



**Mediwheel**  
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**Arcofemi Healthcare Pvt Ltd**

(Formerly known as Arcofemi Healthcare Ltd)

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CIN: U24240DL2011PTC216307

## **MEDICAL FITNESS CERTIFICATE**

(To be signed by a registered medical practitioner holding a Medical degree)

This is to certify that **Mr. Riyaz Parvijhusain Mirza** aged, **30yr**. Based on the examination, I certify that he is in good dental and physical health and it is free from any physical defects such as deafness, color blindness, and any chronic or contagious diseases.

Place: **Anand**

Date: 13/08/2024

**Dr. Nitesh Kumar**  
**M.D. MBBS**  
**BCMR 47093**

Name & Signature of

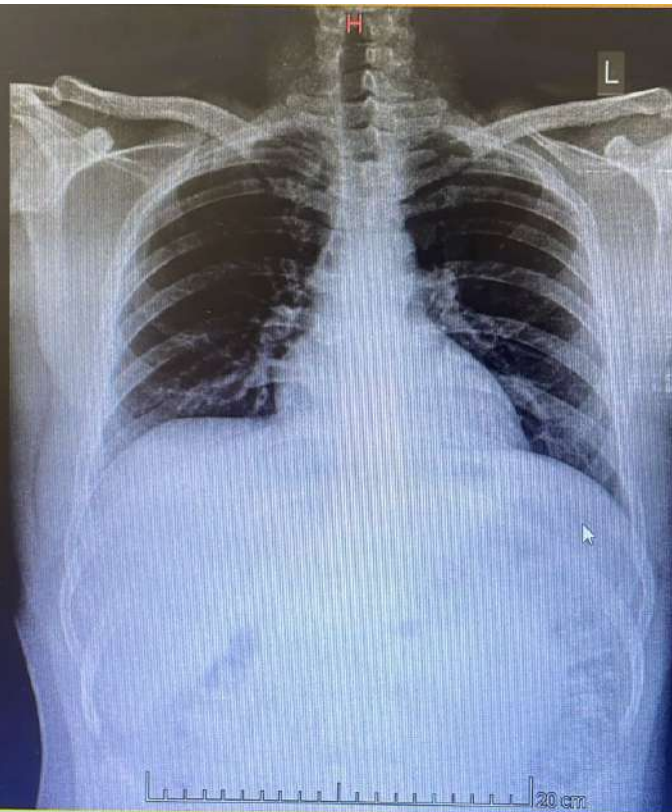
Medical officer

RIYAZ P MIRZA 30Y/M  
ID: CH-2024-0057381  
Male

CHARUSAT HOSPITAL  
CHEST  
Study ID: 2408130950408226  
Acq: 13 Aug, 2024  
Acq.: 10:45:53 AM

20 cm

R



Frame: [1] 1 / 1  
Zoom: 16.7%  
Window/Level: 256/128  
Pixel: 145 PVAL - (2997,2695)  
DX (3480x4248)

