC	Comments
00:11	0:11	00.0	00.0	01.0	087	47 %	100/80	087	00	
00:15	0:04	00.0	00.0	01.0	087	47 %	100/80	087	00	
03:15	3:00	02.7	10.0	04.7	146	78 %	116/82	169	00	
06:15	3:00	04.0	12.0	07.1	153	82 %	120/82	183	00	
06:49	0:34	05.5	14.0	07.7	155	83 %	120/82	186	00	
07:19	0:30	00.8	00.0	04.2	150	81 %	120/82	180	00	
07:49	1:00	00.8	00.0	01.2	132	71 %	124/84	163	00	
08:49	2:00	00.0	00.0	01.0	121	65 %	124/84	150	00	
08:58	2:09	00.0	00.0	01.0	115	62 %	124/84	142	00	

DINGS :

- Exercise Time : 06:34
- Max HR Attained : 155 bpm 83% of Target 186
- Max BP Attained : 124/84 (mm/Hg)
- Max WorkLoad Attained : 7.7 Fair response to induced stress
- Test Objective : GHDFEWASEAFD ASSAS
- Test End Reasons : Test Complete, Heart Rate Achieved

PORT :

STRESS TEST IS NEGATIVE FOR REVERSIBLE MAYOCARDIAL ISCHEMIA WITH FAIR FUNCTION CAPACITY



Doctor : DR DEEPAN DAS MBBS DIP CARDIO



BRUCE: Standing(0:11)

135 / MR PRADIP / 34 Yrs / M / 173 Cms / 77 Kg / HR : 87

ExTime: 00:00 0.0 KmPh, 0.0%

METS: 1.0/ 87 bpm 47% of THR BP: 100/80 mmHg Combined Medians/ BLC On/ HF 0.05 Hz/LF 35 Hz

Date: 09 / 03 / 2024

4X 80 mS Post J



REMARKS:



