

CERTIFICATE OF MEDICAL FITNESS

NAME: VINOD kumar

AGE/ GENDER: 36/M

HEIGHT: 168cm

WEIGHT: 77.8kg

IDENTIFICATION MARK: -

BLOOD PRESSURE: 140/90 mmHg

PULSE: 92 b/m

CVS: Normal

RS:P

ANY OTHER DISEASE DIAGNOSED IN THE PAST: nil

ALLERGIES, IF ANY: nil

LIST OF PRESCRIBED MEDICINES: nil

ANY OTHER REMARKS: no

I Certify that I have carefully examined Mr/Mrs. Vinod kumar son/daughter of Mr Vishu Kantaiiah who has signed in my presence. He/ she has no physical disease and is fit for employment.

Vinod Kumar

Signature of candidate

Dr. BINDURAJ. R

MBBS MD

Internal Medicine

Signature of Medical Officer

Place: Spectrum Diagnostic & health care

Date: 18/04/24

Disclaimer: The patient has not been checked for COVID. This certificate does not relate to the covid status of the patient examined

SCAN FOR LOCATION



Dr. Ashok S
Bsc., MBBS., D.O.M.S
Consultant Ophthalmologist
KMC No: 31827

DATE: 18.04.24.

EYE EXAMINATION

NAME: Mr. Vinod Kumar V. AGE: 36y GENDER: F / M

	RIGHT EYE	LEFT EYE
Vision	<u>6/6:nb</u>	<u>6/6:nb</u>
Vision With glass	-----	-----
Color Vision	<u>Normal</u>	<u>Normal</u>
Anterior segment examination	<u>Normal</u>	<u>Normal</u>
Fundus Examination	<u>Normal</u>	<u>Normal</u>
Any other abnormality	<u>Nil</u>	<u>Nil</u>
Diagnosis/ impression	<u>Normal</u>	<u>Normal</u>

Dr. ASHOK SARODHE
B.Sc., M.B.B.S., D.O.M.S.
Eye Consultant & Surgeon
Consultant (Ophthalmologist)

