

MER- MEDICAL EXAMINATION REPORT

Date of Examination	27/08/2024		
NAME Swapnil Sanjay Swude			
AGE 23	Gender	Male	
HEIGHT(cm) 166cm	WEIGHT (kg)	73kg	
B.P.	120/80 mm Hg		
ECG	wne		
X Ray	NAD .		
Vision Checkup	Color Vision :	Normal	
	Far Vision Ratio :	6/6 - Uncorrected	
	Near Vision Ratio :	NS - Uncorrected	
Present Ailments	Nil		
Details of Past ailments (If Any)	Nil .		
Comments / Advice : She / He is Physically Fit			

  
**Dr. MUKUL ARTE** MBBS, DNB  
 Regn. No: 44203 (MHC)  
 Approved By DG Shipping (MHC)  
 Consultant in Marine Medicine & Aviation Medicine  
 A-101-102, Heritage Plaza, Koli Cause Lane,  
 Andheri East, Mumbai-400 069  
**SEA BIRD MEDICARE CENTRE**

Signature with Stamp of Medical Examiner

## CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

of Surajit Sanjay Shinde on 27/8/24

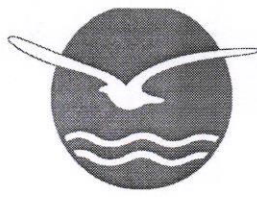
After reviewing the medical history and on clinical examination it has been found that he/she is

	Tick
<ul style="list-style-type: none"> <li>• Medically Fit</li> </ul>	<input checked="" type="checkbox"/>
<ul style="list-style-type: none"> <li>• Fit with restrictions/recommendations</li> </ul> <p>Though following restrictions have been revealed, in my opinion, these are not impediments to the job.</p> <p>1.....</p> <p>2.....</p> <p>3.....</p> <p>However the employee should follow the advice/medication that has been communicated to him/her.</p> <p>Review after _____</p>	<input type="checkbox"/>
<ul style="list-style-type: none"> <li>• Currently Unfit.</li> </ul> <p>Review after _____ recommended</p>	<input type="checkbox"/>
<ul style="list-style-type: none"> <li>• Unfit</li> </ul>	<input type="checkbox"/>

Dr. \_\_\_\_\_  
**Medical Officer**  
**The Apollo Clinic, (Location)**

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 Andheri East, Mumbai-400 069  
**SEA BIRD MEDICARE CENTRE**

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



# SEA BIRD MEDICARE CENTRE

Report ID : **SSSM2781364**  
Patient Name : **Mr. SWAPNIL SANJAY SHINDE**  
Rank :  
Ref By : **DR. MUKUL ARTE**  
Location : **SEA BIRD- ANDHERI**

Reg. : **27-Aug-2024**  
Report Date : **27-Aug-2024**  
Company Name : **M/S. APOLLO HEALTH AND**  
Age/Sex : **23 Year / Male**

## HEMATOLOGY

### INVESTIGATION

### OBSERVED VALUE      UNITS      REFERENCE RANGE

#### **Complete Blood Count**

Haemoglobin	12.8	gm/dl	13-18 gm/dl
Total W.B.C	6700	/cu.mm	4000-11000 /cu.mm
Neutrophils	62	%	50-70 %
Lymphocytes	36	%	20-40 %
Eosinophils	02	%	0-7 %
Monocytes	00	%	0-8 %
Basophils	00	%	0-2 %
R.B.C Total	4.55	millions/cu .mm	4.5-5.5 millions/cu.mm
P.C.V	37.5	%	42-55 %
MCV	82.6	femolitre	80-96 femolitre
MCH	28.1	picogram	27-33 picogram
MCHC	34.0	%	32-36 %
W.B.C Morphology	Normal		
R.B.C Morphology	Normal		
Platelet Count	367000	/cu.mm	150000-450000 /cu.mm
<b>Blood Group</b>			
Blood Group	O Positive		
<b>ESR</b>			
ESR	32	mm/hr	0-15 mm/hr

---END OF REPORT---

Kindly Correlate with clinical conditions.

