

0362
Praveen Kumar
M 30Y 056Kg
12:17 PM
11/02/2023

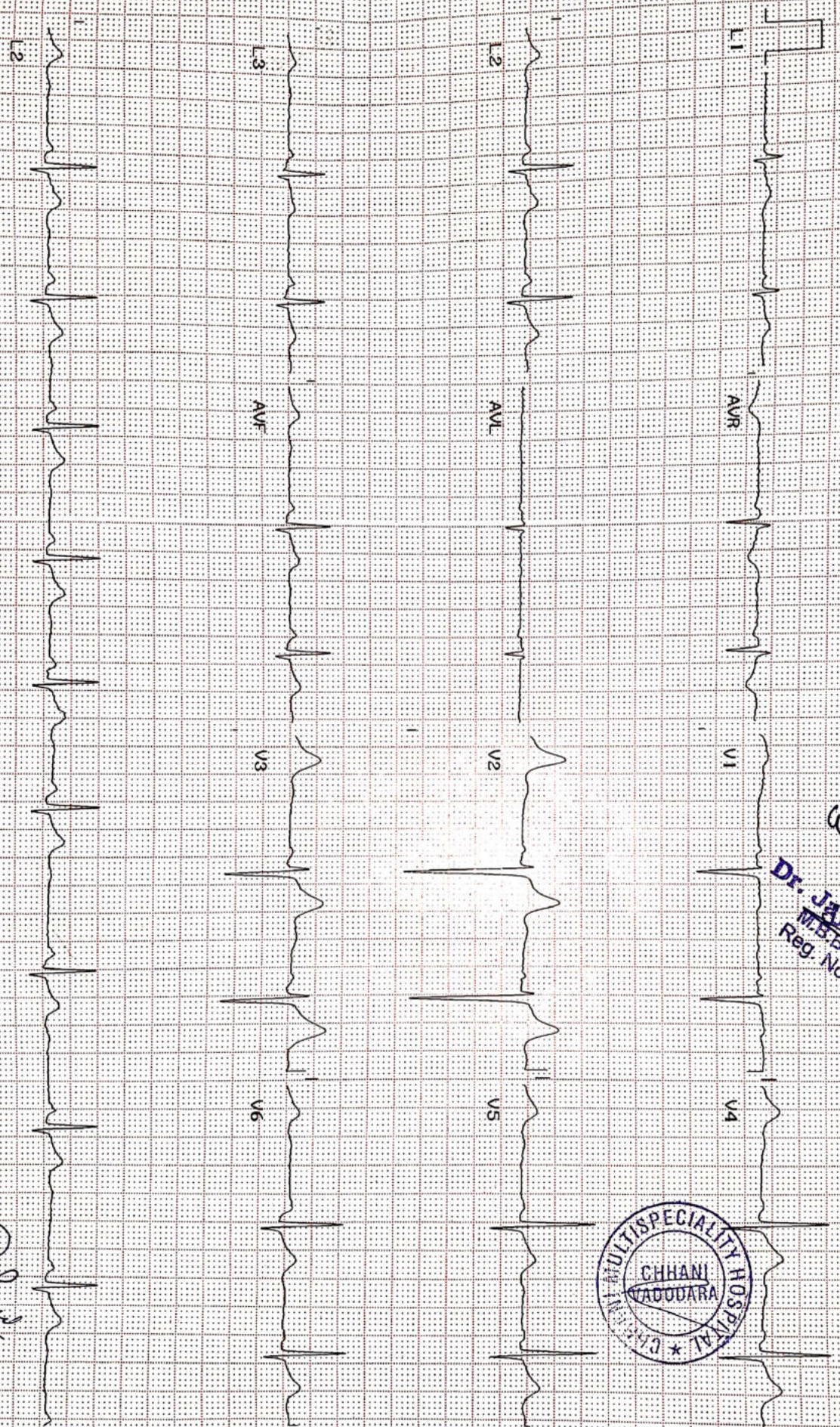
25 mm/s
10mm/mV
0.1 - 35Hz
50Hz ReJ-V
AUTO 12LS BLC-V

