

Bank of Baroda
Medi wheel.

❖ This medical fitness is only on the basis of clinical examination. No COVID -19 and other investigation has been done to reveal the fitness

MEDICAL EXAMINATION REPORT

Name..... Rahul Duggal Age & Sex..... 33y/M Date of MER..... 08/04/23
 Identification Mark..... scar on forehead ID Proof..... E-ID Card
 Ht..... 170 Wt..... 84kg Chest Exp/Insp..... 104 / 109 Abd..... 98 PR..... 77/m BP..... 130/80

Any Operation
..... No

Any Medicine Taken
..... No

Any Accident
..... No

Alcohol/Tabacco/Drugs No
Consumption..... - Duration..... -

Qty..... -

Whether the person is suffering from any of the following diseases, give details

DISEASE	Yes/NO	DETAIL
Diabetes	<u>No</u>	
Hypertension	<u>No</u>	
Renal Complications	<u>No</u>	
Heart Disease	<u>No</u>	
Cancer	<u>No</u>	
Any Other	<u>YES</u>	<u>k/o - Post Meningitis sequelae since childhood (50% disability)</u>

Examination of systems

SYSTEMS(any evidence of past/present disease)	YES	NO	DETAILS
Brain or nervous system		<input checked="" type="checkbox"/>	
Lungs or other parts of respiratory system		<input checked="" type="checkbox"/>	
GI Tract		<input checked="" type="checkbox"/>	
Ears, Eyes, Nose, Throat, Neck		<input checked="" type="checkbox"/>	
Cardiovascular System		<input checked="" type="checkbox"/>	

Signature of client.....



Signature of Doctor..... Dr. R. Mittal

Seal of Centre.....
 M.B.B.S. - M.D. (Chest)
 Registration No. 17707
 Consultant Physician & Chest Specialist

Feedback – Medical Checks

This is to confirm & certify that I have gone through the medical examination through centre on _ to complete the requisite medical formalities towards my application for life insurance from Bank of Baroda vide Proposal Form bearing no _____ dated 08/04/23

I do confirm specifically that the following medical activities have been performed for me:

- | | | |
|--|---|--|
| 1. Full Medical Report (Medical Questionnaire) | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 2. Sample Collection | | |
| a. Blood | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| b. Urine | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 3. Electro Cardio Gram (ECG) | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 4. Treadmill Test (TMT) | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| 5. Others <u>CXR, 2DECHO, USG, Eyes Check up</u> | | |

I have furnished my ID Proof Employ ID bearing ID No. _____ at the time of my medical.

Feedback Form

- Behavior and cooperation of staff

Reception/ Clinic/ Hospital	<input checked="" type="checkbox"/> Good	<input type="checkbox"/> Average	<input type="checkbox"/> Poor
Technician/ Doctors	<input checked="" type="checkbox"/> Good	<input type="checkbox"/> Average	<input type="checkbox"/> Poor
- Time Management

	<input type="checkbox"/> Good	<input type="checkbox"/> Average	<input type="checkbox"/> Poor
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- Upkeep of hospital

	<input type="checkbox"/> Good	<input type="checkbox"/> Average	<input type="checkbox"/> Poor
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- Technology & Skills

	<input type="checkbox"/> Good	<input type="checkbox"/> Average	<input type="checkbox"/> Poor
--	-------------------------------	----------------------------------	-------------------------------
- Please remark if the medical check procedure was satisfactory

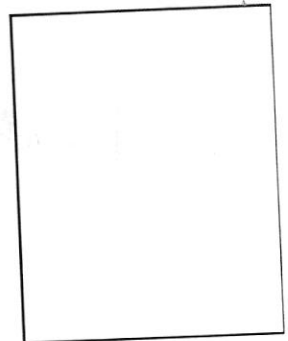
	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
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(Medical Facility- Location; Facility Set-up, instruments, cleanliness; Process followed; etc. Also on the Medical Staff: Appearance; Technical Know-how; Behavior etc.)

