

# FITNESS CERTIFICATE

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Name: Arvind Singh Chouhan.  
 Date of Birth: 01/06/1995 Age: 28 Blood Group: O +ve  
 Sex: Male  Female  | Marital Status: Married  Unmarried   
 Address: Malkan NO. 132, Ward No 07, Dev Narayan mandla ke pass, Teh sitamau, Mahuwa, Mandla, Madhya Pradesh  
 Any allergy / Disability / Pre-existing disease: NO Date: 24/06/23

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Height <u>173</u> Cms.	Weight <u>59</u> Kgs.	Near Vision: <u>L.E. 6/6 R.E. 6/6</u>	Hearing Left Ear: <u>(N)</u> Right Ear: <u>(N)</u>
BP: <u>110/70</u> mm/Hg	Pulse Rate: <u>90</u> /min	Colour Vision: <u>(N)</u>	Resp. Rate: <u>16</u> /min
CVS: <u>S1S2 (N)</u>	RS: <u>AEBeclear</u>	Abdomen: <u>soft</u>	

Any other Findings: NO

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I Dr.: Pranav Patel  
 hereby certify that I have examined Mr./Ms. Arvind Singh Chouhan.  
 on 24/06/23 and find him **FIT / UNFIT** for employment.  
 Remarks if unfit: \_\_\_\_\_  
**DR. PRANAV PATEL**  
 M.D. PHYSICIAN  
 G-71382  
 FELLOWSHIP IN MEDICAL EMERGENCY  
 Consultant Physician  
 Signature & Seal: [Signature] Signature of Candidate: \_\_\_\_\_ Address / Tel No. \_\_\_\_\_

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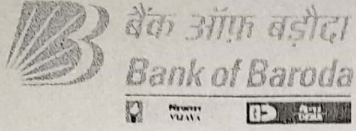
I declare that the above information is true and correct to the best of my knowledge and I am not suffering from any disease / illness, the presence of which I have not revealed. I fully understand that any misrepresentation of this declaration could lead to the termination of my offer / appointment. 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: 24/06/23





नाम  
Name आनन्द सिंह चौहान  
ANAND SINGH CHOUHAN

कर्मचारी कट क्र  
E.C. No. 181187



धारक के हस्ताक्षर  
Signature Holder's

जाहीरता प्राधिकारी  
Issuing Authority



भारत सरकार  
Government of India



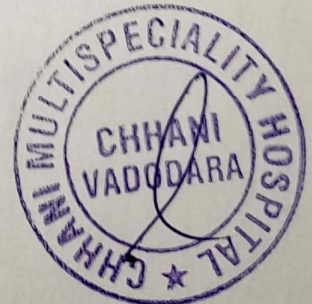
Issue Date: 19/09/2012



आनंद सिंह चौहान  
Anand Singh Chouhan  
जन्म तारीख / DOB: 01/06/1995  
पुरुष / Male

6297 7088 6290

मारो आधार, मारी ओजप



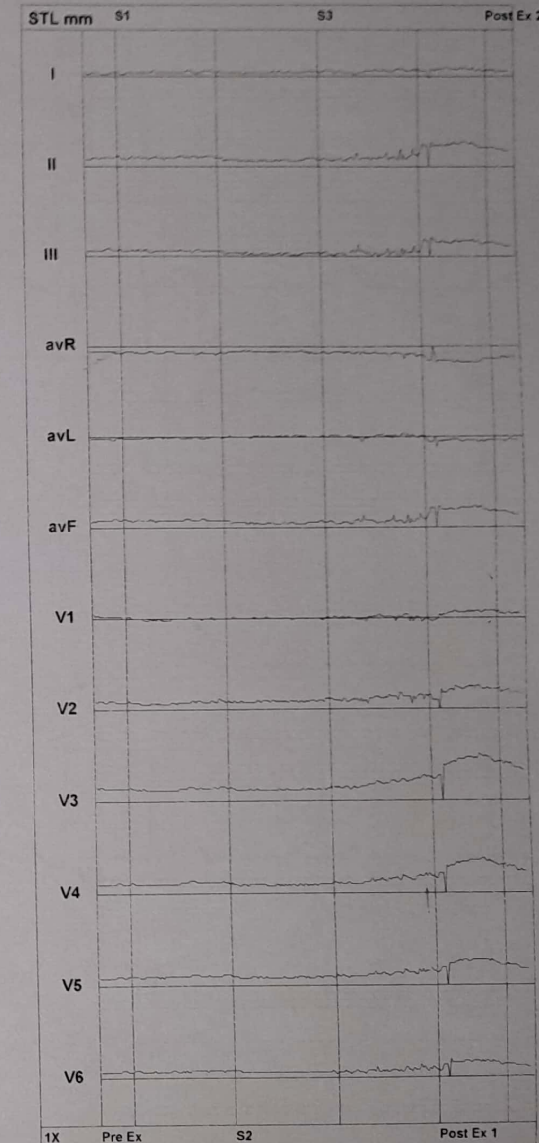
97 ANAND SINGH CHOUHAN  
28 Yrs/ M Kg / Ht- cms Ref. No.:

Date: 24-06-2023 Ref By:  
Time: 10:17 AM Protocol: Bruce

Summary

History:  
Medication:

Stage	Stg Time min sec	Speed mph	Grade %	METs	HR bpm	BP mmHg	RPP	PVCs
Pre Ex				1	61	120/80	73	
Supine				1	75	120/80	90	
Standing				1	73	120/80	88	
Hyp Vent				1	79	120/80	95	
S1	03:00	1.7	10.0	4.8	116	120/80	139	
S2	03:00	2.5	12.0	6.9	143	130/90	186	
Peak Ex	03:00	3.4	14.0	9.5	174	140/100	244	
Post Ex 1	02:00			1	128	135/90	173	
Post Ex 2	00:51			1	117	125/80	146	
Finish				1	111	125/80	139	



**Findings:** Exercise Time : 09:00 mins  
 Max HR attained : 174 bpm 90 % of Target 192 bpm  
 Max BP : 140/100mmHg  
 Max Workload attained : 9.5 METs ( Good Effort Tolerance )  
 Reason for Test Termination: Patient Completed Test

No significant ST segment changes noted during exercixe or recovery stages.  
 No Angina / Arrhythmia / S3 / Murmur  
 Final Impression : Test is negative for inducible ischaemia.