P = 92 ms
QRS = 95 ms
PR = 140 ms
QT = 342 ms
QTc = 342 ms

QT/QTc = 100%
QT/RR = 34%
QRS axis = 75°
P axis = 69°
T axis = 62%

WNL

Dr. Jagan Mohan Patel
M.B.B.S. M.D. Medicine
Reg. No.: G-25108



P. S. Murali



FITNESS CERTIFICATE

CANDIDATE

Name : Praveen Kumar.
 Date of Birth : 14/01/1993 Age 30 Blood Group: AB +ve
 Sex : Male Female | Marital Status: Married Unmarried
 Address : Shelod. Ashthvinayell SOC.,
Meerki vadi, Shelod.
 Any allergy / Disability / Pre-existing disease: _____
no any allergy Date: 11/02/23

CLINICAL FINDINGS

Height <u>163</u> Cms.	Weight <u>56</u> Kgs.	Near L.E. <u>6</u> R.E. <u>6</u> (-1.75) (-1.75) Vision: Distant L.E. <u>N</u> R.E. <u>N</u> Colour Vision <u>NAD</u>	Hearing Left Ear <u>N</u> Right Ear <u>N</u>
BP: <u>110/70 mmHg</u>	Pulse Rate: <u>69/min</u>	Resp. Rate: <u>18/min</u>	
CVS: <u>S, S2 (N)</u>	RS: <u>AREBE clear</u>	Abdomen: <u>SOFT</u>	
Any other Findings: _____			

CERTIFICATE

I Dr.: Jaydutt Patel
 hereby certify that I have examined Mr./Ms.: Praveen Kumar.
 on 11/2/23 and find him (N) UNFIT for employment.
 Remarks if unfit: _____

Dr. Jaydutt A Patel
 M.D., M.B.B.S., M.D. Medicine
 Reg. No.: G-25108
 Signature & Seal

[Signature]
 Signature of Candidate

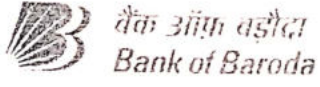


DECLARATION

I declare that the above information is true and correct to the best of my knowledge and I am not suffering from any disease / illness, the presence of which I have not revealed. I fully understand that any misrepresentation of this declaration could lead to the termination of my offer / appointment. In case of any discrepancy arising out of my declaration, I will undergo the medical check-up by the company's suggested doctor and their findings will be fully binding on me and action thereon towards my employment will be accepted by me.

Signature of Candidate: [Signature]

Date: 11/02/23



बैंक ऑफ बड़ोदा
Bank of Baroda

नाम
Name **प्रवीण कुमार**
PRAVEEN KUMAR
ए.सी. नंबर
E.C. No **111375**



अधिकारी का हस्ताक्षर
Issuing Authority


होल्डर का हस्ताक्षर
Signature of Holder

भारत सरकार
GOVERNMENT OF INDIA

प्रवीण कुमार
Praveen Kumar
जन्म तिथि/ DOB: 14/01/1993
पुरुष / MALE

8112 1594 1253

आधार - आम आदमी का अधिकार






Sunny K. Machhi
+91 87585 30074
+91 83205 61551
sunnydigitalxray@yahoo.com

NAME	PRAVEEN KUMAR	AGE/SEX	30/MALE
REF. BY	CHHANI HOSPITAL	DATE	11/02/2023

X-RAY OF CHEST PA VIEW:

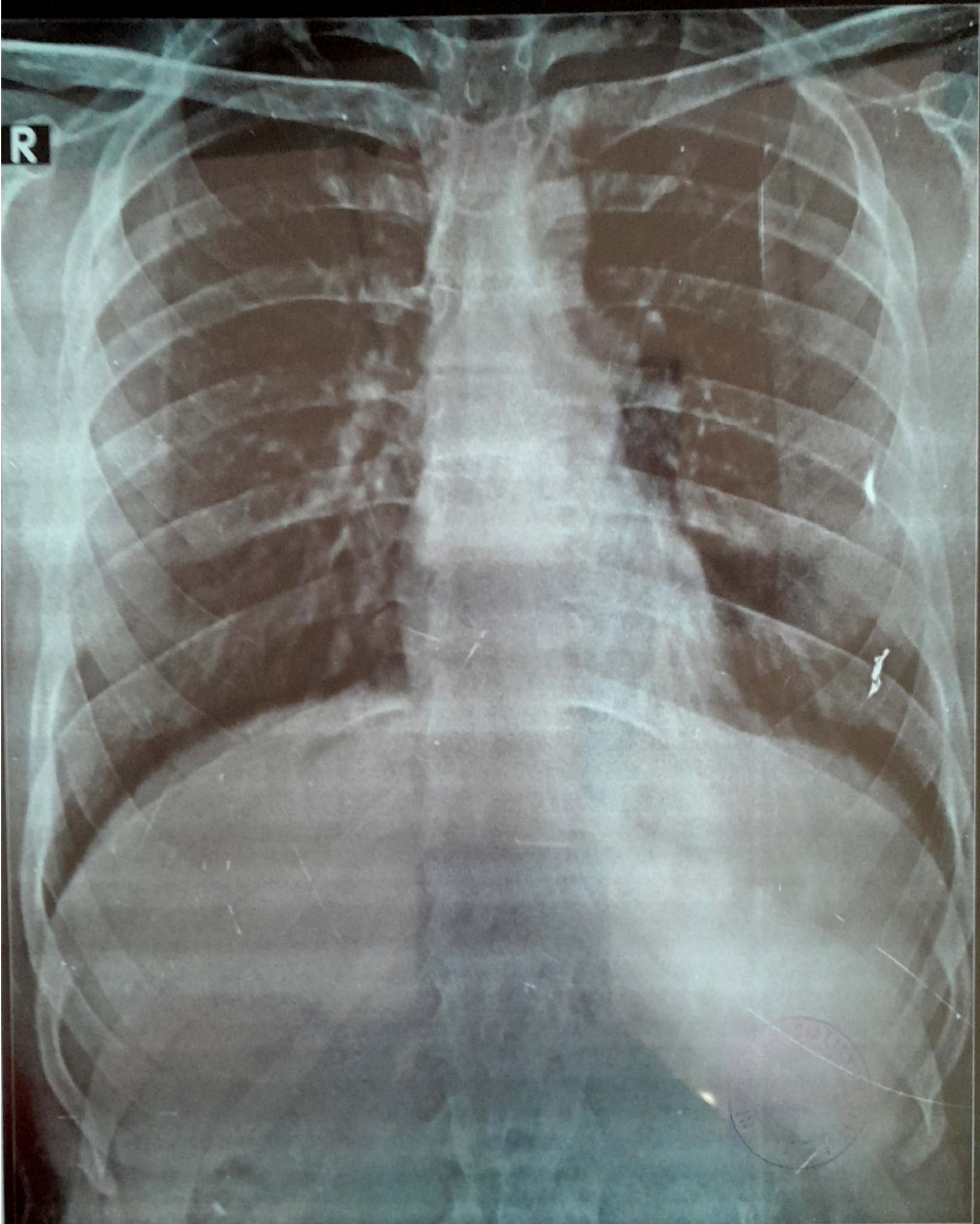
FINDING

BOTH LUNG FIELDS APPEAR CLEAR.
NO CONSOLIDATION OR MASS LESION IS SEEN.
BOTH CP ANGLES ARE CLEAR.
CARDIAC SIZE APPEARS WITHIN NORMAL LIMITS.
TRACHEA IS CENTRAL IN POSITION.
MEDIASTINAL SHADOW IS NORMAL.
BOTH DOMES OF DIAPHRAGM ARE NORMAL.
BONY THORAX UNDER VISION APPEARS NORMAL.

IMPRESSIONS : NO SIGNIFICANT ABNORMALITY DETECTED

DR. HIMANI VIRAPARA
Regn. No: G.28771
M.D. [Radiodiagnosis]
(CONSULTANT RADIOLOGIST)





PRAVINKUMAR MALI 30Y 11022306 M CHEST PA 11-Feb-23 11:42 AM
Sunny Digital Portable X-Ray Services 8758530074



NAME: PRAVEEN KUMAR MALI AGE:30/M

DATE: 11/02/2023

USG FOR ABDOMEN

LIVER:

The echogenicity of the liver is normal.
There is no focal liver lesion.
There are no dilated intrahepatic biliary radicles.

GALL BLADDER:

Appears to be distended and shows no calculus or polyp in the lumen.
Wall thickness is normal.