- If No please provide details or let us know of anything additional you would like to provide

Signature of the Life to be Insured (Proposer in case of Life insured being minor) Name of the Life to be Insured with date (Proposer (in case of Life insured being minor) <u>Rahul Duggal (8/4/23)</u>	Signature of Visiting/Attending Doctor <u>Dr R.K. Mittal</u> M.B.B.S. - M.D. (chest) Name of Visiting/Attending Doctor <u>Consultant Physician & Chest Specialist</u> MC Registration No: <u>17707</u> Doctor Stamp with date <u>8/4/23</u>
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Self Declaration & Special COVID-19 Consent



Date: 8/4/23

Day:

Time:

Patient's Name/Client Name

Rahul Chuggal

Age: 33 yrs

Sex: M

Case No/Proposal no

Address:

Profession:

1) Do you have Fever/Cough/Tiredness/Difficulty in Breathing? Yes/No

2) Have you travelled outside India and came back during pandemic of COVID 19 or Have you come from other country during pandemic of COVID 19? Yes/No

3) Have you travelled anywhere in India in last 60 days? Yes/No

4) Any Personal or Family History of Positive COVID 19 or Quarantine? Yes/No
4/1 Covid tre in delhi Home isolation for 10-15 days

5) Any history of known case of Positive COVID 19 or Quarantine patient in your Neighbors/Apartment/Society area Yes/No

6) Are you suffering from any following diseases? Diabetes/Hypertension/Lung Disease/Heart Disease Yes/No

7) Are you healthcare worker or interacted/lived with Positive COVID 19 patients? Yes/No

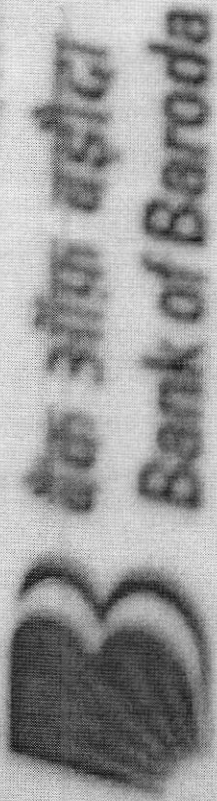
During the Lockdown period and with current situation of Pandemic of COVID 19, I came to this hospital/home visit by this hospital at my home for medical checkup..e.g. MER, Blood Sample, Urine sample and ECG. I also know that I may get infection from the hospital or from doctor, and I will take every precaution to prevent this from happening. for that I will never hold doctors or hospital staffs accountable if such infection occurs to me or my accompanying persons.

Above information is true as per best to my knowledge, I understand that giving false information or hiding the facts or any type of violence in the hospital are punishable offence in IPC.

Patient's Signature with Name

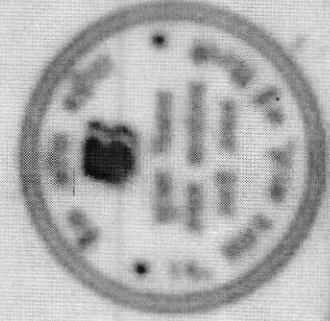


Dr. *Rajendra Kumar*
Doctor's Signature & Name
MBBS, MD (Chest)
Registration No. 17707 (PMC)
Consultant Physician & Chest Specialist



नाम: RAHUL DUGGAL

ए. सी. नं. 111063



Rahul Duggal

Signature of Holder

Dr R.K. Mittal
MBBS MD
Registration No 17707 (P.M.C.)
Consultant Physician (General Surgery)

Handwritten signature

राजस्थान विश्वविद्यालय (Rajasthan University) का छात्र, उद्योग
राजस्थान विश्वविद्यालय (Rajasthan University) का छात्र, उद्योग


Resneel Hall
Dr R.K. Mittal
MBBS, MD
Registration No 17707
Consultant Physician & Surgeon

OFFICE OF THE SURGEON GENERAL
CERTIFICATE FOR THE PERSONS WITH DISABILITIES
This is a copy of the certificate issued by the Surgeon General of India, Ministry of Health & Family Welfare, Government of India, New Delhi, India, in the name of the person mentioned above, who is suffering from the disability mentioned below. The certificate is valid for the period mentioned below.

1. The condition is progressive and progressive disability is expected.
2. Permanent or long-term disability is expected after a period of ...

Signature of the Surgeon General
Signature of the Applicant
Signature of the Medical Superintendent
Seal of the Surgeon General
Seal of the Medical Superintendent