Series No: 1  
Laterality: U  
PA

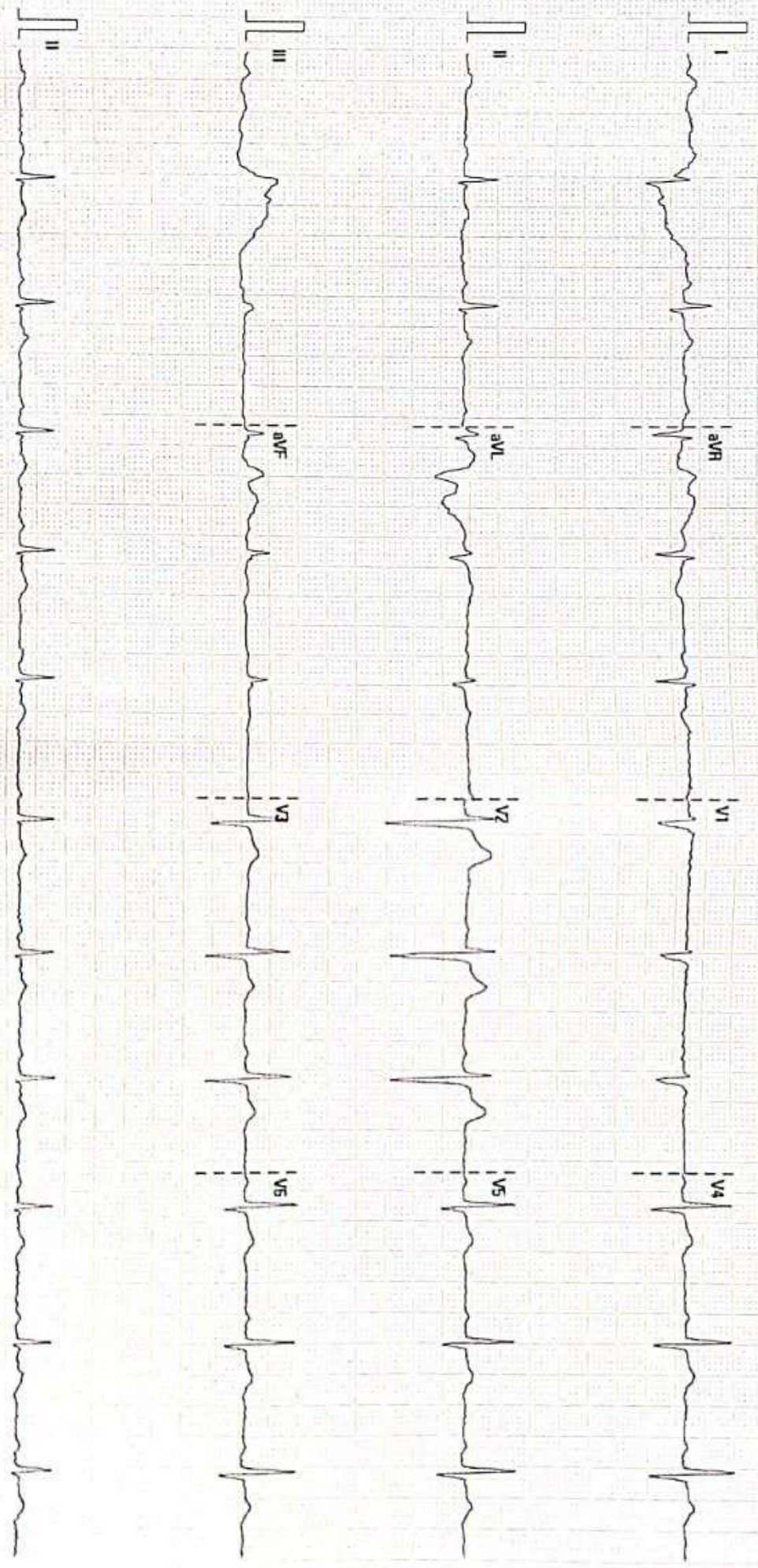
ID: 0051381  
Name: Mirza, Hiyaz P  
Age: 30 Years  
Gender: Male

13-08-2024 10:39:57 AM

Vent. Rate	69 bpm
PR Interval	188 ms
QRS Duration	86 ms
QT/QTc Interval	374/390 ms
P/QRS/T Axes	0/50/50 deg

Sinus rhythm  
Lateral T wave abnormality is nonspecific


Unconfirmed Diagnosis



25 mm/s 10 mm/mV 50 Hz 6DR 20 Hz

CHARISMA HOSPITAL

02.03.00.V28.4.1 CH.FM.52001897

<b>Patient Name :</b> RIYAZ P MIRZA	<b>Sample No. :</b> SAMPLE-0111119 
<b>Patient ID :</b> CH-2024-0057381	<b>Visit No. :</b> OPD/2024/08/0000715
<b>Age/Sex :</b> 30y/Male	<b>Call. Date :</b> 13-Aug-2024 09:32
<b>Referred By :</b> RIPAL PATEL	<b>S. Coll. Date :</b> 13-Aug-2024 10:31
<b>Ward :</b> -	<b>Report Date :</b> 13-Aug-2024 11:52