SPLEEN:

The echogenicity of the spleen is normal.
There is no focal splenic lesion.

PANCREAS:

The echogenicity appears to be normal.
There is no free fluid in the abdomen.
There are no enlarged retroperitoneal lymphnodes.

KIDNEY:

The kidneys are normal in position, size, shape and outline.
The parenchyma is normal. Right kidney measure 85*40 cm.
Left kidney measure 89*49 cm.

BLADDER:

Bladder is well distended and shows normal wall thickness. No evidence of intraluminal mass or calculi.

PROSTATE:

Prostate gland is normal in size. It has smooth outline reflectivity.

There is no evidence of ascites.

No evidence of any gross bowel mass seen.

No evidence of any aorto-caval or mesenteric root lymphadenopathy.

Appendix cannot be imaged.No mass or collection in right iliac fossa.



DR. KUNAL VADWALA
MBBS, DNB
Consultant Radiologist
Reg. No. G-20511



ECHOCARDIOGRAPHY REPORT

PATIENT NAME : MR PRAVEEN KUMAR MALI

AGE /SEX : 30/M

DATE : 11 /02/2023

CONCLUSION:

- NORMAL LV SYSTOLIC FUNCTION LVEF 60 %
- NORMAL CARDIAC CHAMBERS
- NO RWMA
- NO MR/MS
- NO TR, NO PAH (RVSP – 17MMHG)
- NO AR/AS
- NORMAL DIASTOLIC FUNCTION
- NO CLOT OR VEGETATION
- NO PERICARDIAL EFFUSION

M:MODE

AO: 28mm	LA: 30mm	IVS:10mm
LVdd:47mm	LVds:25mm	PW:10mm

DOPPLER STUDY

MITRAL VAVLE	E : 1.26	A :0.92
AORTI VALVE	1.02	



Dr. KARSHIT JOSHI
MBBS, MD, FRCM, FID
Reg. No. 1003
Consultant Cardiologist &
General Physician



Pt. Name : PRAVEEN KUMAR

Registered On : 11 Feb, 2023 04:25 PM

Age/Gender : 30 Years Male

Collected On : 11 Feb, 2023 04:27 PM

Patient ID : 21

Reported On : 12 Feb, 2023 11:49 AM

Ref. By : Dr. CHHANI MULTISPECIALITY
HOSPITAL (BOB)

MO : 0000000000



Address :
CBC with ESR

Investigation	Observed Value	Biological Reference Interval	Unit
HEMOGLOBIN			
Hemoglobin (Hb)	14.3	13 - 17	g/dL
Hemoglobin %	84.12	0 - 100 Based on 17=100%	%
RBC COUNT			
Total RBC Count	4.91	4.5 - 5.5	mill/cumm
BLOOD INDICES			
Packed Cell Volume (PCV)	43.0	40.7 - 50.3	%
Mean Corpuscular Volume(MCV)	87.58	78.2 - 97.90	fL
Mean Corpuscular Hemoglobin (MCH)	29.12	27 - 33	pg/cell
Mean Corpuscular Hemoglobin Concentration (MCHC)	33.26	33 - 36	g/dL
Red cell Distribution Width (RDW)	14.4	High 11.5 - 14	%
WBC COUNT			
Total WBC Count	4600	4000 - 11000	cumm
DIFFERENTIAL WBC COUNT			
Neutrophils	63	40 - 70	%
Lymphocytes	32	20 - 40	%
Eosinophils	02	1 - 6	%
Monocytes	03	1 - 4	%
Basophils	00	Low 0 - 1	%
PLATELET COUNT			
Platelet Count	175000	150000 - 450000	/cumm
ESR			



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Note : All the above tests are subject to technical limitations. Co-relate clinically. Lab may be contacted whenever necessary.





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Address :

Investigation	Observed Value	Biological Reference Interval	Unit
Erythrocyte Sedimentation Rate (ESR)	06	0 - 22	mm/hr

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Address :

Blood Group, ABO & RH Typing

Investigation	Observed Value	Biological Reference Interval	Unit
BLOOD GROUP, ABO & RH TYPING			
ABO Group	AB		
RH Factor	POSITIVE		

The test to determine your blood group is called ABO typing. Your blood sample is mixed with antibodies against type A and B blood. Then, the sample is checked to see whether or not the blood cells stick together. If blood cells stick together, it means the blood reacted with one of the antibodies.