17707
1988

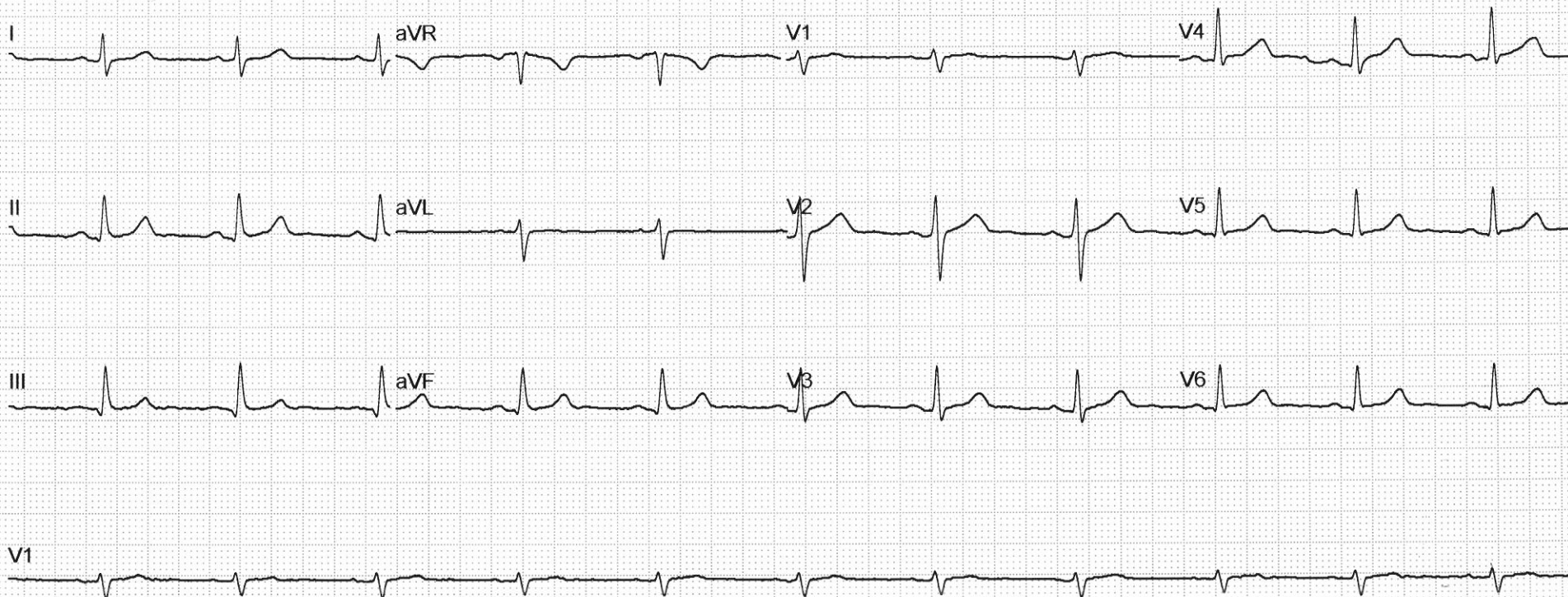
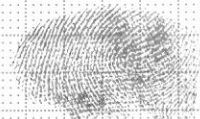


QRS : 86 ms
QT / QTcBaz : 408 / 433 ms
PR : 156 ms
P : 100 ms
RR / PP : 888 / 882 ms
P / QRS / T : 45 / 78 / 57 degrees

Normal sinus rhythm
Normal ECG

R.K. Mittal
Dr R.K. Mittal
M.B.B.S. - M.D. (Chest)
Registration No. 17707 (PMC)
Consultant Physician & Chest Specialist

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:



Lifeline Hospital

Multi Speciality & Super Speciality Hospital

NABH Accredited
(ENTRY LEVEL)



NAME Rahul duggal

AGE / SEX 33y / M

DATE 08/04/2023

REF. BY Bank of Baroda (Mediwheel)

	RIGHT EYE				LEFT EYE			
	SPH	CYL	AXIS	VIA	SPH	CYL	AXIS	VIA
DISTANCE	-2.25	-0.50	25°	6/6	-2.25	-0.50	170°	6/6
FOR NEAR ADD	-	-	-	-	-	-	-	-

COLOR VISION (ISHIHARA'S CHART)

COLOR VISION : Abnormal.

OTHER OPINION: _____



Lifeline Hospital

Multi Speciality & Super Speciality Hospital

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ENTRY LEVEL



Stool sample is refused.