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 Consultant Physician

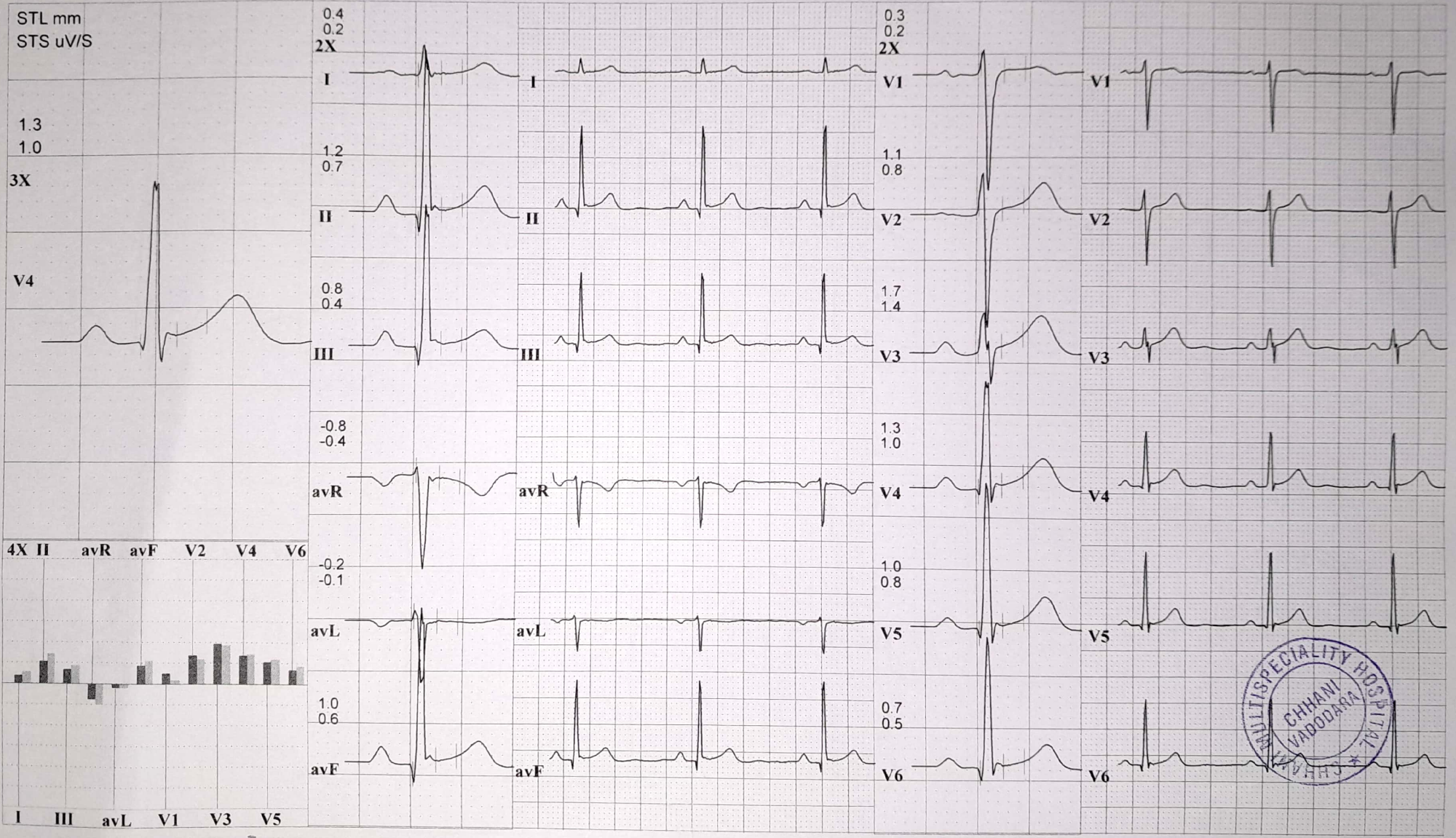


97 ANAND SINGH CHOUHAN  
28 Yrs/ M Kg/ Ht- cms Ref.No.:  
Date: 24-06-2023 Time: 10:17 AM

Speed: --- mph Hr: 75 Target Hr: 39 % of 192 Filter: 0.1 - 100 Hz Gain: 10 mm/mV  
Grade: --- % Mets: 1 Ex Time: --- min:sec BLC: On Sweep: 25 mm/s  
Protocol: Bruce BP: 120/80 mmHg Curr Time: 00:08 NotchOff Median Sweep 25 mm/s

Linked Medians  
Pre Ex

Post J.79 mS



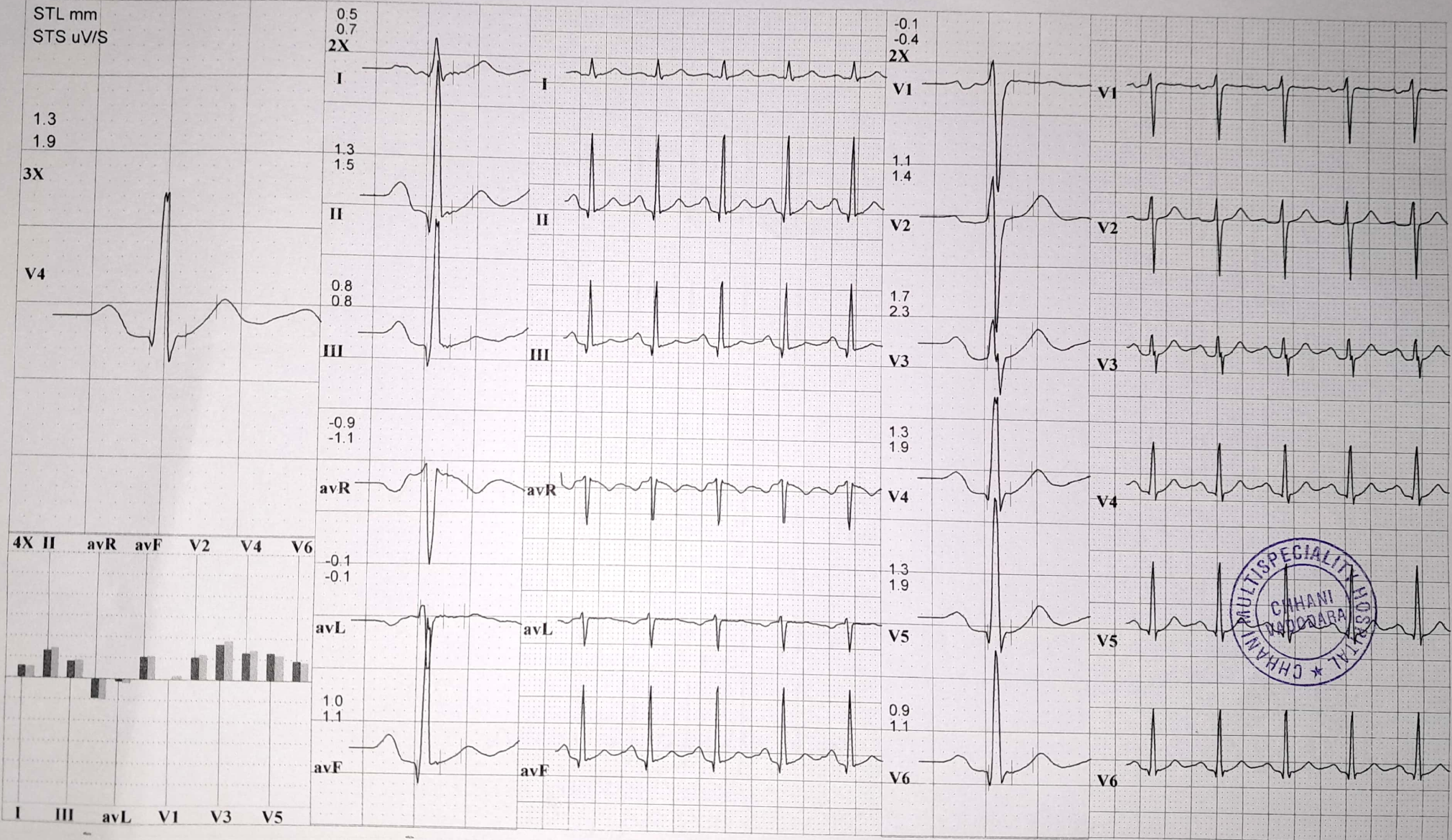


97 ANAND SINGH CHOUHAN  
28 Yrs/ M Kg / Ht- cms Ref.No.:  
Date: 24-06-2023 Time: 10:17 AM

Speed: 1.7 mph Hr: 116 Target Hr: 60 % of 192 Filter: 0.1 - 100 Hz Gain: 10 mm/mV  
Grade: 10 % Mets: 4.8 Ex Time: 03:00 BLC: On Sweep: 25 mm/S  
Protocol: Bruce BP: 120/80 mmHg Curr Time: 03:47 NotchOff Median Sweep 25 mm/S