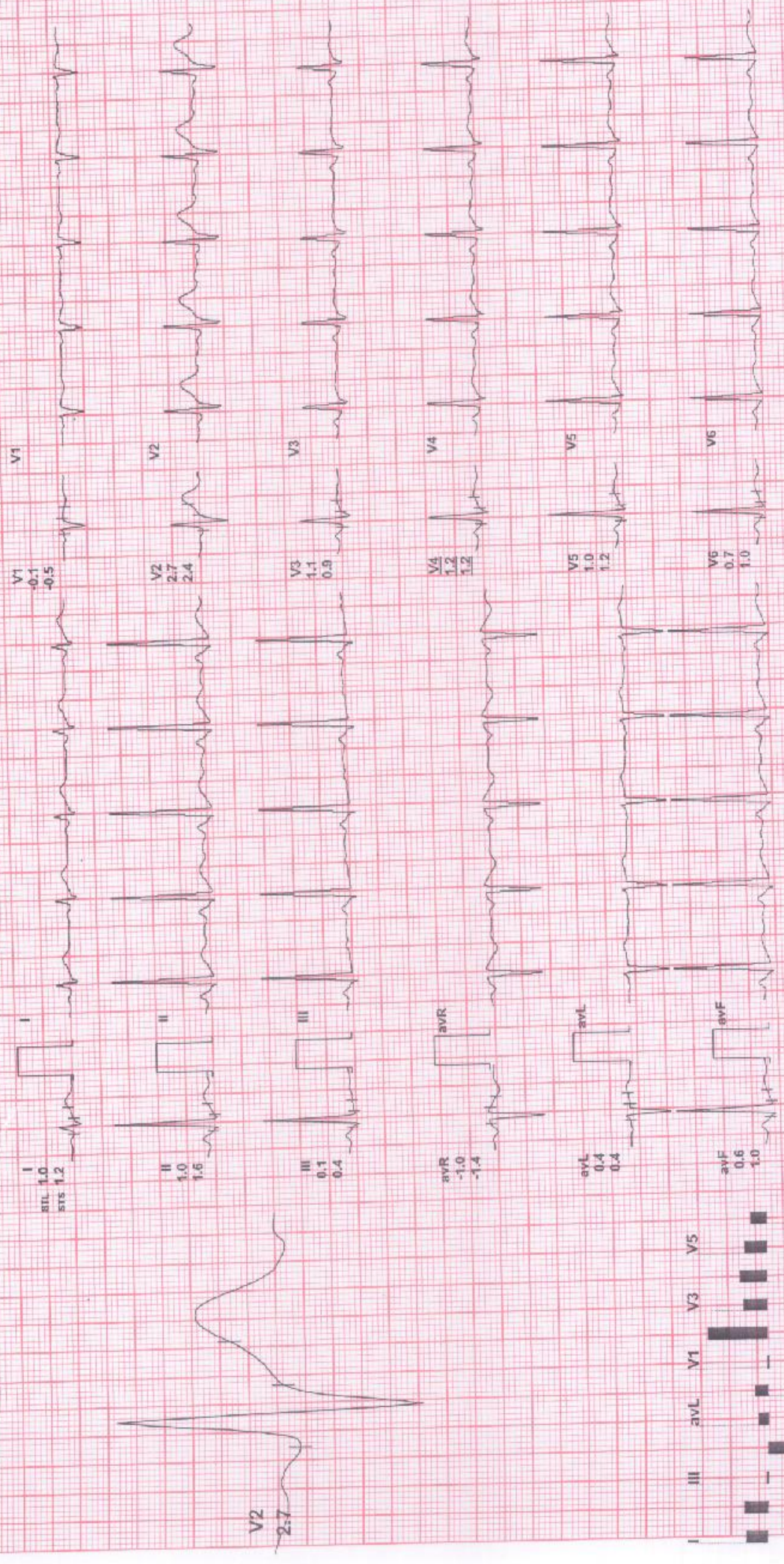
ExStart

135 / MR PRADIP / 34 Yrs / M / 173 Cms / 77 Kg / HR : 87

Date: 09 / 03 / 2024 METS: 1.0/ 87 bpm 47% of THR BP: 100/80 mmHg Combined Medians/ BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

ExTime: 00:00 0.0 Km/h, 0.0%
25 mm/Sec. 1.0 Cm/mV

4X 80 mS Post J



II avR avF V2 V4 V6
REMARKS:

BRUCE: Stage 1 (3:00)