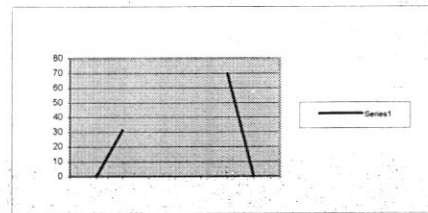
ID.NO :- 1	Date : 08/04/2023
NAME :- RAHUL DUGGAL	AGE/SEX: 33/Y / MALE
REF BY:- BANK OF BARODA	

HAEMATOLOGY REPORT

C.B.C performed on fully automated haematology analyser, Model: Sysmex KX-21(japan)

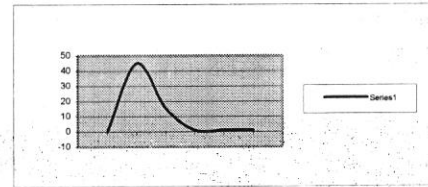
LEUCOCYTES

Parameter	Value	Unit	Reference Range
W.B.C	7.9	10 ³ /uL	4.0 - 11.0
LYM	31.2	%	20.0-45.0
MIXED	5.7	%	3.0 - 10.0
GRA	69.8	%	40.0-75.0



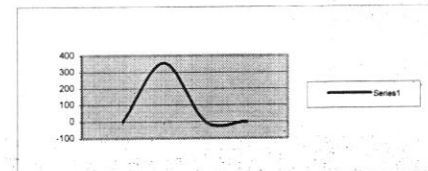
ERYTHROCYTES

Parameter	Value	Unit	Reference Range
R.B.C	5.33	10 ⁶ /uL	3.5-5.5
HB	15.8	g/dL	M 12.0-17.0, F 11.0-16.0
HCT	43.7	%	26.0-50.0
MCV	82.0	fL	82.0-92.0
MCH	29.6	pg	27.0-32.0
MCHC	36.2	g/dL	32.0-36.0
RDW-SD	45.7	fL	37.0-52.0



THROMBOCYTES

Parameter	Value	Unit	Reference Range
PLT	357	10 ³ /uL	150 - 450
PDW	11.2	fL	9.0-17.0
MPV	9.2	fL	9.0-13.0
P-LCR	20.0	%	15.0 - 45.0



BLOOD GROUP "B" POSITIVE

E.S.R (Westgrn) 5 mm/1st Hr. 00 - 20

COMMENTS

Dr. SURBHI GOYAL
M.B.B.S. M.D. (PATHOLOGY)
CONSULTANT PATHOLOGIST
Reg No. 40195
Surbhi

NAME : RAHUL DUGGAL
AGE/SEX : 33Y/M
REF BY : BANK OF BARODA
DATE : 08.04.2023

BLOOD EXAMINATION REPORT

DETERMINATION	NORMAL	RESULT
FBS	70-110mg/dl	88mg/dl
PPBS	70-140mg/dl	72mg/dl
UREA(BUN)	15-45mg/dl	26mg/dl
CREATININE	0.7-1.5mg/dl	0.97mg/dl
URIC ACID	3.0-7.2mg/dl	5.12mg/dl
BUN/SR.CREATININE RATIO	9:1-23:1 RATIO	26.8:0 RATIO
CHOLESTEROL	140-200mg/dl	165mg/dl
TRIGLYCRIDE	60-160mg/dl	126mg/dl
CHOLESTEROL HDL	35-60 mg/dl	47mg/dl
CHOLESTEROL LDL	60-150 mg/dl	93mg/dl
VLDL	20-40 mg/dl	25mg/dl
CHOLESTEROL/HDL Ratio	4.0:1-4.16:1 mg/dl	3.5:1mg/dl
LDL/HDL Ratio	1.71-2.5mg/dl	1.9mg/dl

Recommendation:-

- 1 This report is not valid for medico legal purposes .
2. The test can be repeated free of cost in case of any discrepancy.
3. Test to be clinically correlated.
4. All card tests require confirmation by serology
5. False negative or false positive results may occur in some cases.

Dr. SURBHI GOYAL
M.B.B.S. M.D. (PATHOLOGY)
CONSULTANT PATHOLOGIST
Reg No. 40195
Surbhi

NAME : RAHUL DUGGAL
AGE/SEX : 33Y/M
REF BY : BANK OF BARODA
DATE : 08.04.2023

LIVER EXAMINATION REPORT

DETERMINATION	NORMAL	RESULT
BILLIRUBIN TOTAL	<1.2mg/dl.	0.73mg/dl
BILLIRUBIN DIRECT	<0.3mg/dl	0.20mg/dl
BILIRUBIN INDIRECT	<0.9mg/dl	0.53mg/dl
S.G.O.T.	5-50Units/L	30Units/L
S.G.P.T.	5-50 Units/L	26Units/L
GAMMA GT	9-52 Units/L	24Units/L
ALK. PHOSPHATASE	108-305 Units/L	229Units/L
TOTAL PROTEIN	6.0-8.0mg/dl	7.2mg/dl
ALBUMIN	3.5-5.3mg/dl	4.1mg/dl
S.GLOBULIN	2.0-4.0gm/dl	3.1gm/dl
A/G RATIO	1.25:1-1.75:1 mg/dl	1.32:1gm/dl
AST/ALT RATIO	2:1 RATIO	1.15 RATIO