Linked Medians  
S1

Post J: 80 mS



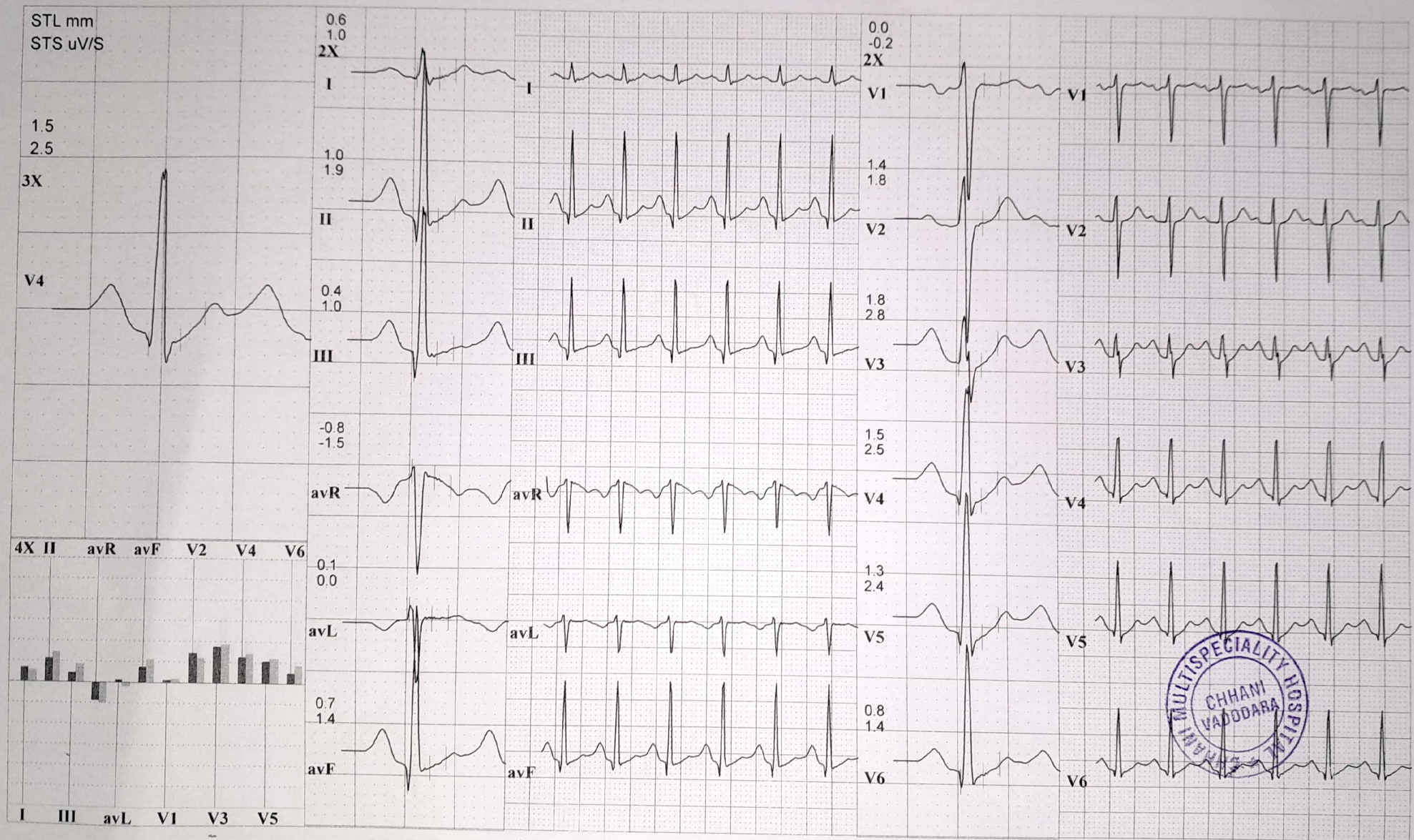


97 ANAND SINGH CHOUHAN  
28 Yrs/M Kg/ Ht- cms Ref.No.:  
Date: 24-06-2023 Time: 10:17 AM

Speed: 2.5 mph Hr: 143 Target Hr: 74 % of 192 Filter: 0.1 - 100 Hz Gain: 10 mm/mV  
Grade: 12 % Mets: 6.9 Ex Time: 06:00 BLC: On Sweep: 25 mm/S  
Protocol: Bruce BP: 130/90 mmHg Curr Time: 06:47 NotchOff Median Sweep 25 mm/S

Linked Medians  
S2

Post J:66 mS



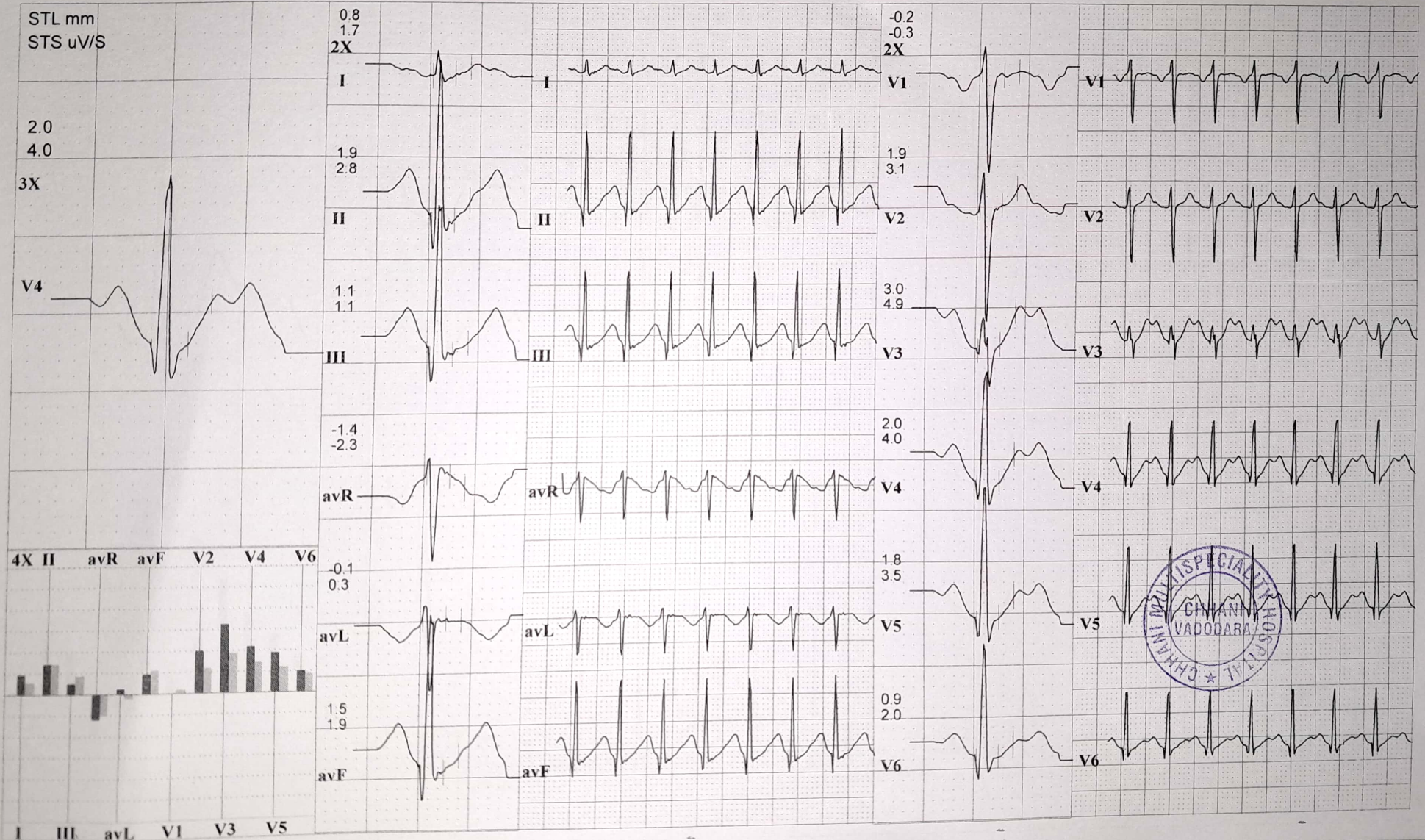


97 ANAND SINGH CHOUHAN  
28 Yrs/ M Kg / Ht- cms Ref.No.:  
Date: 24-06-2023 Time: 10:17 AM

Speed: 3.4 mph Hr: 174 Target Hr: 90 % of 192 Filter: 0.1 - 100 Hz Gain: 10 mm/mV  
Grade: 14 % Mets: 9.5 Ex Time: 09:00 BLC: On Sweep: 25 mm/S  
Protocol: Bruce BP: 140/100 mmHg Curr Time: 09:47 NotchOff Median Sweep 25 mm/S