Rhesus (Rh) factor is an inherited protein found on the surface of red blood cells. If your blood has the protein, you're Rh positive. If your blood lacks the protein, you're Rh negative.

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Address :

Investigation	Observed Value		Biological Reference Interval	Unit
Glycosylated Hemoglobin(GHb/HbA1c)	5.1	Low	5.7 - 6.4 <5.7 Non Diabetic 5.7-6.4 Borderline >6.4 Diabetic	%
Mean Blood Glucose	99.67		90 - 210 90-120 Excellent Control 121-150 Good Control 151-180 Average Control 181-210 Action Suggested >210 Panic Value	mg/dL

Comment

1. HbA1c is an indicator of glycemic control. HbA1c represents average Glycemia over the past six to eight weeks. Glycation of Hemoglobin occurs over the entire 120 day life span of the Red Blood Cell, but within this 120 days. Clinical studies suggest that a patient in stable control will have 50% of their HbA1c formed in the month before sampling, 25% in the month before that, and the remaining 25% in months two to four.

2. Mean Plasma Glucose mg/dL = $28.7 \times A1C - 46.7$. Correlation between HbA1c and Mean Plasma Glucose (MPG) is not "perfect" but rather only this means that to predict or estimate average glucose from HbA1c or vice-versa is not "perfect" but gives a good working ballpark estimate.

3. Afternoon and evening results correlate more closely to HbA1c than morning results, perhaps because morning fasting glucose levels vary much more than daytime Glucose levels, which are easier to predict and control. As per IFCC recommendations 2007, HbA1c being reported as above maintaining traceability to both IFCC (mmol/mol) & NGSP (%) units.

*****End Of Report*****



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MO : 0000000000



Address :

Urine Examination Routine

Investigation	Observed Value	Biological Reference Interval	Unit
PHYSICAL EXAMINATION			
Colour	Pale Yellow	Pale yellow	
Specific Gravity	1.000 Low	1.005 - 1.030	
PH	7.5	4.6 - 8.0	
CHEMICAL EXAMINATION			
Proteins	NIL	Nil	
Glucose	Nil	Nil	
Ketones	Nil	Nil	
Bilirubin	Nil	Nil	
Urobilinogen	Normal	Normal	
Leucocyte Esterase	NEGATIVE	Negative	
Nitrite	NEGATIVE	Negative	
MICROSCOPIC EXAMINATION			
R.B.C.	Absent	0 - 5 Negative	
Pus Cells	1-2 High	0 - 5	WBC / hpf
Epithelial Cells	1-2 High	0 - 2	/hpf
Casts	0 Low	0 - 0	/lpf
Crystals	Nil	Nil	

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Pt. Name : PRAVEEN KUMAR

Age/Gender : 30 Years Male

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Ref. By : Dr. CHHANI MULTISPECIALITY
HOSPITAL (BOB)

Address :

Liver Function Test (LFT)

Registered On : 11 Feb, 2023 04:25 PM

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MO : 0000000000



Investigation	Observed Value		Biological Reference Interval	Unit
BILLIRUBIN				
Total Bilirubin	1.25	High	0 - 1.2	mg/dL
Direct Bilirubin	0.53	High	0.0 - 0.25	mg/dL
Indirect Bilirubin	0.72		0.2 - 1	mg/dL
LIVER ENZYMES				
SGPT (ALT)	52	High	0 - 40	IU/L
SGOT (AST)	60	High	0 - 37	U/L
Alkaline Phosphatase	84		60 - 320	U/L
SERUM PROTEINS				
Total Serum Protein	6.81		6.3 - 7.9	g/dL
Serum Albumin	4.58		3.5 - 5.5	g/dL
Serum Globulin	2.23	Low	2.5 - 3.5	g/dL
A/G Ratio	2.05		1.1 - 2.1	

Clinical Information:

Liver function tests, also known as liver chemistries, help determine the health of your liver by measuring the levels of proteins, liver enzymes, and bilirubin in your blood. Having abnormal results on any of these liver tests typically requires follow up to determine the cause of the abnormalities. Even mildly elevated results can be associated with liver disease. However, these enzymes can also be found in other places besides the liver.