Recommendation:-

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Reg No. 40195
Surbhi



NAME : RAHUL DUGGAL
AGE/SEX : 33Y/M
REF BY : BANK OF BARODA
DATE : 08.04.2023

HbA1C

Test name	results	units
HbA1c{GLYCOSYLATED HEMOGLOBIN}BLOOD	5.38	%

Interpretation

As per American Diabetes association {ADA}	
Reference Group	HbA1c in %
Non diabetic adults >=18 years	4.0 - 6.0
At risk	> = 6.0 to < = 6.5
Diagnosing diabetes	>6.5
Therapeutic goals for glycemc Control	Adults Goal of therapy : < 7.0 Action suggested : >8.0

Note : 1. Since HbA1c reflects long term fluctuations in the blood glucose concentration, a diabetic patient who is recently under good control may still have a high concentration of HbA1c. Converse is true for a diabetic previously under good control but now poorly controlled.

2. target goals of < 7.0 % may be beneficial in patients with short duration of diabetes , long life expectancy and no significant cardiovascular disease .In patient with significant complications of diabetes , limited life expectancy or extensive co-morbid conditions, targeting a goal of < 7.0 % may not be appropriate.

Comments

HbA1c provides an index of average blood glucose level over the past 8-12 weeks & is a much better indicator of long term glycemc as compared to blood & urinary glucose determinations.

ADA criteria for correlation between HbA1c & Mean plasma glucose levels

HbA1c %	Mean plasma glucose {mg/dl }	HbA1c %	Mean plasma glucose {mg/dl }
5	98	9	212
6	126	10	240
7	154	11	269
8	183	12	298

Dr. SURBHI GOYAL
 M.B.B.S. M.D. (PATHOLOGY)
 CONSULTANT PATHOLOGIST
 Reg No. 40195

Surbhi



NAME : RAHUL DUGGAL
AGE/SEX : 33Y/M
REF BY : BANK OF BARODA
DATE : 08.04.2023

TEST ASKED : -T3,T4,TSH

<u>TEST NAME</u>	<u>RESULT</u>	<u>NORMAL RANGE</u>
T3	0.845 ng/ml	0.70-2.04 ng/ml
T4	6.48 µg/dl	4.6-10.5 µg/dl
TSH	1.240 µIU/ml	0.40-4.20µIU/ml

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Reg. No. 40195

Surbhi



NAME : RAHUL DUGGAL
AGE/SEX : 33Y/M
REF BY : BANK OF BARODA
DATE : 08.04.2023

• URINE EXAMINATION REPORT

A. PHYSICAL EXAMINATION	
QUANTITY	30ml
COLOUR	YELLOW
DEPOSIT	ABSENT
REACTION	ACIDIC
SECIFIC GRAVITY	1.020
B. CHEMICAL EXAMINATION	
UROBILINOGEN	NIL
BLOOD	NIL
PROTEIN	NIL
SUGAR	NIL
KETONE BODIES	NIL
BILIRUBIN	NIL
NITRITE	NIL
LEUKOCYTES	NIL
C. MICROSCOPIC EXAMINATION	
EPITHELIAL CELLS	0-1/hpf
PUS CELLS	2-4/hpf
R.B.C.	NIL
CRYSTALS	NIL
CAST	NIL

Recommendation:-

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Sushri

NAME : RAHUL DUGGAL
AGE/SEX : 33Y/M
REF BY : BANK OF BARODA
DATE : 08.04.2023

URINE EXAMINATION REPORT

DETERMINATION	NORMAL	RESULT
POST URINE SUGAR	NIL	NIL

***Recommendation:-**

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3. Test to be clinically correlated.
4. All card tests require confirmation by serology
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Dr. SURBHI GOYAL
M.B.B.S. M.D. (PATHOLOGY)
CONSULTANT PATHOLOGIST
Reg No. 40196

Surbhi



Name : RAHUL DUGGAL
Age/Sex : 33 Yrs/M
Date : 8.4.2023

X-ray Chest PA View

The cardiac size and shape is normal.

Both hilla are normal in size ,having equal density and bear normal relationship .