SCAN FOR LOCATION



ID: 240022
VINOD KUMAR
Male 36Years

18-04-2024 11:06:50

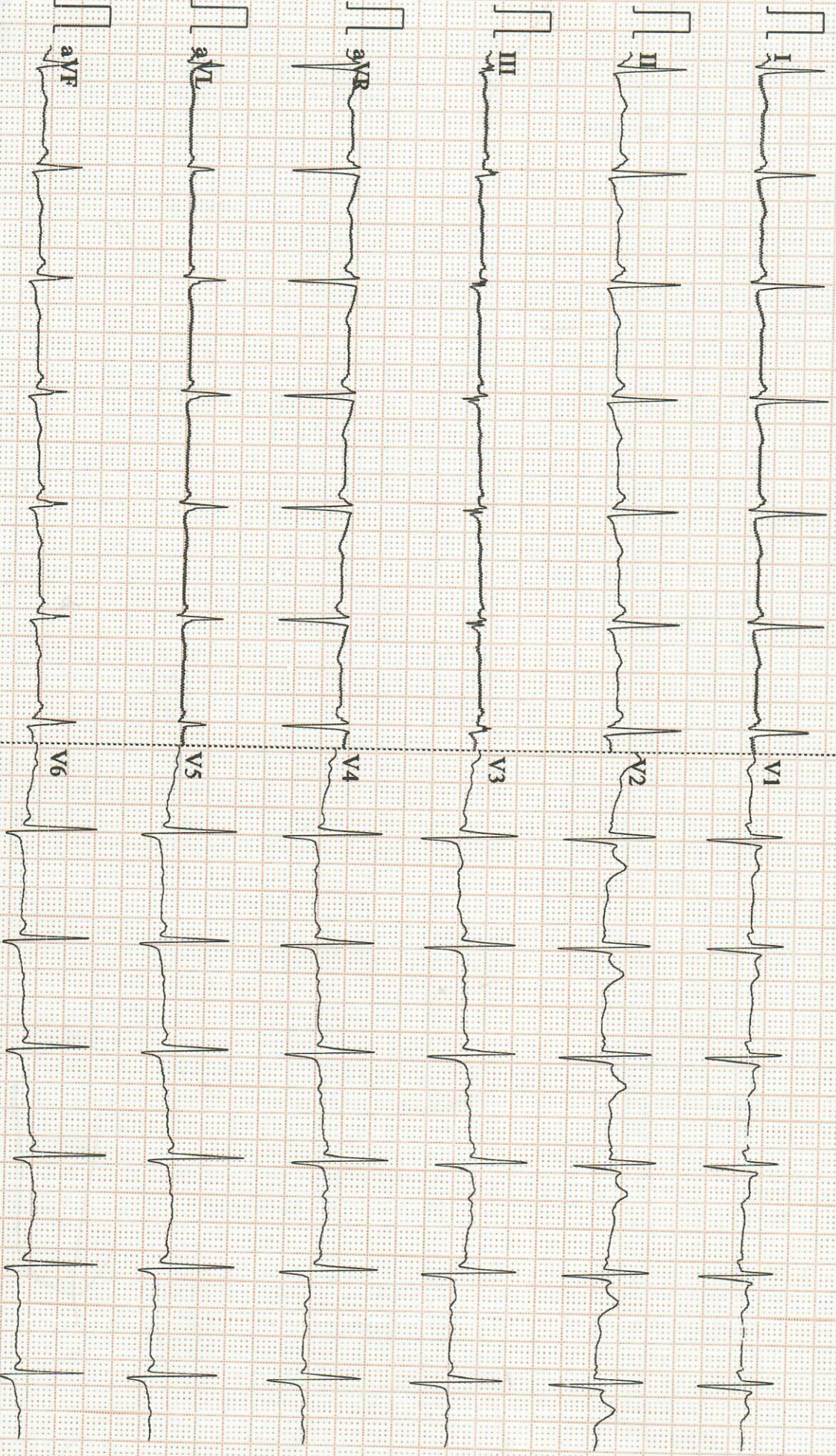
For BP

HR : 76 bpm
P : 106 ms
PR : 118 ms
QRS : 118 ms
QT/QTc : 374/422 ms
P/QRS/T : 52/29/-11 °
RV5/SV1 : 1.25/0.774 mV

Diagnosis Information:

Sinus Rhythm
Short PR Interval
T Wave Abnormality(I,II,V3,V4,V5,V6)

Report Confirmed by:



0.15-35Hz AC50 25mm/s 10mm/mV 2*5.0s 76 V2.2 SEMIP V1.81 SPECTRUM DIAGNOSTICS & HEALTH CARE

NAME : MR.VINOD KUMAR V	DATE : 18/04/2024
AGE/SEX : 36YEARS/ MALE	REG NO :1804240021
REF BY : APOLLO CLINIC	

CHEST PA VIEW

Lung fields are clear.

Cardiovascular shadows are within normal limits.

Both CP angles are free.

Domes of diaphragm and bony thoracic cage are normal.

IMPRESSION: NORMAL CHEST RADIOGRAPH.



Dr RIKHIT MAGANLAL
CONSULTANT RADIOLOGIST

Your suggestion / feedback is a valuable input for improving our services

SCAN FOR LOCATION



Name : MR. VINOD KUMAR V	Uhid : 1804240021	Bill Date : 18-Apr-2024 08:37 AM
Age / Gender : 36 years / Male		Sample Col. Date : 18-Apr-2024 08:37 AM
Ref. By Dr. : Dr. APOLO CLINIC	1804240021	Result Date : 18-Apr-2024 10:04 AM
Reg. No. : 1804240021		Report Status : Final
C/o : Apollo Clinic		

Test Name	Result	Unit	Reference Value	Method
Fasting Blood Sugar (FBS)- Plasma	99	mg/dL	60.0-110.0	Hexo Kinase

Comments: Glucose, also called dextrose, one of a group of carbohydrates known as simple sugars (monosaccharides). Glucose has the molecular formula $C_6H_{12}O_6$. It is found in fruits and honey and is the major free sugar circulating in the blood of higher animals. It is the source of energy in cell function, and the regulation of its metabolism is of great importance (fermentation; gluconeogenesis). Molecules of starch, the major energy-reserve carbohydrate of plants, consist of thousands of linear glucose units. Another major compound composed of glucose is cellulose, which is also linear. Dextrose is the molecule D-glucose. Blood sugar, or glucose, is the main sugar found in the blood. It comes from the food you eat, and it is body's main source of energy. The blood carries glucose to all of the body's cells to use for energy. Diabetes is a disease in which your blood sugar levels are too high. Usage: Glucose determinations are useful in the detection and management of Diabetes mellitus.

Note: Additional tests available for Diabetic control are Glycated Hemoglobin (HbA1c), Fructosamine & Microalbumin urine

Comments: Conditions which can lead to lower postprandial glucose levels as compared to fasting glucose are excessive insulin release, rapid gastric emptying & brisk glucose absorption.

Probable causes : Early Type II Diabetes / Glucose intolerance, Drugs like Salicylates, Beta blockers, Pentamidine etc., Alcohol ,Dietary – Intake of excessive carbohydrates and foods with high glycemic index ? Exercise in between samples ? Family history of Diabetes, Idiopathic, Partial / Total Gastrectomy.