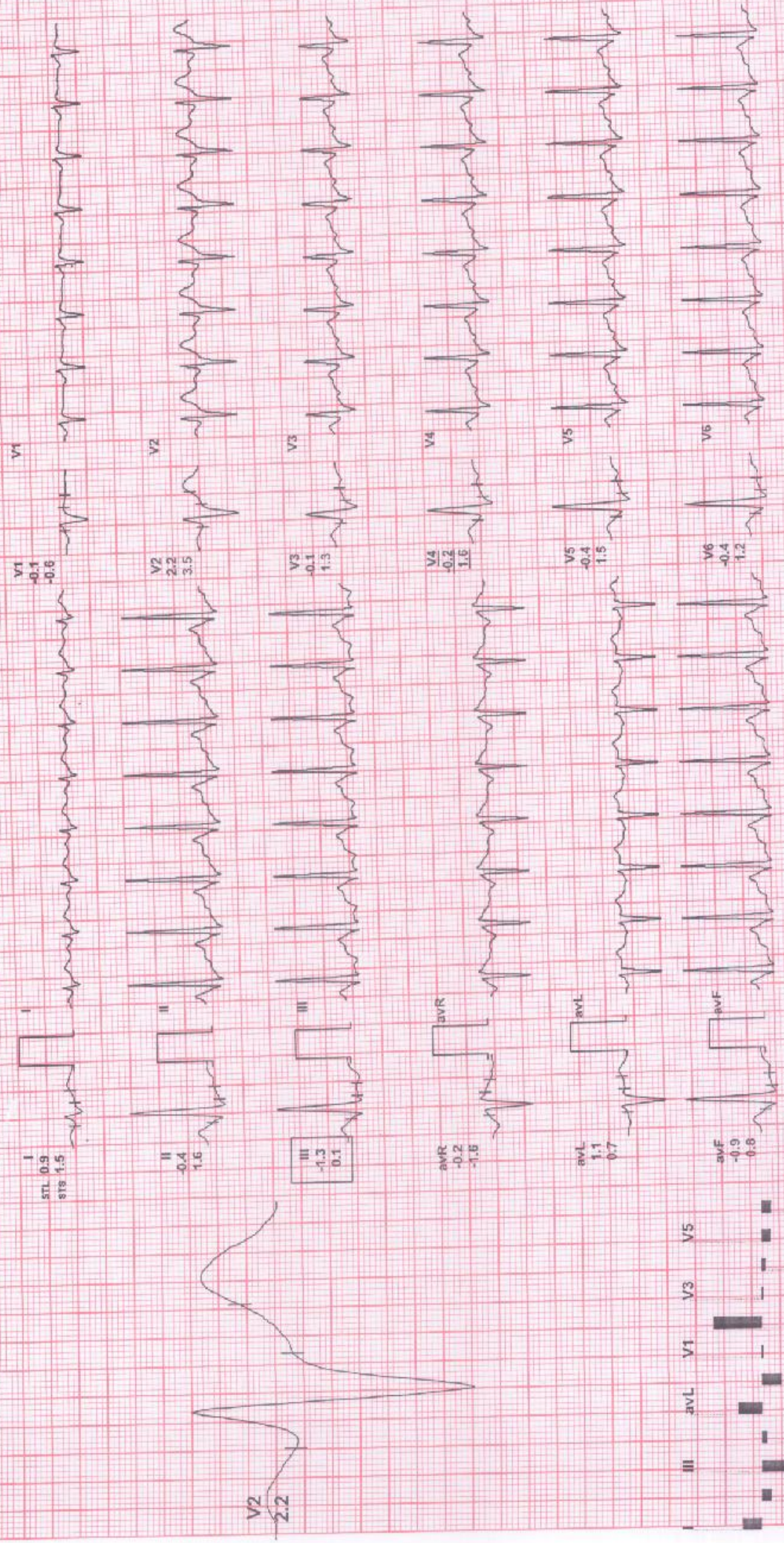


135 / MR PRADIP / 34 Yrs / M / 173 Cms / 77 Kg / HR : 146

ExTime: 03:00 2.7 Kmph, 10.0%
25 mm/Sec., 1.0 Cm/mV

Date: 09 / 03 / 2024 METS: 4.7 / 146 bpm 78% of THR BP: 116/62 mmHg Combined Medians/ BLC On/ HF 0.05 Hz/LF 35 Hz

4X 60 mS Post J



REMARKS:



BRUCE: Stage 2(3:00)

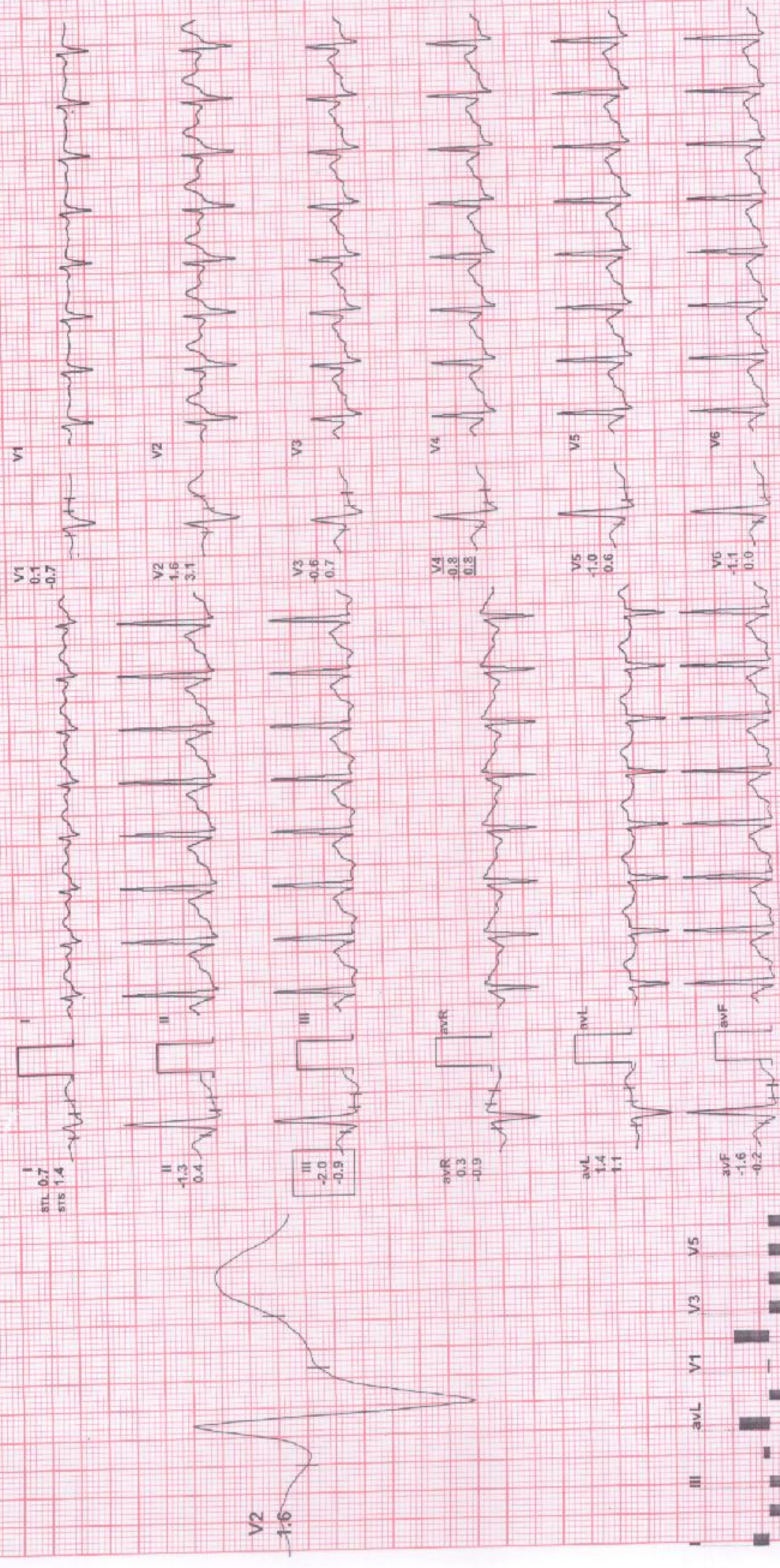
135 / MR PRADIP / 34 Yrs / M / 173 Cms / 77 Kg / HR : 153