Linked Medians  
Peak Ex

Post J:60 mS



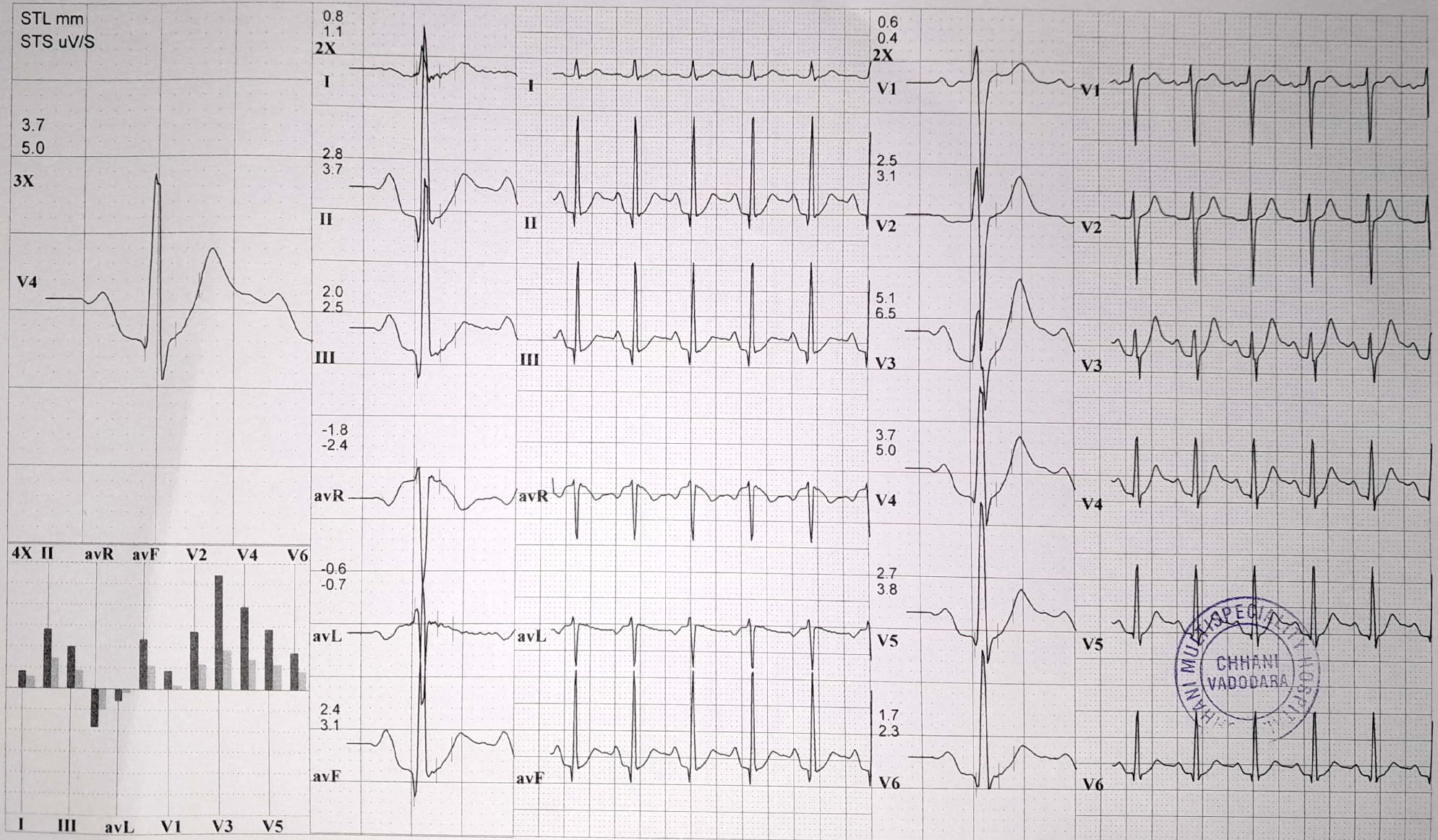


97 ANAND SINGH CHOUHAN  
28 Yrs/ M Kg/ Ht- cms Ref.No.:  
Date: 24-06-2023 Time: 10:17 AM

Speed: --- mph Hr: 128 Target Hr: 66 % of 192 Filter: 0.1 - 100 Hz Gain: 10 mm/mV  
Grade: --- % Mets: 1 Ex Time: 09:00 BLC: On Sweep: 25 mm/S  
Protocol: Bruce BP: 135/90 mmHg Curr Time: 11:47 NotchOff Median Sweep 25 mm/S