### Hemoglobin (HB)

Investigation	Result	Normal Value
Hemoglobin	14.0 gm/dl [NORMAL]	[M : 14-18, F : 12-16 ]

### WBC

Investigation	Result	Normal Value
R.B.C Count :	4.55 mill./c.mm [NORMAL]	[M : 4.5 - 5.5 , F : 3.8 - 5.2]
WBC :	5070 /c.mm [NORMAL]	4000 - 10000

### Platelet count

Investigation	Result	Normal Value
Platelets	1.76 Lakh/cmm [NORMAL]	1.5 - 4.5


### WBC count - Differential

Investigation	Result	Normal Value
Polymorphs	49 % [NORMAL]	40 - 70
Lymphocytes	40 % [NORMAL]	20 - 40
Eosinophils	01 % [NORMAL]	1 - 6
Monocytes	09 % [NORMAL]	2 - 10
Basophils	00 % [NORMAL]	0 - 1

### BLOOD UREA

Investigation	Result	Normal Value
Blood Urea	25.5 mg/dl [NORMAL]	15 - 40

### S.Creatinine

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Investigation	Result	Normal Value
Serum Creatinine :	0.99 mg/dl [NORMAL]	Male : 0.7 to 1.5 mg/dl Female : 0.5 to 1.2 mg/dl

#### BUN

Investigation	Result	Normal Value
BUN :	12 [NORMAL]	8.0 to 23.0 (mg/dl)

#### URIC ACID

Investigation	Result	Normal Value
Serum Uric Acid	7.0 mg/dl [NORMAL]	Male : 2.5 to 7.0 Female : 1.5 to 6.0

#### ESR

Investigation	Result	Normal Value
ESR - After One Hour	04 mm [NORMAL]	[M : 3 - 5, F : 4 - 7]

#### Blood Group

Investigation	Result	Normal Value
ABO :	B	
Rh :	Negative	

#### FASTING BLOOD GLUCOSE


Investigation	Result	Normal Value
Fasting Blood Sugar :	100.8 mg/dl [NORMAL]	70 - 110

#### TSH

Investigation	Result	Normal Value
TSH :	2.27 uIU/ml [NORMAL]	0.34 to 4.5 (uIU/ml)

#### T3

Investigation	Result	Normal Value
T3-Triiodothyronine :	1.88 ng/ml [NORMAL]	0.69 to 2.15 (ng/ml)

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#### T4


Investigation	Result	Normal Value
T4-thyroxine :	65.7 ng/ml [NORMAL]	52.0 to 127.0 (ng/mL)

#### LIPID PROFILE

Investigation	Result	Normal Value
Serum Cholesterol (Chol) :	148.3 mg/dl	<200 mg/dl Desirable 200-239 mg/dl Boderline High > 240 mg/dl High
Serum Triglyceride :	80.8 mg/dl	<150 mg/dl Normal 150-199 mg/dl Boderline High 200-499 mg/dl High
S.HDL Cholesterol :	38.7 mg/dl	Men : >55, Wo : >65 Standread Risk Level Men : 35-55, Wo : 46-65 Risk Men : <35, Wo : <45
LDLC :	79.94 mg/dl	
VLDL :	29.66 mg/dl [NORMAL]	10.0 to 30.0 (mg/dl)
LDL/HDL Ratio :	2.07 - [NORMAL]	< 3.5
TC / HDL Ratio :	3.83 - [LOW]	4.0 to 6.0
LDL (DIRECT) :	110.9 mg/dl [Near Optimal]	< 100.0 (Optimal), 100.0 to 120.0 (Near Optimal), 130.0 to 159.0 (Border line high), 160.0 to 189.0 (High), > 190.0 (Very high)