ExTime: 06:00 4.0 Kmph, 12.0%

Date: 09 / 03 / 2024 METS: 7.1/ 153 bpm 82% of THR BP: 120/82 mmHg Combined Medians/ BLC Or/ Notch Or/ HF 0.05 Hz/LF 35 Hz

25 mm/Sec. 1.0 Cm/mV

4X 60 mS Post J



II aVR aVF V2 V4 V6

REMARKS:



PeakEx

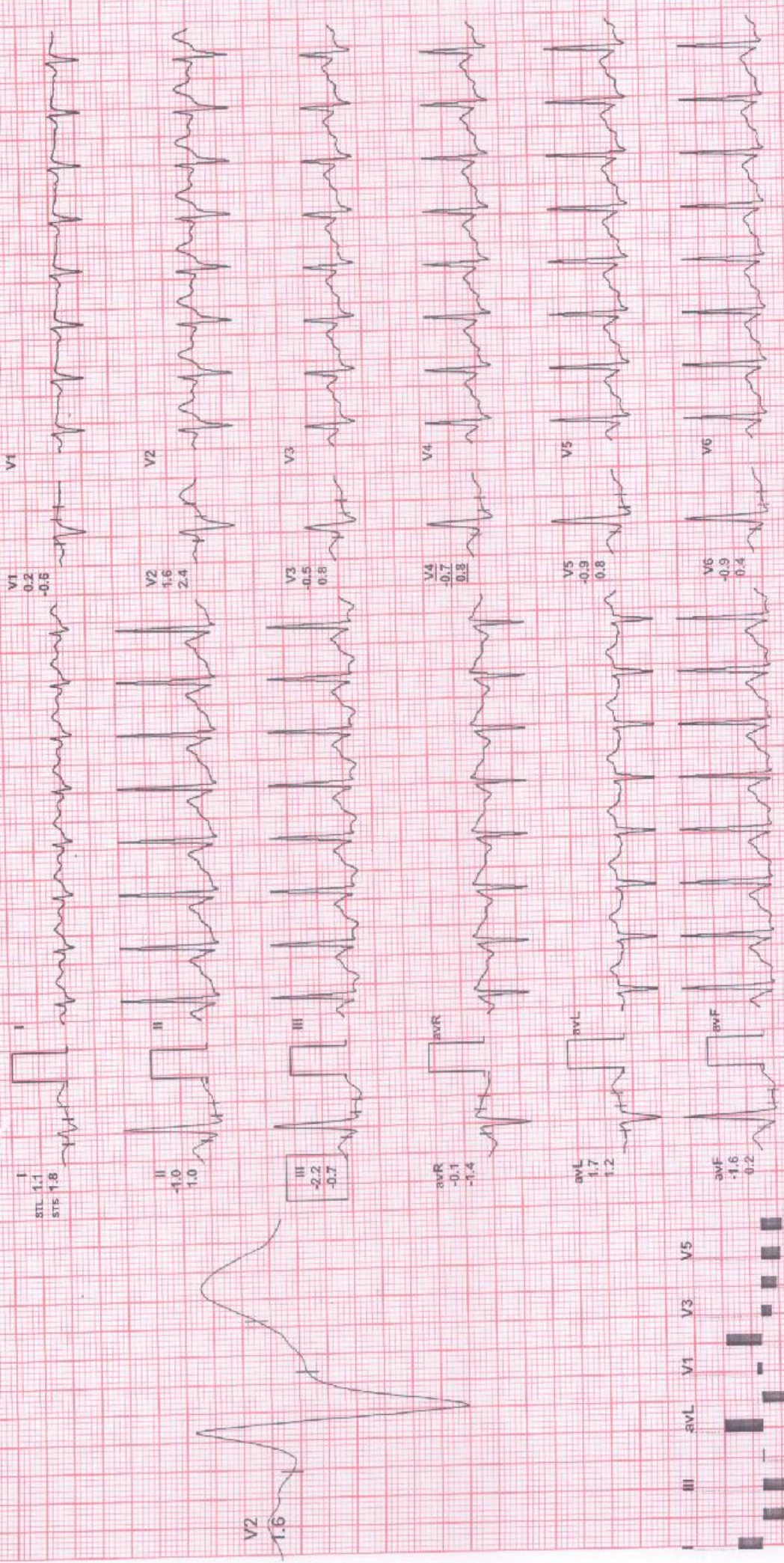
135 / MR PRADIP / 34 Yrs / M / 173 Cms / 77 Kg / HR : 155