Linked Medians  
Post Ex 1

Post J:60 mS



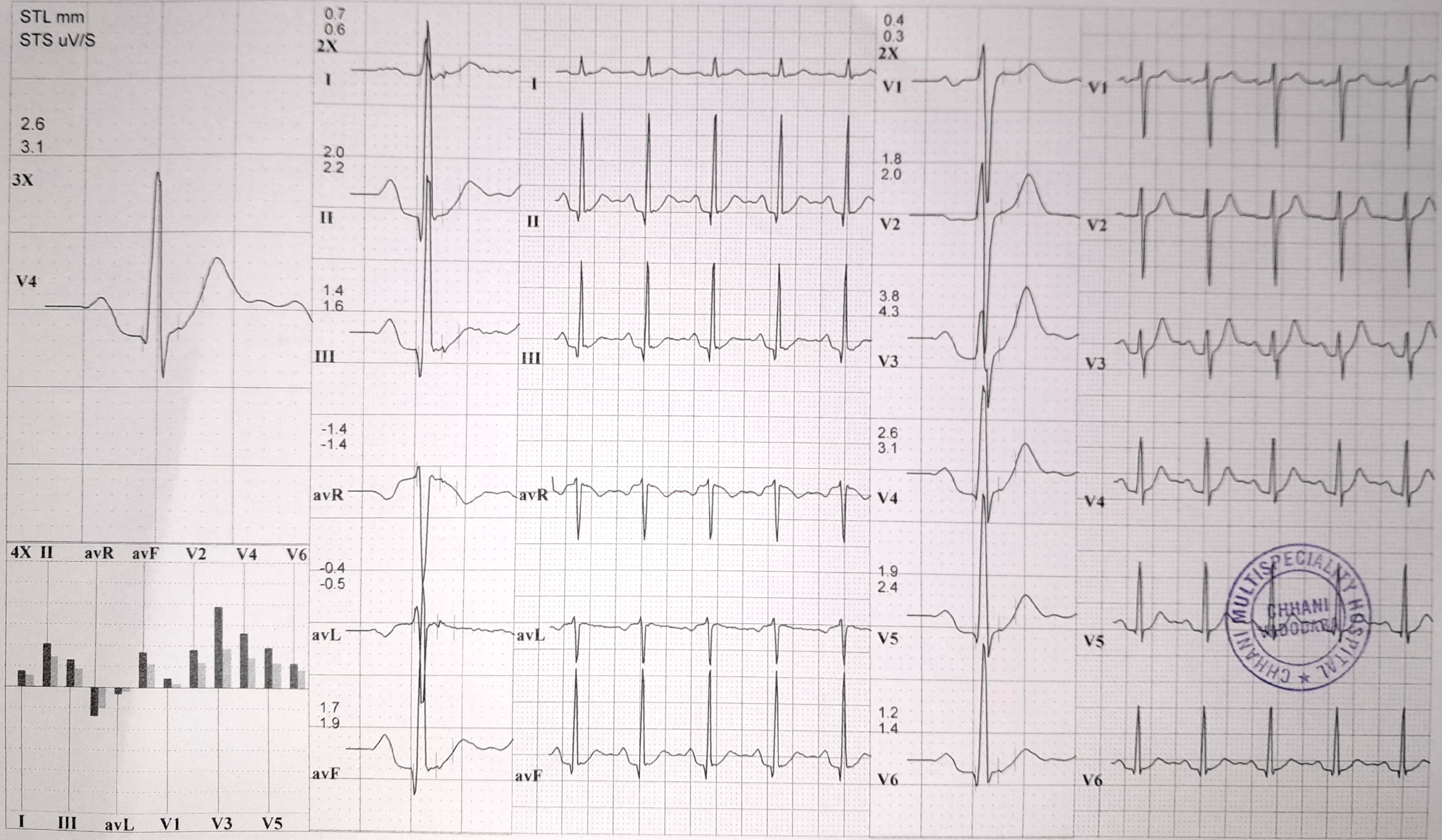


97 ANAND SINGH CHOUHAN  
28 Yrs/ M Kg / Ht- cms Ref.No.:  
Date: 24-06-2023 Time: 10:17 AM

Speed: --- mph Hr: 117 Target Hr: 60 % of 192 Filter: 0.1 - 100 Hz Gain: 10 mm/mV  
Grade: --- % Mets: 1 Ex Time: 09:00 BLC: On Sweep: 25 mm/s  
Protocol: Bruce BP: 125/80 mmHg Curr Time: 12:38 NotchOff Median Sweep/25 mm/s

Linked Medians  
Post Ex 2

Post J:64 mS



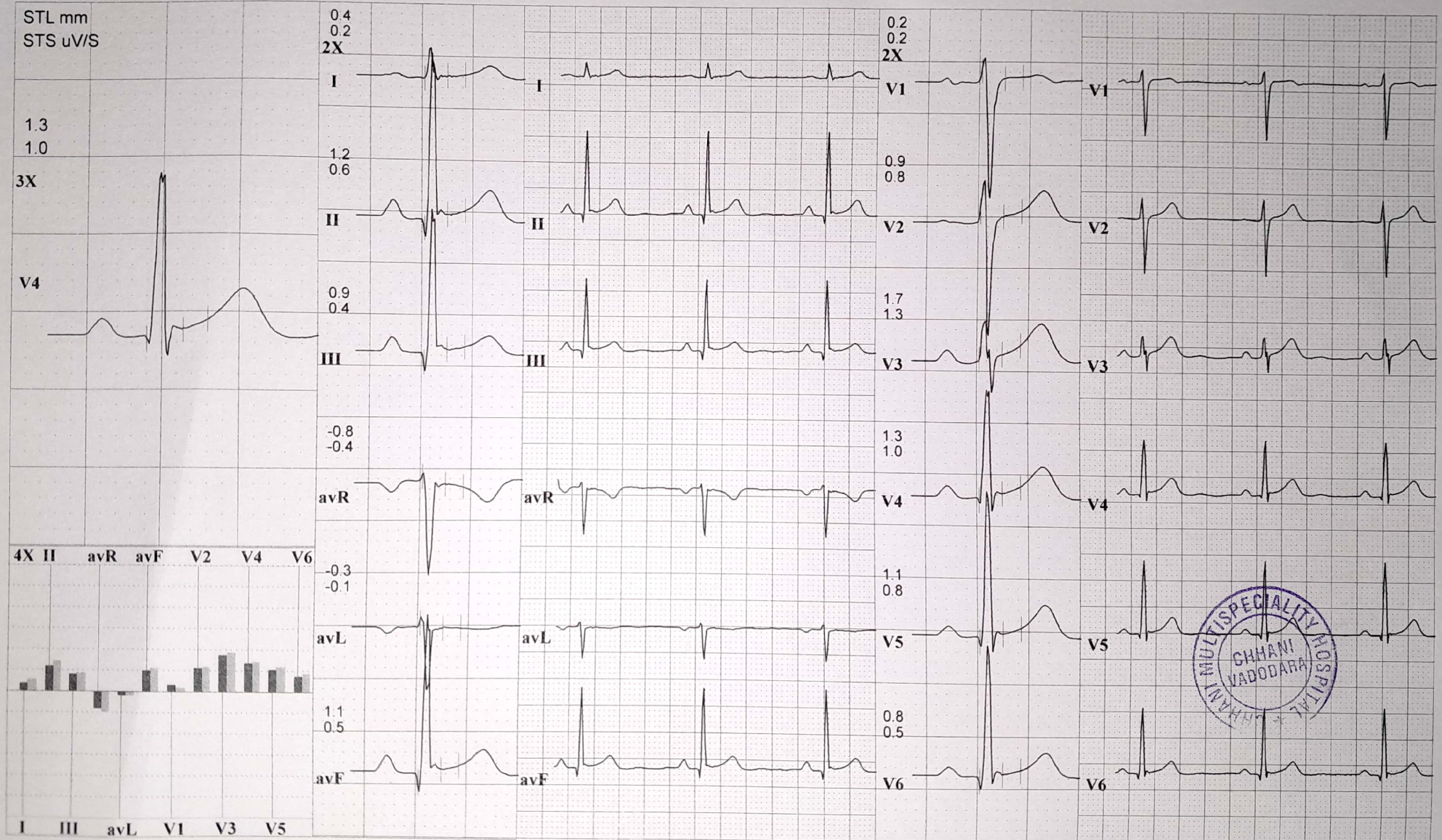


97 ANAND SINGH CHOUHAN  
28 Yrs/ M Kg / Ht- cms Ref.No.:  
Date: 24-06-2023 Time: 10:17 AM

Speed: --- mph Hr: 76 Target Hr: 39 % of 192 Filter: 0.1 - 100 Hz Gain: 10 mm/mV  
Grade: --- % Mets: 1 Ex Time: --- min:sec BLC: On Sweep: 25 mm/S  
Protocol: Bruce BP: 120/80 mmHg Curr Time: 00:08 NotchOff Median Sweep 25 mm/S