#### LIVER FUNCTION TEST


Investigation	Result	Normal Value
Total Bilirubin :	0.65 mg/dl [NORMAL]	0.0 to 1.2

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<b>Age/Sex :</b> 30y/Male	<b>Call. Date :</b> 13-Aug-2024 09:32
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Direct Bilirubin (DBIL) :	0.24 mg/dl [NORMAL]	0.0 to 0.30
ALT (SGPT) :	108.1 IU/L [HIGH]	[0.0 - 40]
AST (SGOT) :	47.2 IU/L [HIGH]	<= 45.0
Alkaline Phosphatase (ALP) :	103.8 IU/L [NORMAL]	15 - 80 - : 37.0 to 147.0
Total Protein (TP) :	7.4 gm/dl [NORMAL]	[Adult 6.0 to 7.8]
Albumin (ALB) :	4.4 gm/dl [NORMAL]	3.5 to 5.0 (gm/dl)
Indirect Bilirubin (IBIL) :	0.41 [NORMAL]	0.0 to 0.75 (mg/dl)
Globulins :	3.0 gm/dl [NORMAL]	2.4 to 3.5 (gm/dl)
A/G Ratio :	1.5	

#### URINE R & M

Investigation	Result	Normal Value
<b>Physical Examination :</b>		
Quantity :	10 ml	
Colour :	Pale Yellow -	
Appearance :	Clear -	
Odour :	URINIOD -	
Reaction :	Acidic -	
Specific Gravity :	1.025 -	
<b>Chemical Examination :</b>		
Albumin :	Absent -	
Sugar :	Absent -	
Bile Salts :	Absent -	
Bile Pigments :	Absent -	
Acetone :	Absent -	

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Urobilinogen : Absent -

**Microscopie Examination :**

Pus Cells : 1-2 -

RBCs : Absent -

Epithelial cells : 1-2 -


Casts : Absent -

Crystals : Absent -

**DR. NAITIK BHATIA**  
**CONSULTANT PATHOLOGIST**  
**(M.B.B.S,D.C.P)**

**DR. KETAN KAPADIA**  
**CONSULTANT PATHOLOGIST**  
**(M.B.B.S,M.D)**



<b>Patient Name :</b> RIYAZ P MIRZA	<b>Sample No. :</b> SAMPLE-0111139 
<b>Patient ID :</b> CH-2024-0057381	<b>Visit No. :</b> OPD/2024/08/0000715
<b>Age/Sex :</b> 30y/Male	<b>Call. Date :</b> 13-Aug-2024 09:32
<b>Referred By :</b> RIPAL PATEL	<b>S. Coll. Date :</b> 13-Aug-2024 14:25
<b>Ward :</b> -	<b>Report Date :</b> 13-Aug-2024 14:43

### PP2BS

Investigation	Result	Normal Value
Post Prandial Blood Sugar (2Hrs) :	102.3 mg/dl [NORMAL]	100 - 140

### HBA1C

Investigation	Result	Normal Value
Mean Blood Glucose	125.5 mg/dl	
Hb A 1c	6.0 %	> 8 : Action Suggested 7-8 : Good Control < 7 : Goal 6-7 : Near Normal Glycemia < 6 : Non-diabetic Level

### Comments

Hb A1C also known as Glycosylated Haemoglobin is the most important test for the assessment of longterm Blood glucose control (also called glycemic control).

Hb A1C reflects mean glucose concentration over past 6-8 weeks and provides a much better indication of longterm glycemic control than blood glucose determination.

This reaction is irreversible & therefore remains unaffected glucose & Haemoglobin. Long term complications of diabetes such as Retinopathy (Eye-complications).

nephropathy (Kidney-complications) & neuropathy (nerve complications) are potentially serious and can lead to blindness, kidney failure etc. Glycemic control as monitored by Hb A1C measurement is considered most important.

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