Talk to your doctor about the results of your liver function test and what they may mean for you.

*****End Of Report*****



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Pt. Name : PRAVEEN KUMAR

Age/Gender : 30 Years Male

Patient ID : 21

Ref. By : Dr. CHHANI MULTISPECIALITY
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Address :
Lipid Profile

Registered On : 11 Feb, 2023 04:25 PM

Collected On : 11 Feb, 2023 04:27 PM

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MO : 0000000000

Investigation	Observed Value	Biological Reference Interval	Unit
CHOLESTEROL			
Total Cholesterol	193	150 - 199	mg/dL
Serum Triglycerides	100	0 - 150	mg/dL
HDL Cholesterol	39 Low	40 - more	mg/dL
LDL Cholesterol	134.00 High	0 - 100	mg/dL
VLDL Cholesterol	20.00	0 - 30	mg/dL
Non-HDL cholesterol	154.00 High	- >130 Optimal	mg/dL
RATIO			
LDL HDL Cholesterol Ratio	3.44	1.5 - 3.5	
Total-HDL Cholesterol Ratio	4.95	3.5 - 5	
Triglycerides HDL Ratio	2.56		

Total Cholesterol (mg/dL)	HDL Cholesterol (mg/dL)	LDL Cholesterol (mg/dL)	Triglycerides (mg/dL)
Desirable <200	Low <40	Optimal <100 Near Optimal 100-129 Borderline High 130-159 High 160-189 Very High > 190	Normal <150 Borderline High 150-199 High 200-499 Very High >500
Borderline High 200-239 High >240	High <60		

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Address :
FBS PP2BS

Investigation	Observed Value	Biological Reference Interval	Unit
FBS PP2BS			
Fbs	107	70 - 110	mg/dL
PP2BS	101	80 - 140	mg/dL

*****End Of Report*****



TruPath



DR. ASHISH JAWARKAR
M.D. (Pathology)

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 Address : 

Investigation	Observed Value	Biological Reference Interval	Unit
Serum Urea	22	19 - 45	mg/dL
Serum Creatinine	1.14	0.6 - 1.30	mg/dL
Serum Uric Acid	4.07	3.5 - 7.2	mg/dL
Serum Triiodothyronine (T3)	1.56	0.69 - 2.15	ng/mL
Serum thyroxine (T4)	84	52 - 127	ng/mL
Thyroid Stimulating Hormone (TSH)	2.90	0.5 - 5	µIU/mL

Note:

Thyroid stimulating hormone (TSH) is synthesized and secreted by the anterior pituitary in response to a negative feedback mechanism involving concentrations of FT3 (free T3) and FT4 (free T4). Additionally, the hypothalamic tripeptide, thyrotropin-releasing hormone (TRH), directly stimulates TSH production. TSH stimulates thyroid cell production and hypertrophy, also stimulate the thyroid gland to synthesize and secrete T3 and T4. Quantification of TSH is significant to differentiate primary (thyroid) from secondary (pituitary) and tertiary (hypothalamus) hypothyroidism. In primary hypothyroidism, TSH levels are significantly elevated, while in secondary and tertiary hypothyroidism, TSH levels are low. Biological reference interval for TSH varies with age (eg 87 yrs old male may have normal TSH value upto 8.9 mIU/ml)(TIETZ clinical guide to laboratory tests). According to WALLACH interpretation of diagnostic tests ; reference range for TSH for adults is 0.5 - 6.3 mIU/ml. Because of considerable preanalytical (physiological , seasonal etc.) variation ; TSH result between 4.5 to 15 mIU/ml (marginally raised TSH.) requires strong clinical correlation and repeat testing with submitting another fresh sample before taking any clinical decision . Repeat marginally raised TSH must be correlated with T3 , T4 & anti thyroid antibody level before making clinical decision & starting treatment.

TSH Reference Range in Pregnancy :

- Pregnancy 1st Trimester 0.1 - 2.5 uIU/ml
- Pregnancy 2nd Trimester 0.2 - 3.0 uIU/ml
- Pregnancy 3rd Trimester 0.3 - 3.0 uIU/ml

Gamma Glutamyl Transferase (GGT) 36 8 - 61 U/L

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