The lungs on either side shows equal translucency.

The peripheral vasculature is normal

The domes of the diaphragm is normal

The pleural spaces are normal.

CT ratio is normal.

R.K. Mittal
DR. R.K. MITTAL
M.B.B.S, M.D. (Chest Specialist)
M.B.B.S - M.D. (Chest)
17707 (PMC)
CONSULTANT PHYSICIAN

Dr. Sanjeev Kumar Mittal

MD, DNB, DM (Cardiology)
 Fellowship American College of Cardiology (FACC)
 Fellowship European Society of Cardiology (FESC)
 Fellowship of Society of Cardiovascular
 Angiography & Interventions, USA (FSCAI)
Senior Interventional Cardiologist

Dr. Reena Mittal

Anaesthesiologist
Pain Management Specialist



Dr SANJEEV

HEART CENTRE

Let's go for healthy heart

47-A (B-XX-894/2) Maya Nagar, Civil Lines, Ludhiana, Punjab (INDIA), Ph: 0161-2443344, E-mail: dr_smittal@yahoo.com,

NAME	RAHUL DUGGAL	AGE/SEX	33/MALE
REF .BY	LIFE LINE HOSPITAL	DATE	08/04/2023
DIAGNOSIS	CARDIAC EVALUATION		

ECHOCARDIOGRAPHY REPORT

MEASUREMENTS:**NORMAL VALUES**

Left Atrial dimension:	3.0	(1.9-4.0cm)
Aortic root dimension:	2.9	(2.0-3.7cm)
Aortic valve opening	2.2	
Left Ventricular end diastolic dimension	3.4	(3.8-5.6cm)
Left Ventricular end systolic dimension:	2.0	(2.0-4.0cm)
Interventricular septum thickness (end diastolic):	0.8	(0.6-1.2cm)
(end systolic):	1.3	
Left Ventricular posterior wall thickness (end diastolic)	0.7	(0.5-1.0cm)
(end systolic):	1.3	
Right ventricular dimension:	1.8	(0.7-2.6cm)
Right ventricular thickness:	Normal	(0.3-0.5cm)

INDICES OF LEFT VENTRICULAR FUNCTION

LV Ejection Fraction:	60	(55-70%)
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For all Investigations & in all emergencies,
 Please Contact: 97797-12871

- Coronary Angiography
- PTCA / Stenting
- Renal and Peripheral Angiography
- Pacemaker Implantation
- Natural Bypass Therapy (ECP Therapy)

- ECG
- ECHO
- TMT
- Holter
- Stress ECHO
- Advanced ECHO
- Strain rate Imaging
- Carotid Doppler

Dr. Sanjeev Kumar Mittal

MD, DNB, DM (Cardiology)
Fellowship American College of Cardiology (FACC)
Fellowship European Society of Cardiology (FESC)
Fellowship of Society of Cardiovascular
Angiography & Interventions, USA (FSCAI)
Senior Interventional Cardiologist

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HEART CENTRE

Let's go for healthy heart

47-A (B-XX-894/2) Maya Nagar, Civil Lines, Ludhiana, Punjab (INDIA), Ph: 0161-2443344, E-mail: dr_smittal@yahoo.com,

IMAGING:

2-D imaging in PLAX, SAX and Apical views revealed normal LV size and normal LV contractility. RA/RV are normal in size. Mitral valve opening is normal. No evidence of Mitral valve prolapse is seen. Aortic valve has three cusps and its opening is not restricted. Pulmonary and tricuspid valves are structurally normal. Interatrial and interventricular septums are intact. No intracardiac mass or thrombus is seen. No pericardial pathology is observed. LV ejection fraction is approximately 60%.

DOPPLER: PULSE WAVE, CONTINUOUS WAVE & COLOR FLOW MAPPING

MITRAL VALVE	:	E=1.00 m/sec	A= 0.87 m/s	A<E	No MR
AORTIC VALVE	:	1.10 m/sec			No AR
TRICUSPID VALVE	:	E= 0.55 m/sec	A=0.70 m/s		No TR
PULMONARY VALVE	:	0.97 m/sec			No PR
TISSUE DOPPLER IMAGING:		E'= 0.11 m/s	E/E'= 9.26		

IMPRESSION: Normal Cardiac Chamber dimensions
Normal LV systolic function (LVEF 60%)
No MR. No TR. No PR. No AS/AR.
No clot/ veg./Pericardial effusion.