Linked Medians  
Pre Ex  
Supine

Post J: 67 mS



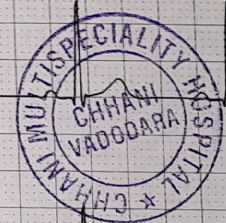
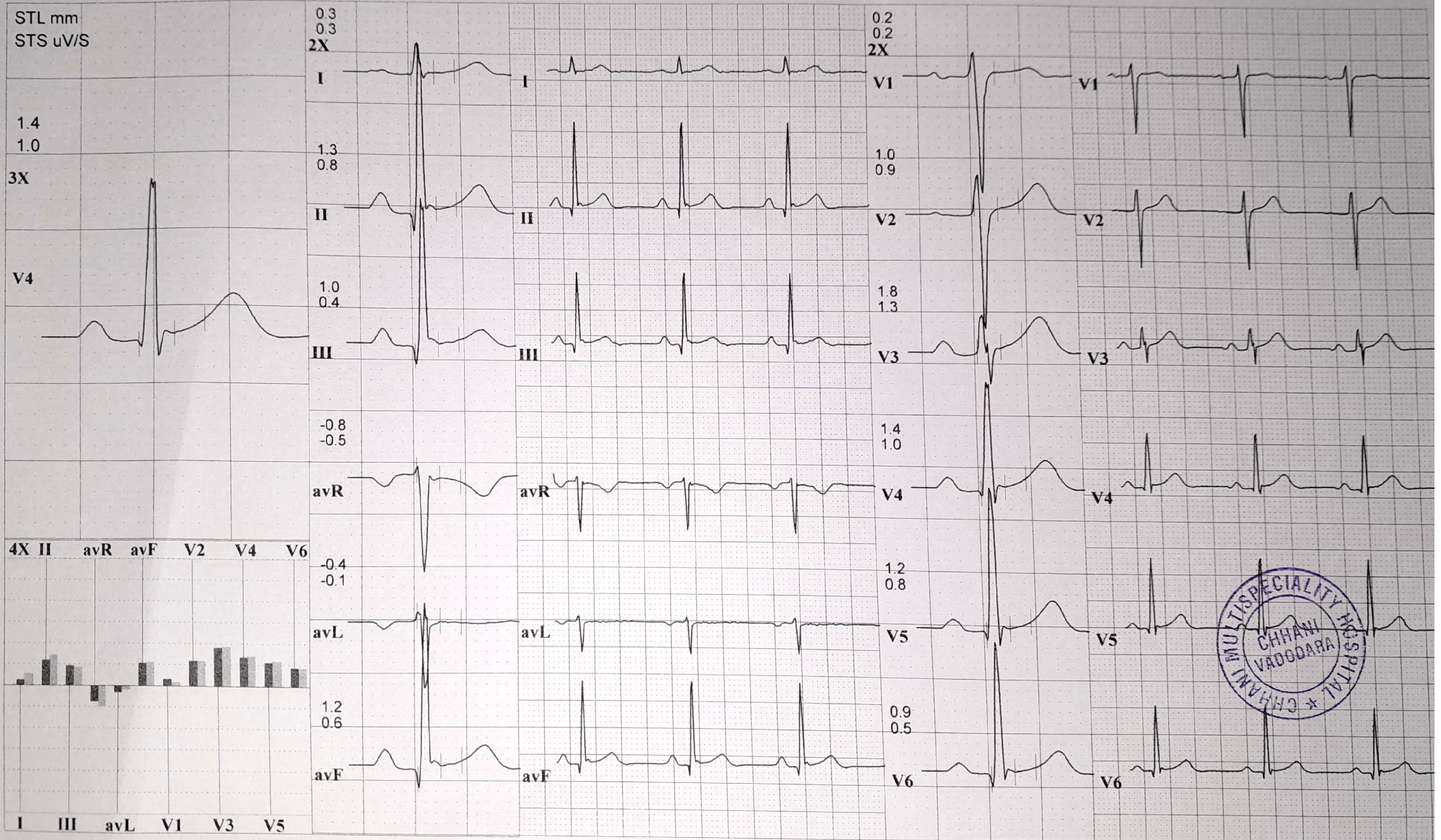


97 ANAND SINGH CHOUHAN  
28 Yrs/ M Kg / Ht- cms Ref.No.:  
Date: 24-06-2023 Time: 10:17 AM

Speed: --- mph Hr: 73 Target Hr: 38 % of 192 Filter: 0.1 - 100 Hz Gain: 10 mm/mV  
Grade: --- % Mets: 1 Ex Time: --- min:sec BLC: On Sweep: 25 mm/S  
Protocol: Bruce BP: 120/80 mmHg Curr Time: 00:27 NotchOff Median Sweep 25 mm/S

Linked Medians  
Pre Ex  
Standing

Post J: 80 mS



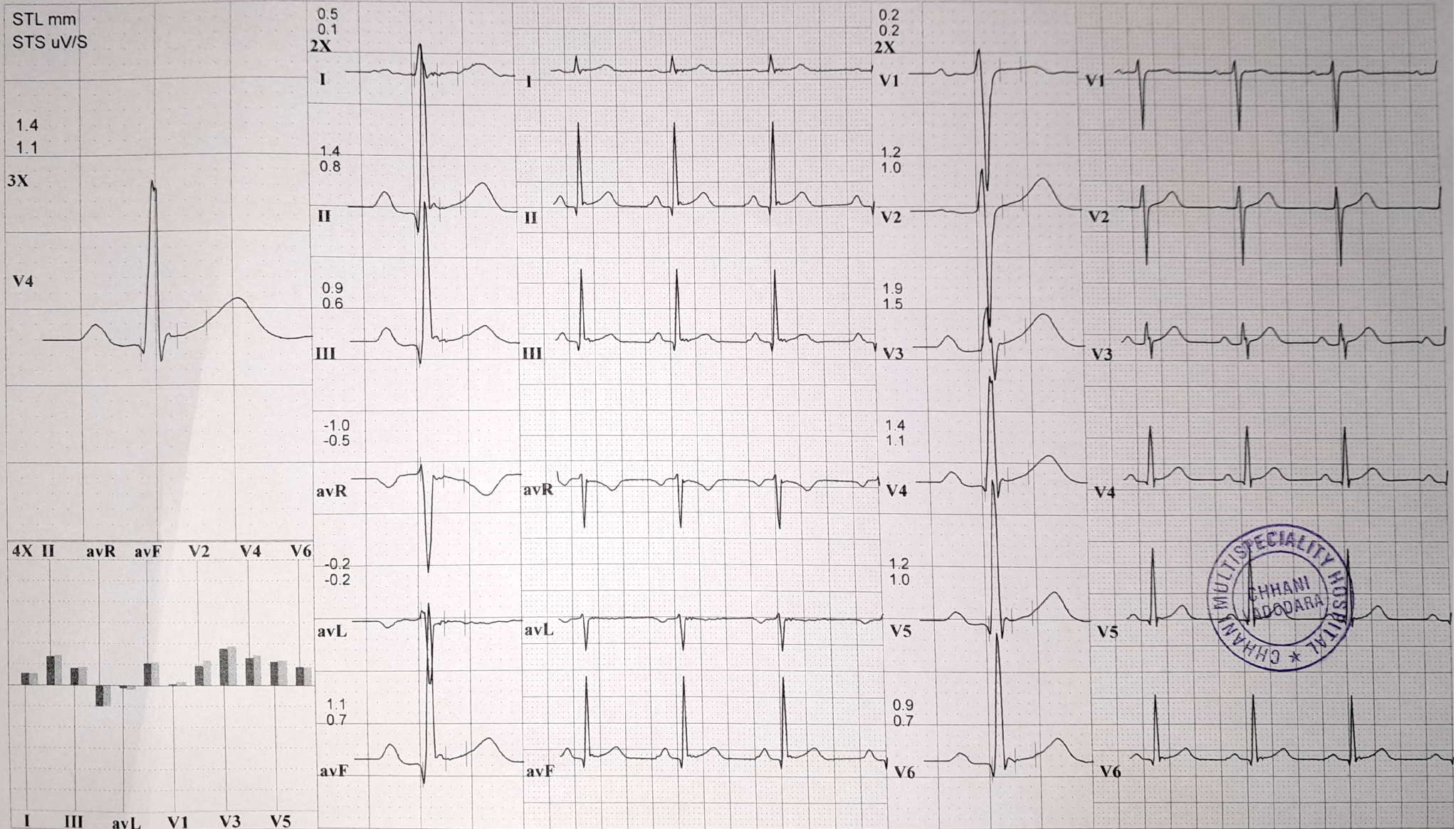


97 ANAND SINGH CHOUHAN  
28 Yrs/ M Kg / Ht- cms Ref.No.:  
Date: 24-06-2023 Time: 10:17 AM

Speed: --- mph Hr: 79 Target Hr: 41 % of 192 Filter: 0.1 - 100 Hz Gain: 10 mm/mV  
Grade: --- % Mets: 1 Ex Time: --- min:sec BLC: On Sweep: 25 mm/S  
Protocol: Bruce BP: 120/80 mmHg Curr Time: 00:47 NotchOff Median Sweep 25 mm/S