ExTime: 06:34 5.5 Km/h, 14.0%

Date: 09 / 03 / 2024 METS: 7.71 155 bpm 83% of THIR BP: 120/82 mmHg Combined Medians/ BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

25 mm/Sec., 1.0 Cm/mV

4X 60 mS Post J



REMARKS:



Recovery(0:30)

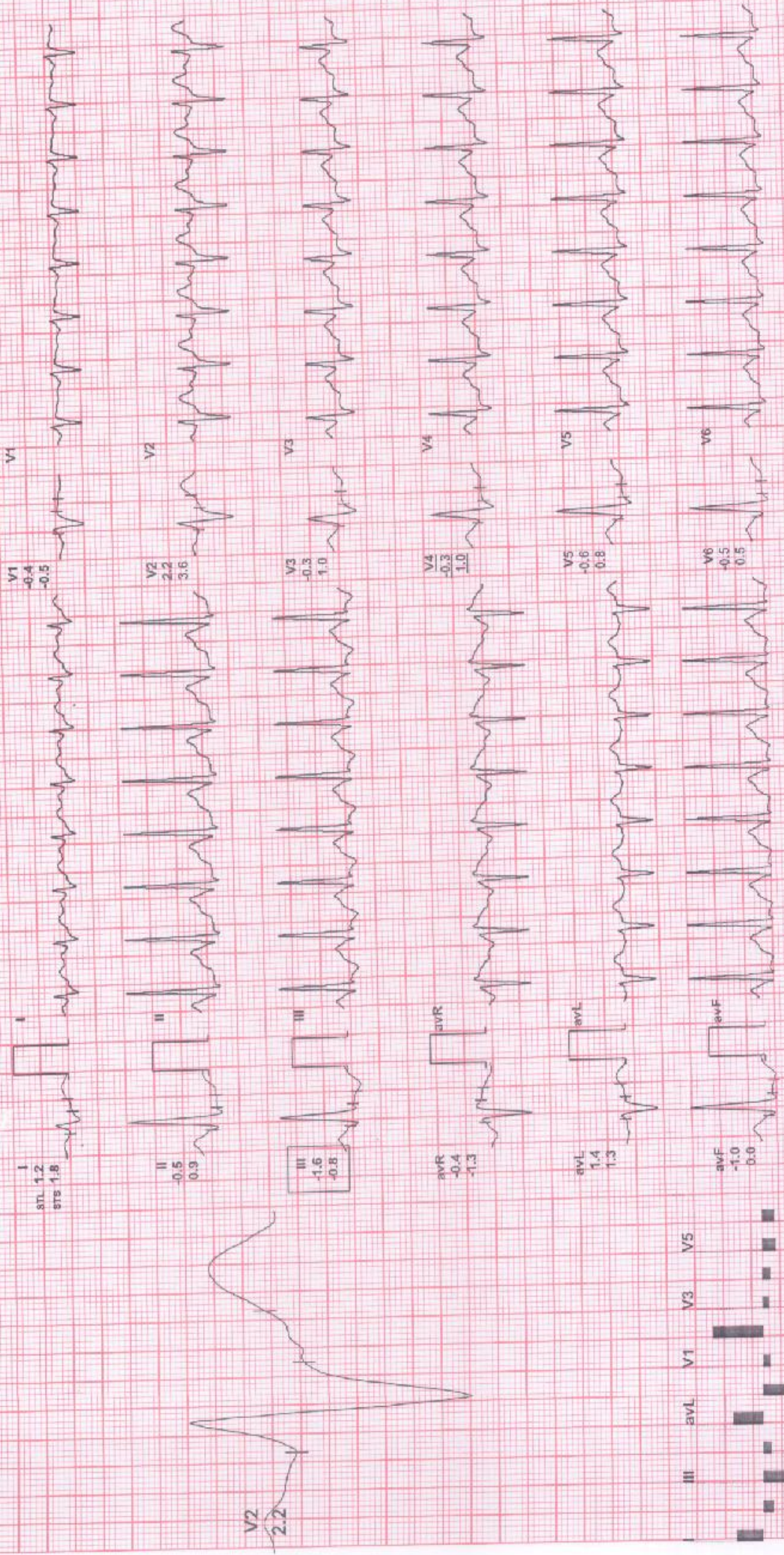
135 / MR PRADIP / 34 Yrs / M / 173 Cms / 77 Kg / HR : 150