Dr. Sanjeev Kumar Mittal
DM Cardiology, FACC, FSCAI, FESC
Dr. Sanjeev Kumar Mittal
MD, DM Cardiology, DNB Cardiology
Regd. No. 30318

For all Investigations & in all emergencies,
Please Contact: 97797-12871

- Coronary Angiography
- PTCA / Stenting
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- Natural Bypass Therapy (ECP Therapy)
- ECG
- ECHO
- TMT
- Holter
- Stress ECHO
- Advanced ECHO
- Strain rate Imaging
- Carotid Doppler

Images report: 6 images

GE Healthcare Hospital
Ultrasound Laboratory

Name Rahul Duggal

Date 08/04/2023

Image 1

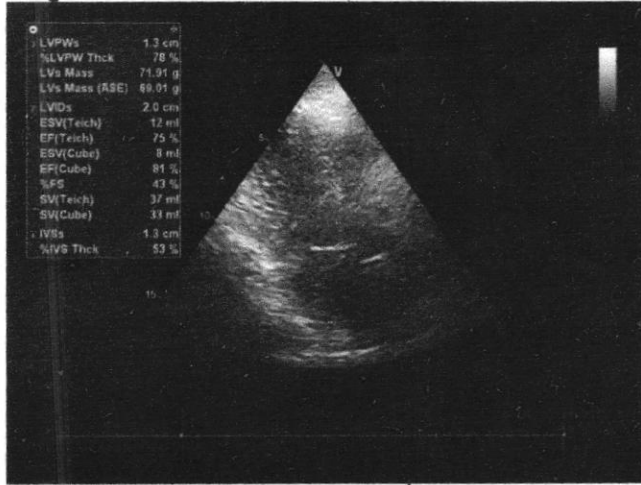


Image 2

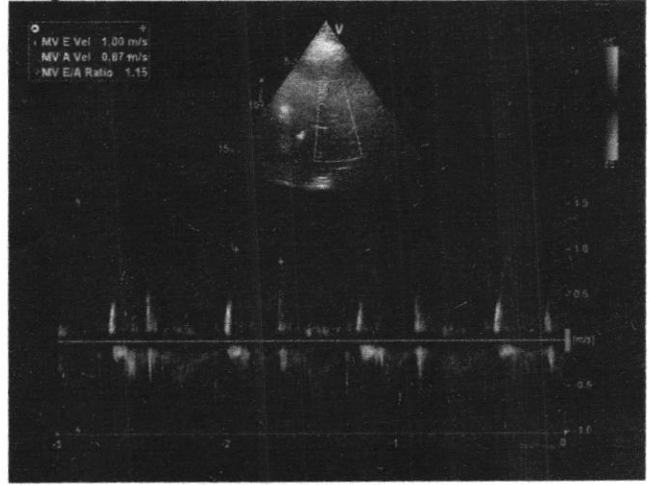


Image 3

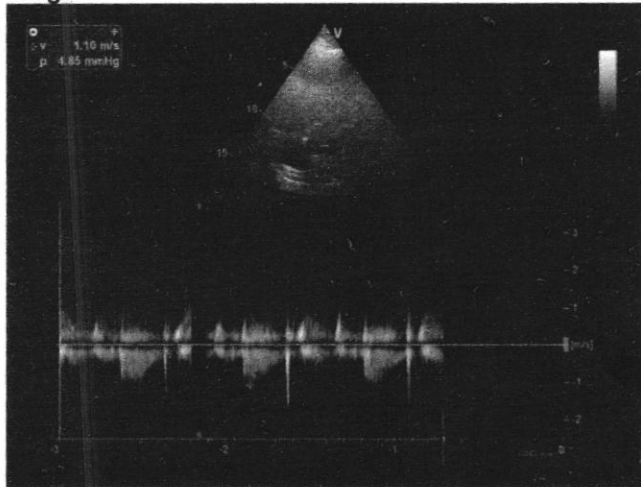


Image 4

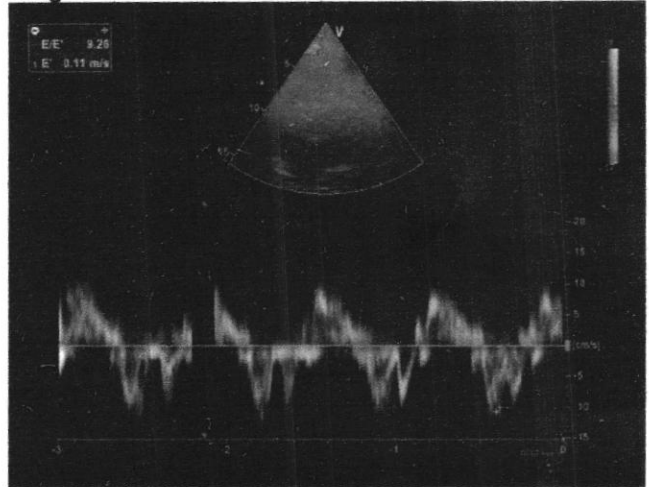


Image 5

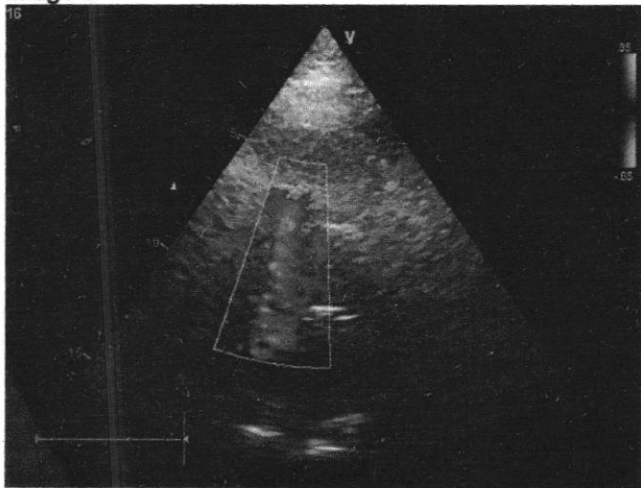
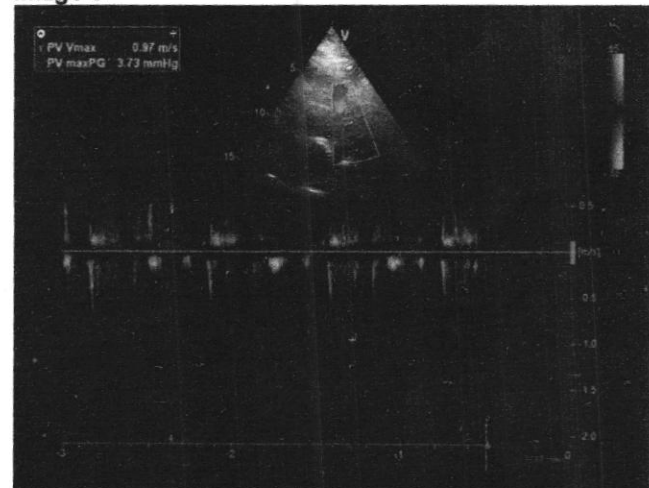


Image 6





Patient's Name: RAHUL DUGGAL

DATE : 08/04/2023

Age/Sex : 33 Yrs/M

ULTRASONOGRAPHY OF ABDOMEN

LIVER : Liver is normal in size & shape. Hepatic bleary radicals are normally outlined. Portal vein is normal in caliber. No evidence of liver abscess. Movements of diaphragm are not restricted. No evidence of secondaries. CBD is of normal calibre.