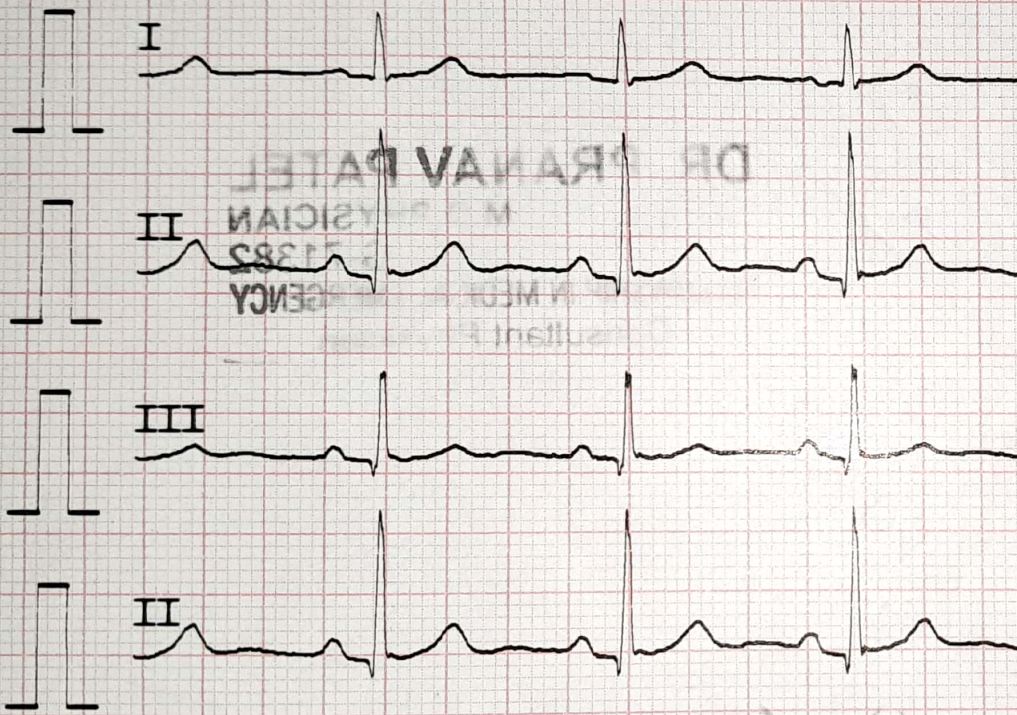
Linked Medians  
Pre Ex  
Hyp Vent

Post J: 79 mS



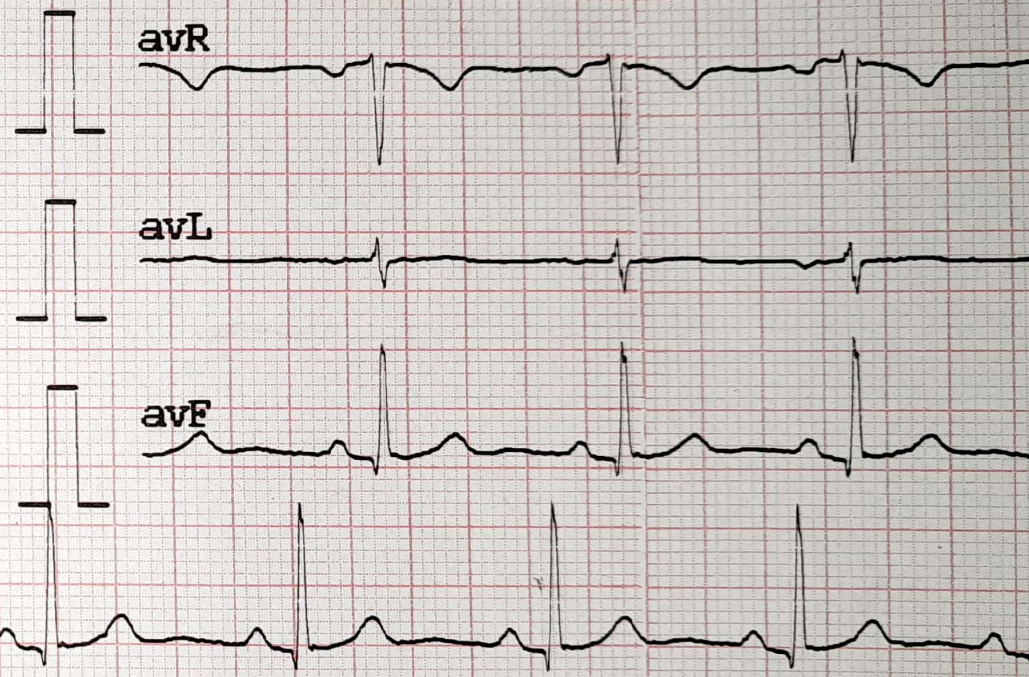


25mm/s 10mm/mV



AC50Hz + DFT

25mm/s 10mm/mV



AC50Hz + DFT



25mm/s 10mm/mV

V1

V2

V3

25mm/s 10mm/mV

V4

V5

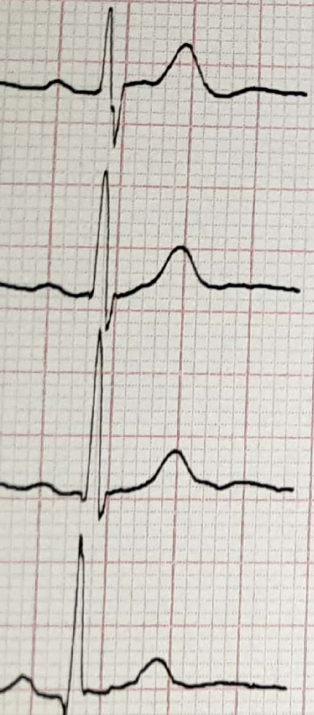
V6

AC50Hz + DFT

AC50Hz + DFT

Date  
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Date : 2023-06-24 08:55:53  
ID : 0000009  
Name : Anand Singh  
Sex :  
Age :  
Weight :  
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*[Signature]*