Remark : ---

  
DR.SANDIP MOHANRAO HUDDEDAR  
MBBS, DCP  
**Pathologist**

  
**M O I C**

  
SUPARNA B DAREKAR  
**Lab Technician**

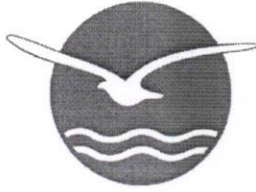
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HO- Sea Bird Medicare Centre (ISO 9001:2015): A-101-102, Heritage Plaza, Teli Cross Lane, Andheri East (Nr. Station), Mumbai- 69. Tel: 022- 46032704

Powai: 022-25701053 / 25704157

Kochi: 0484- 2322022 / 4032022

Website: [www.seabirdhf.com](http://www.seabirdhf.com) | Email: [seabird@seabirdhf.com](mailto:seabird@seabirdhf.com)



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## BIO-CHEMISTRY

### INVESTIGATION

### OBSERVED VALUE      UNITS      REFERENCE RANGE

#### **Liver Function Test**

SGPT	<b>45</b>	IU/L	9-43 IU/L
Sr.Bilirubin (T)	0.5	mg/dl	0.2-1.2 mg/dl
Sr.Bilirubin (D)	0.1	mg/dl	0.0-0.3 mg/dl
Sr.Bilirubin (I)	0.4	mg/dl	

#### **Renal Function Test**

BUN	12	mg/dl	6-21 mg/dl
Sr.Creatinine	1.0	mg/dl	0.7-1.4 mg/dl

#### **Blood Sugar Estimation**

Fasting Blood Sugar	109	mg/dl	70-110 mg/dl
Fasting Urine Sugar	Absent		
Post Prandial Blood Sugar	120	mg/dl	70-140 mg/dl
Post Prandial Urine Sugar	Absent		
BUN/Creatinine Ratio	12.4		

---END OF REPORT---

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Remark : ---

Pathologist

M O I C

  
SUPARNA B DAREKAR  
Lab Technician

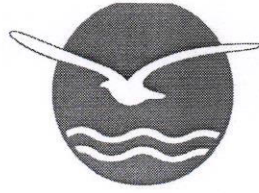
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Age/Sex : **23 Year / Male**

## URINE ROUTINE

### INVESTIGATION

### OBSERVED VALUE UNITS REFERENCE RANGE

Colour	PALE YELLOW		PALE YELLOW
Appearance	CLEAR		CLEAR
Specific Gravity	1.015		1.030
pH	ACIDIC		ACIDIC
Odour	AROMATIC		AROMATIC
Proteins (UR)	ABSENT		ABSENT
Sugar	ABSENT		ABSENT
Bile Salts	ABSENT		ABSENT
Bile Pigments	ABSENT		ABSENT
Ketones (UR)	ABSENT		ABSENT
Occult Blood	ABSENT		ABSENT
Urobilinogen(UR)	ABSENT		ABSENT
Pus Cells (UR)	2 - 3	/hpf	2-3/hpf
RBC cells	ABSENT	/hpf	2-3/hpf
Epithelial Cells	1 - 2	/hpf	1-2/hpf
Casts (UR)	ABSENT	/hpf	
Crystals	ABSENT	/hpf	
Bacteria (UR)	ABSENT		ABSENT
Others (UR)	ABSENT		

---END OF REPORT---

Kindly Correlate with clinical conditions.

Remark : ---

  
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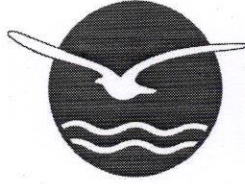
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Rank : Company Name : **M/S. APOLLO HEALTH AND LIFESTYLE**  
Ref By : **DR. MUKUL ARTE** Age/Sex : **23 Year / Male**

## CHEST X RAY REPORT

X-Ray No : 7175

Investigation : Chest PA View.