GALL BLADDER : Gall Bladder is distended. Walls are normal. Lumen shows normal echo.

PANCREAS : Pancreas is normal in size, shape and echotexture. No evidence of any collection in lesser sac.

SPLEEN : Spleen is normal in size, shape and echotexture. Calibre splenic vein at hilum is WNL.

RIGHT KIDNEY : Right kidney is normal in size, shape & outline. Cortical thickness is WNL. Pelvi-calyceal system is normal. There is no evidence of calculus. No ackpressure, changes or SOL. Corticomedullary differentiation is well maintained.

LEFT KIDNEY : Left kidney is normal in size & shape. Cortical thickness is WNL. Pelvi-calyceal system is normal. There is no evidence calculus. No backpressure changes or S.O.L.. Corticomedullary differentiation is well maintained.

URETERS :- Both ureters are normal and not dilated.

URINARY BLADDER :- UB is seen filled stage. Lumen is echo free. Walls are normal.

PROSTATE :- is normal in size. No focal lesion is seen.

No free fluid seen in peritoneal cavity

IMPRESSION: NORMAL U.S.G.

DR.R.S. MAHESHWARI

(ULTRASONOLOGIST) This is only professional opinion and the diagnosis. It should be correlated clinically & with either investigation to come to final diagnosis.

Ludhiana-141003
Reg No DAA/LDH/11/345