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Dr. Nithun Reddy C,MD,Consultant Pathologist

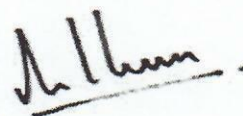


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Test Name	Result	Unit	Reference Value	Method
LFT-Liver Function Test -Serum				
Bilirubin Total-Serum	0.81	mg/dL	0.2-1.0	Caffeine Benzoate
Bilirubin Direct-Serum	0.17	mg/dL	0.0-0.2	Diazotised Sulphanilic Acid
Bilirubin Indirect-Serum	0.64	mg/dL	Male: 0.0 - 1.10	Direct Measure
Aspartate Aminotransferase (AST/SGOT)-Serum	26.00	U/L	Male: 15.0 - 37.0	UV with Pyridoxal - 5 - Phosphate
Alanine Aminotransferase (ALT/SGPT)-Serum	34.00	U/L	Male: 16.0 - 63.0	UV with Pyridoxal - 5 - Phosphate
Alkaline Phosphatase (ALP)-Serum	79.00	U/L	Male: 45.0 - 117.0	PNPP,AMP-Buffer
Protein, Total-Serum	6.67	g/dL	6.40-8.20	Biuret/Endpoint- With Blank
Albumin-Serum	4.78	g/dL	Male: 3.40 - 5.50	Bromocresol Purple
Globulin-Serum	1.89	g/dL	2.0-3.50	Calculated
Albumin/Globulin Ratio-Serum	2.53	Ratio	0.80-2.0	Calculated



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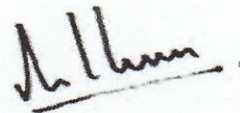
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Test Name	Result	Unit	Reference Value	Method
Creatinine, Serum	0.96	mg/dL	Male: 0.70-1.30 Female: 0.55-1.02	Modified kinetic Jaffe

Comments: Creatinine is the product of creatine metabolism. Creatinine is a chemical compound left over from energy-producing processes in your muscles. Healthy kidneys filter creatinine out of the blood. Creatinine exits your body as a waste product in urine. It is a measure of renal function and elevated levels are observed in patients typically with 50% or greater impairment of renal function.



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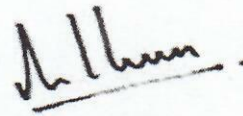


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Test Name	Result	Unit	Reference Value	Method
BUN/Creatinine Ratio	7.29	Ratio	5.0-20.0	Calculated



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Test Name	Result	Unit	Reference Value	Method
Complete Haemogram-Whole Blood EDTA				
Haemoglobin (HB)	15.40	g/dL	Male: 14.0-17.0 Female: 12.0-15.0 Newborn: 16.50 - 19.50	Spectrophotometer
Red Blood Cell (RBC)	5.11	million/cumm	3.50 - 5.50	Volumetric Impedance Electronic Pulse
Packed Cell Volume (PCV)	44.50	%	Male: 42.0-51.0 Female: 36.0-45.0	Calculated
Mean corpuscular volume (MCV)	87.00	fL	78.0- 94.0	Calculated
Mean corpuscular hemoglobin (MCH)	30.20	pg	27.50-32.20	Calculated
Mean corpuscular hemoglobin concentration (MCHC)	34.70	%	33.00-35.50	Calculated
Red Blood Cell Distribution Width SD (RDW-SD)	40.60	fL	40.0-55.0	Volumetric Impedance
Red Blood Cell Distribution CV (RDW-CV)	15.20	%	Male: 11.80-14.50 Female: 12.20-16.10	Volumetric Impedance
Mean Platelet Volume (MPV)	10.70	fL	8.0-15.0	Volumetric Impedance
Platelet	2.52	lakh/cumm	1.50-4.50	Volumetric Impedance
Platelet Distribution Width (PDW)	13.90	%	8.30 - 56.60	Volumetric Impedance
White Blood cell Count (WBC)	7890.00	cells/cumm	Male: 4000-11000 Female: 4000-11000 Children: 6000-17500 Infants : 9000-30000	Volumetric Impedance
Neutrophils	58.60	%	40.0-75.0	Light scattering/Manual
Lymphocytes	37.00	%	20.0-40.0	Light scattering/Manual
Eosinophils	1.00	%	0.0-8.0	Light scattering/Manual



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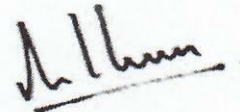
Test Name	Result	Unit	Reference Value	Method
Monocytes	3.10	%	0.0-10.0	Light scattering/Manual
Basophils	0.30	%	0.0-1.0	Light scattering/Manual
Absolute Neutrophil Count	4.63	10 ³ /uL	2.0- 7.0	Calculated
Absolute Lymphocyte Count	2.92	10 ³ /uL	1.0-3.0	Calculated
Absolute Monocyte Count	0.24	10 ³ /uL	0.20-1.00	Calculated
Absolute Eosinophil Count	80.00	cells/cumm	40-440	Calculated
Absolute Basophil Count	0.02	10 ³ /uL	0.0-0.10	Calculated
Erythrocyte Sedimentation Rate (ESR)	08	mm/hr	Female : 0.0-20.0 Male : 0.0-10.0	Calculated Westergren

Peripheral Smear Examination-Whole Blood EDTA

Method: (Microscopy-Manual)

RBC'S : Normocytic Normochromic.
WBC'S : Are normal in total number, morphology and distribution.
Platelets : Adequate in number and normal in morphology.
No abnormal cells or hemoparasites are present.
Impression : Normocytic Normochromic Blood picture.