Bony thoracic cage is normal.

Cardiac silhouette appears normal in size and configuration.

Both lungs shows equal translucency and normal vasculature.

Both Hemidiaphragm visualised normal.

No evidence of any active parenchymal lesion seen.

### Impression :

**Normal Chest X-Ray.**

  
Dr. Jacob  
Mathew MD

Proudly... Caring For You

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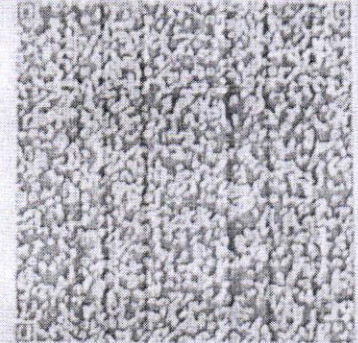
आयकर विभाग  
INCOME TAX DEPARTMENT



भारत सरकार  
GOVT. OF INDIA



स्थायी लेखा संख्या कार्ड  
Permanent Account Number Card  
**NFEPS6407B**



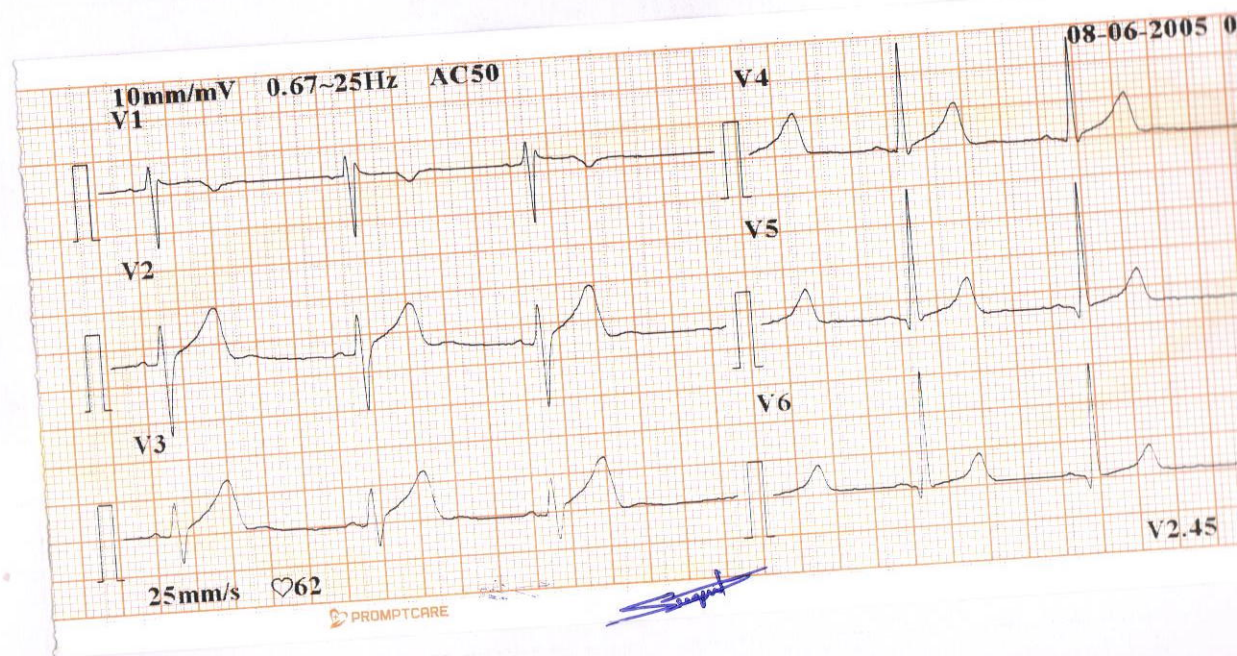
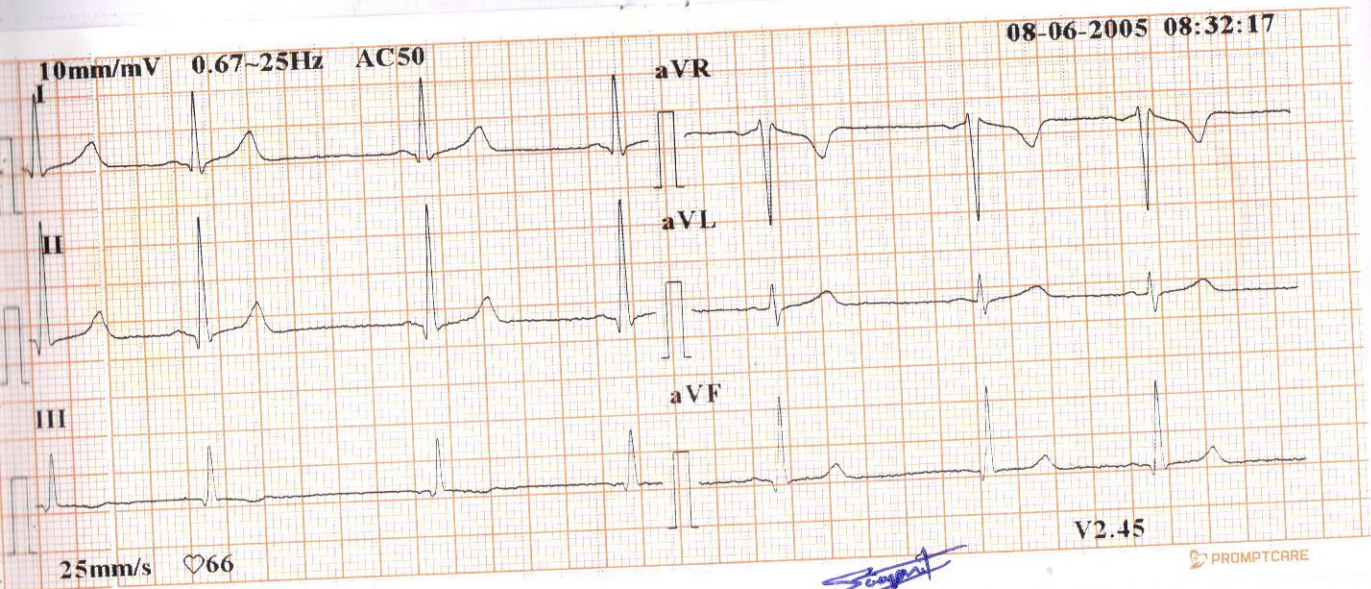
नाम / Name  
**SWARNIL SANJAY SHINDE**

पिता का नाम / Father's Name  
**SANJAY SHINDE**

जन्म तिथि / Date of Birth  
**16/07/2001**

  
हस्ताक्षर / Signature

16082020





### E. C. G. REPORT

RATE 64/min Q. WAVE \_\_\_\_\_

RHYTHM Regular QRS COMPLEX N

VOLTAGE N ST. SEGMENT iso electric

P. WAVE \_\_\_\_\_ T. WAVE \_\_\_\_\_

PR. INTERVAL N

REMARKS WNL

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### ELECTROCARDIOGRAPHIC REPORT



**SEA BIRD**  
MEDICARE CENTRE

NAME Mr. Swapnil Shirale

AGE 23y DATE 27/08/2024

- A-101-102, Heritage Plaza, Telli Cross Lane, Andheri East (Nr. Station), Mumbai - 400069. Tel.: 022-4603 2704 / 81046 06813
- 102-103-104, Gateway Plaza, Central Avenue Road, Hiranandani Gardens, Powai, Mumbai - 4000 Tel.: 2570 4157 / 2570 1053