ExTime: 06:34 0.8 KmPh, 0.0%

Date: 09 / 03 / 2024 METS: 4.2/ 150 bpm 81% of THR BP: 120/82 mmHg Combined Medians/ BLC On/ HF 0.05 Hz/LF 35 Hz

25 mm/Sec., 1.0 Cm/mV

4X 60 mS Post J



REMARKS: II aVR aVF V1 V2 V3 V4 V5 V6



Recovery(1:00)

135 / MR PRADIP / 34 Yrs / M / 173 Cms / 77 Kg / HR : 132

Date: 09 / 03 / 2024

METS: 1.2 / 132 bpm 71% of THR

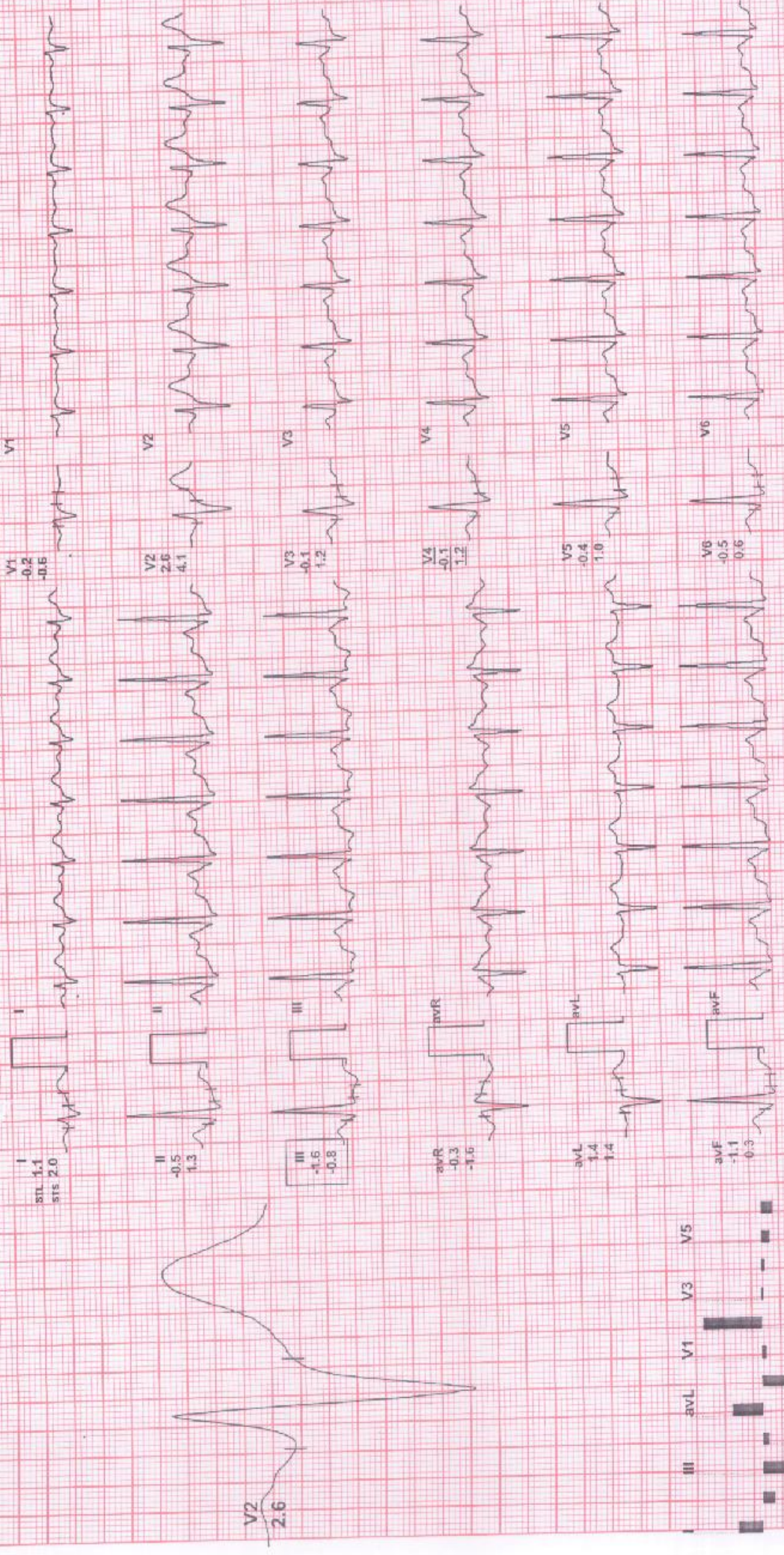
BP: 124/84 mmHg

Combined Medians/ BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

ExTime: 06:34 0.8 KmPh, 0.0%

25 mm/Sec. 1.0 Cm/mV

4X 60 mS Post J



REMARKS: II aVR aVF V2 V4 V6



Recovery(2:00)