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Test Name	Result	Unit	Reference Value	Method
Blood Group & Rh Typing-Whole Blood EDTA				
Blood Group	O			Slide/Tube agglutination
Rh Type	Negative			Slide/Tube agglutination

Note: Test done by Slide agglutination method. Suggested confirmation by gel card / tube agglutination method.

Comments: ABO blood group system, the classification of human blood based on the inherited properties of red blood cells (erythrocytes) as determined by the presence or absence of the antigens A and B, which are carried on the surface of the red cells. Persons may thus have type A, type B, type O, or type AB blood.



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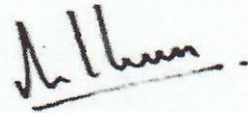
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Test Name	Result	Unit	Reference Value	Method
Urine Routine Examination-Urine				
Physical Examination				
Colour	Pale Yellow		Pale Yellow	Visual
Appearance	Clear		Clear	Visual
Reaction (pH)	5.5		5.0-7.5	Dipstick
Specific Gravity	1.020		1.000-1.030	Dipstick
Biochemical Examination				
Albumin	Negative		Negative	Dipstick/Precipitation
Glucose	Negative		Negative	Dipstick/Benedicts
Bilirubin	Negative		Negative	Dipstick/Fouchets
Ketone Bodies	Negative		Negative	Dipstick/Rotheras
Urobilinogen	Normal		Normal	Dipstick/Ehrlichs
Nitrite	Negative		Negative	Dipstick
Microscopic Examination				
Pus Cells	1-2	hpf	0.0-5.0	Microscopy
Epithelial Cells	2-3	hpf	0.0-10.0	Microscopy
RBCs	Absent	hpf	Absent	Microscopy
Casts	Absent		Absent	Microscopy
Crystals	Absent		Absent	Microscopy
Others	Absent		Absent	Microscopy

Comments: The kidneys help infiltration of the blood by eliminating waste out of the body through urine. They also regulate water in the body by conserving electrolytes, proteins, and other compounds. But due to some conditions and abnormalities in kidney function, the urine may encompass some abnormal constituents, which are not normally present. A complete urine examination helps in detecting such abnormal constituents in urine. Several disorders can be detected by identifying and measuring the levels of such substances. Blood cells, bilirubin, bacteria, pus cells, epithelial cells may be present in urine due to kidney disease or infection. Routine urine examination helps to diagnose kidney diseases, urinary tract infections, diabetes and other metabolic disorders.



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Test Name	Result	Unit	Reference Value	Method
Post prandial Blood Glucose (PPBS)-Plasma	140	mg/dL	70-140	Hexo Kinase

Comments: Glucose, also called dextrose, one of a group of carbohydrates known as simple sugars (monosaccharides). Glucose has the molecular formula $C_6H_{12}O_6$. It is found in fruits and honey and is the major free sugar circulating in the blood of higher animals. It is the source of energy in cell function, and the regulation of its metabolism is of great importance (fermentation; gluconeogenesis). Molecules of starch, the major energy-reserve carbohydrate of plants, consist of thousands of linear glucose units. Another major compound composed of glucose is cellulose, which is also linear. Dextrose is the molecule D-glucose. Blood sugar, or glucose, is the main sugar found in the blood. It comes from the food you eat, and it is body's main source of energy. The blood carries glucose to all of the body's cells to use for energy. Diabetes is a disease in which your blood sugar levels are too high. Usage: Glucose determinations are useful in the detection and management of Diabetes mellitus.

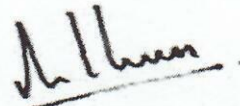
Note: Additional tests available for Diabetic control are Glycated Hemoglobin (HbA1c), Fructosamine & Microalbumin urine

Comments: Conditions which can lead to lower postprandial glucose levels as compared to fasting glucose are excessive insulin release, rapid gastric emptying & brisk glucose absorption.

Probable causes : Early Type II Diabetes / Glucose intolerance, Drugs like Salicylates, Beta blockers, Pentamidine etc., Alcohol, Dietary – Intake of excessive carbohydrates and foods with high glycemic index ? Exercise in between samples ? Family history of Diabetes, Idiopathic, Partial / Total Gastrectomy.



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