135 / MR PRADIP / 34 Yrs / M / 173 Cms / 77 Kg / HR : 121

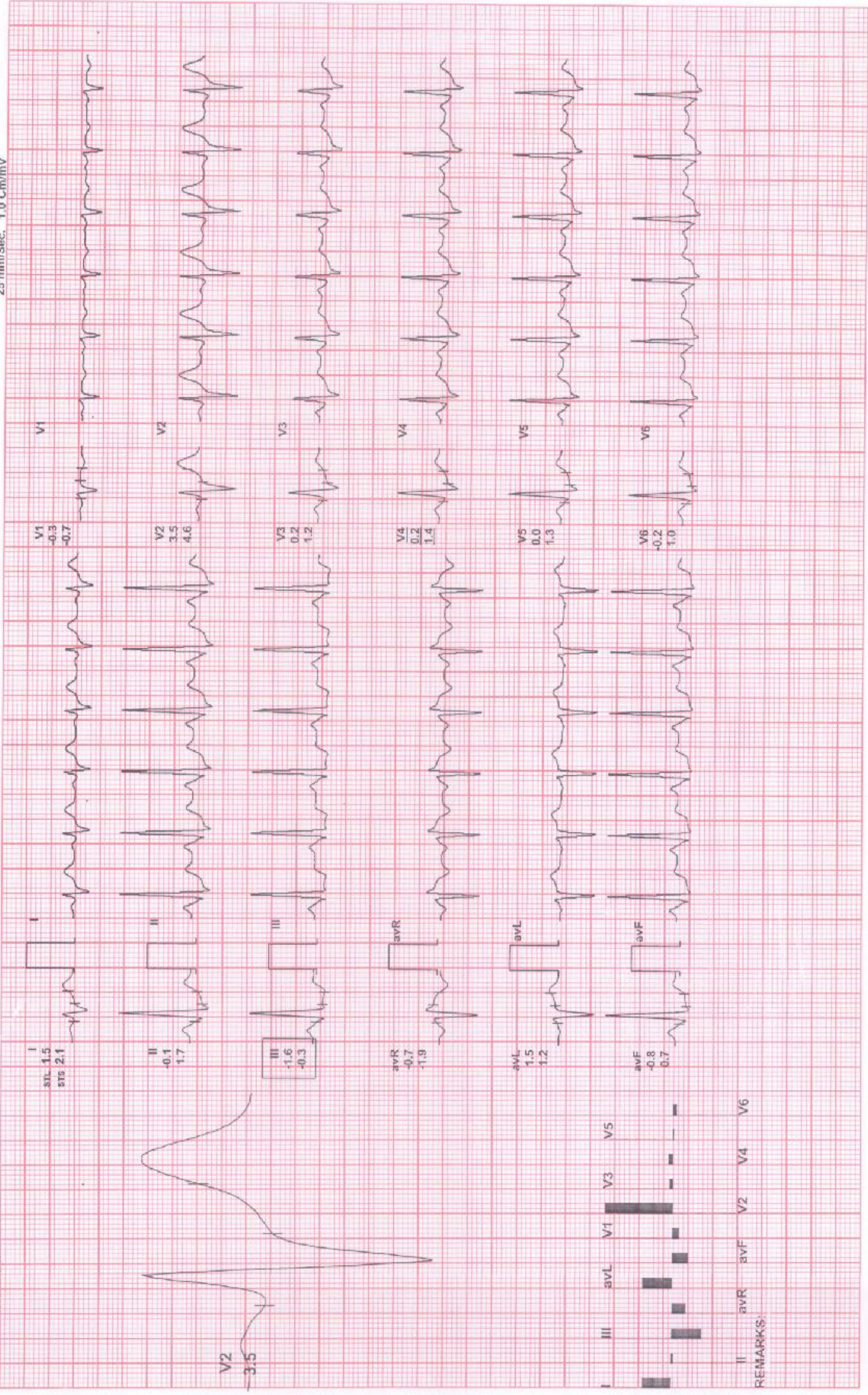
Date: 09 / 03 / 2024

METS: 1.0/ 121 bpm 65% of THR BP: 124/84 mmHg Combined Medians/ BLC On/ Match On/ HF 0.05 Hz/LF 35 Hz

ExTime: 06:34 0.0 Km/h, 0.0%

4X 80 mS Post J

25 mm/Sec. 1.0 Cm/mV



REMARKS:



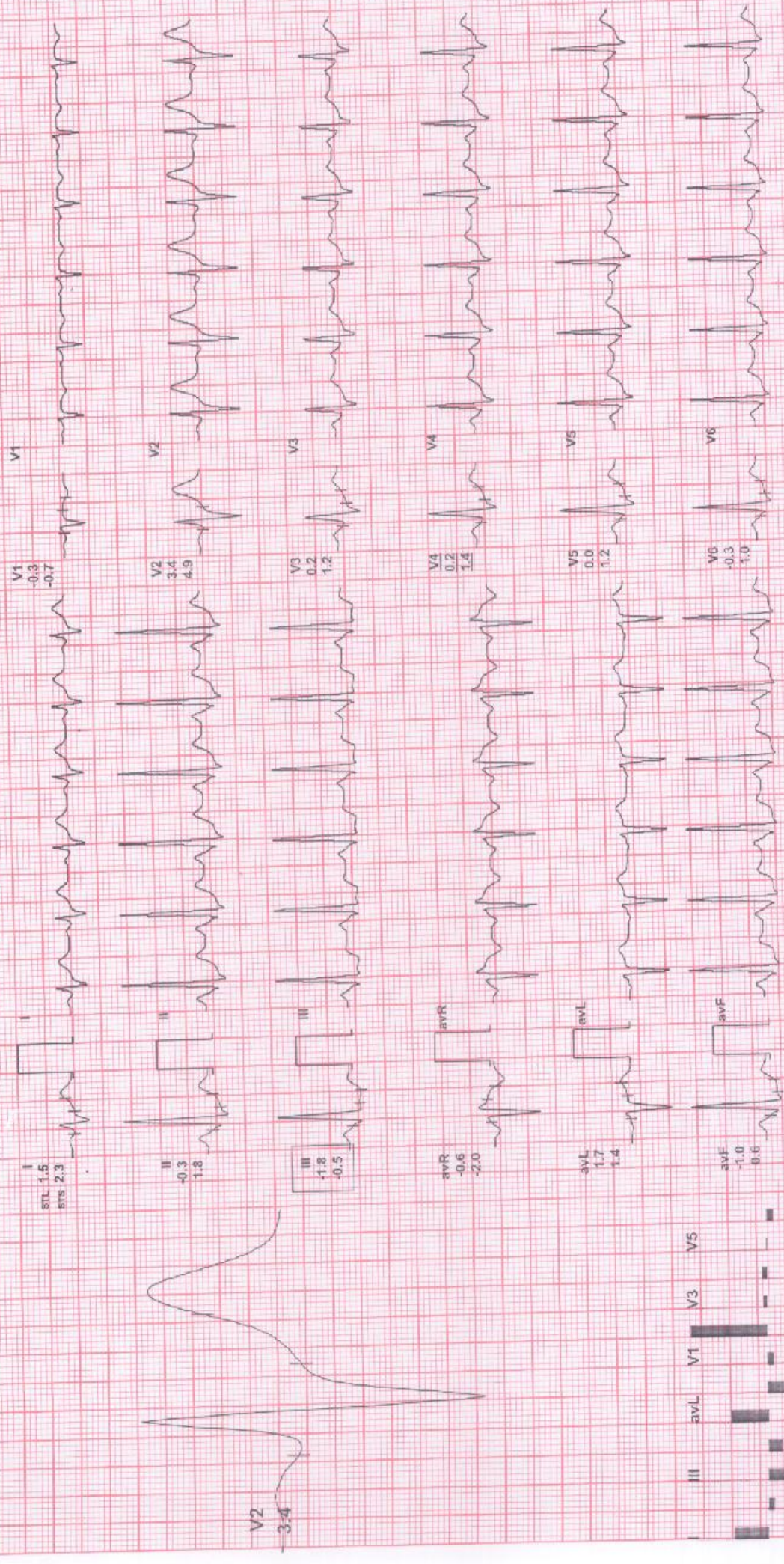
Recovery(2:09)

135 / MR PRADIP / 34 Yrs / M / 173 Cms / 77 Kg / HR : 115

Date: 09 / 03 / 2024 METS: 1.0/ 115 bpm 62% of THR BP: 124/84 mmHg Combined Medians/ BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

ExTime: 06:34 0.0 KmPh, 0.0%
25 mm/Sec., 1.0 Cm/mV

4X 70 mS Post J



REMARKS:

I, Pradip Kumar Kirtania, employee of Bank of Baroda (EE 100573), am not interested in consultation at the time of evening, due to time constraint.
Please handover the report or mail to my official mail id PRADIP.KIRTANIA@BANKOFBARODA.COM as early as possible.

Regards,
Pradip Kumar Kirtania
P.K.Kirtania
07-913124