<<Conclusion>>  
Normal Sinus Rhythm  
Cardiac electric axis normal

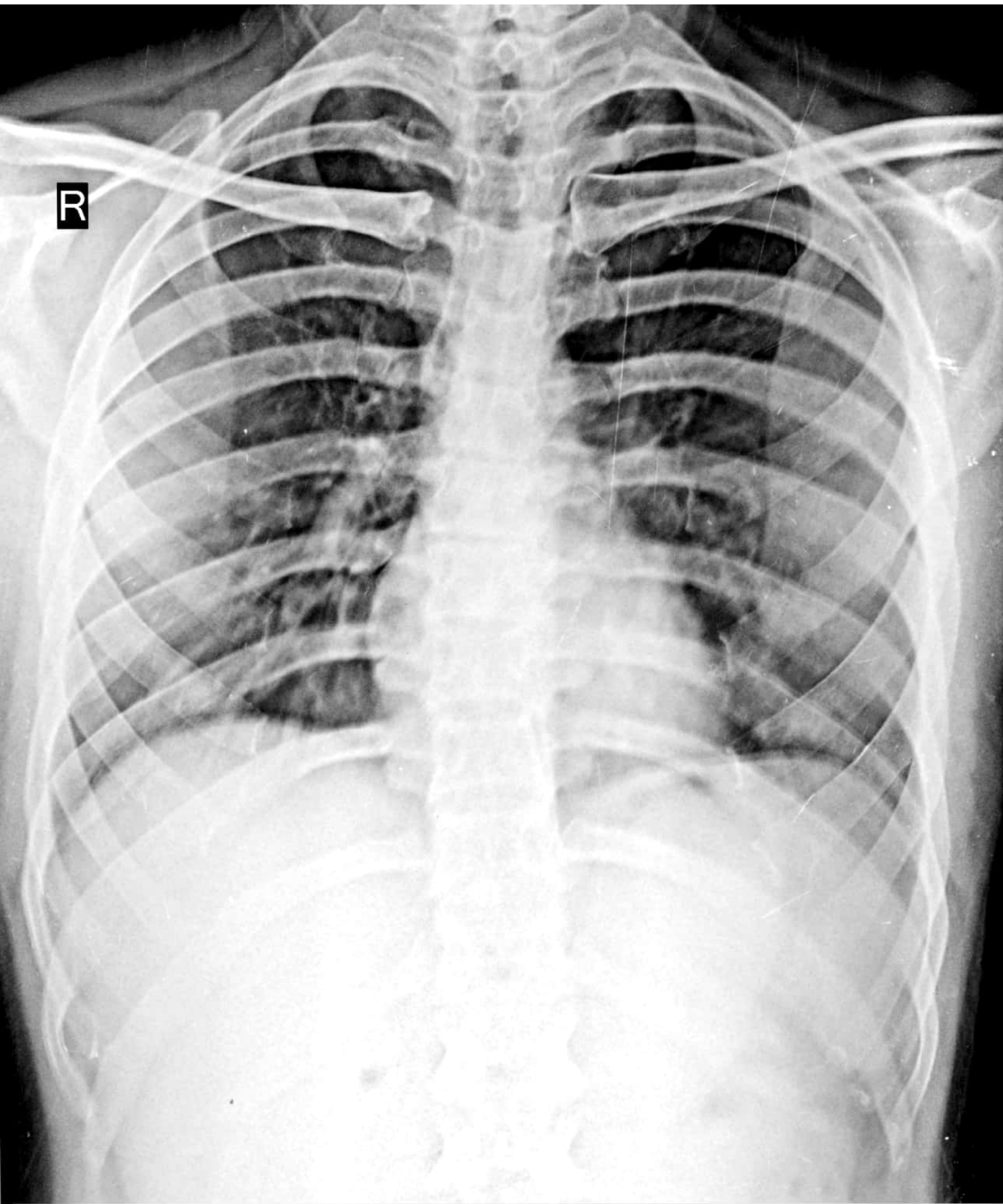
**DR PRANAV PATEL**  
M.D. PHYSICIAN  
FELLOWSHIP IN MEDICAL EMERGENCY  
Consultant Physician  
G-71382

<<Report need physician confirm>>

*[Signature]*







**ANAND SING CHAUHAN 28Y      CHEST PA 24-06-2023**  
**SUNNY DIGITAL X-RAY SERVICES 8758530074**



Pt. Name : Anandsingh Chauhan

Registered On : 24 Jun, 2023 10:50 AM

Age/Gender : 28 Years Male

Collected On : 24 Jun, 2023 10:54 AM

Patient ID : 1289

Reported On : 24 Jun, 2023 02:09 PM

Ref. By : Dr. BOB

MO : 8875376755

Address :

**Complete Blood Count (CBC)**

Investigation	Observed Value	Biological Reference Interval	Unit
<b>HEMOGLOBIN</b>			
Hemoglobin (Hb)	13.8	13 - 17	g/dL
Total RBC Count	5.05	4.5 - 5.5	mill/cumm
<b>BLOOD INDICES</b>			
Packed Cell Volume (PCV)	42.7	40.7 - 50.3	%
Mean Corpuscular Volume(MCV)	84.55	78.2 - 97.90	fL
Mean Corpuscular Hemoglobin (MCH)	27.33	27 - 33	pg/cell
Mean Corpuscular Hemoglobin Concentration (MCHC)	32.32	33 - 36	g/dL
Red cell Distribution Width (RDW)	14.0	11.5 - 16	%
<b>WBC COUNT</b>			
Total WBC Count	6500	4000 - 11000	cumm
<b>DIFFERENTIAL WBC COUNT</b>			
Neutrophils	50	40 - 70	%
Lymphocytes	45	20 - 40	
Eosinophils	02	1 - 6	%
Monocytes	03	2 - 6	%
Basophils	00		
Erythrocyte Sedimentation Rate (ESR)	10	0 - 22	mm/hr
<b>PLATELET COUNT</b>			
Platelet Count	287000	150000 - 450000	/cumm

DR.ASHISH JAWARKAR  
M.D.(Pathology)

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+91 7874106476, +91 9099685928 E-mail barodapathlabs23@gmail.com





Pt. Name : Anandsingh Chauhan

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Age/Gender : 28 Years Male

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**BLOOD GROUP****Blood Group, ABO & RH Typing**

Investigation	Observed Value	Biological Reference Interval	Unit
<b>BLOOD GROUP, ABO &amp; RH TYPING</b>			
ABO Group	O		
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 :

**HBA1C**

Investigation	Observed Value	Biological Reference Interval	Unit
Glycosylated Hemoglobin(GHb/HbA1c)	4.99	4.0 - 6.0	mg/dL
Mean Blood Glucose	96.51	90 - 210 90-120 Excellent Control 121-150 Good Control 151-180 Average Control 181-210 Action Suggested >210 Panic Value	mg/dL

**Comment**

- 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.
- 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.
- 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.

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**Ref. By** : Dr. BOB**MO** : 8875376755**Address** :**LIPID PROFILE****Lipid Profile**

Investigation	Observed Value	Biological Reference Interval	Unit
<b>CHOLESTEROL</b>			
Total Cholesterol	159	150 - 199	mg/dL
Serum Triglycerides	139	0 - 150	mg/dL
HDL Cholesterol	41	35 - 79	mg/dL
LDL Cholesterol	90.20	0 - 100	mg/dL
VLDL Cholesterol	27.80	0 - 30	mg/dL
Non-HDL cholesterol	118.00	- >130 Optimal	mg/dL
<b>RATIO</b>			
LDL HDL Cholesterol Ratio	2.20	1.5 - 3.5	
Total-HDL Cholesterol Ratio	3.88	3.5 - 5	
Triglycerides HDL Ratio	3.39		

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**Patient ID** : 1289

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**Ref. By** : Dr. BOB**MO** : 8875376755**Address** :

Investigation	Observed Value	Biological Reference Interval	Unit
<b>Total Cholesterol (mg/dL)</b>	<b>HDL Cholesterol (mg/dL)</b>	<b>LDL Cholesterol (mg/dL)</b>	<b>Triglycerides (mg/dL)</b>
Desirable <200  Borderline High 200-239 High >240	Low <40  High <60	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

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Ref. By : Dr. BOB

MO : 8875376755

Address :



## LFT

## Liver Function Test (LFT)

Investigation	Observed Value	Biological Reference Interval	Unit
<b>BILLIRUBIN</b>			
Total Bilirubin	1.17	0 - 1.2	mg/dL
Direct Bilirubin	<b>0.67</b>	0.0 - 0.25	mg/dL
Indirect Bilirubin	0.50	0.2 - 1	mg/dL
<b>LIVER ENZYMES</b>			
SGPT (ALT)	24	0 - 40	IU/L
SGOT (AST)	20	0 - 37	U/L
Alkaline Phosphatase	79	60 - 320	U/L
<b>SERUM PROTEINS</b>			
Total Serum Protein	6.76	6.3 - 7.9	g/dL
Serum Albumin	3.57	3.5 - 5.5	g/dL
Serum Globulin	3.19	2.5 - 3.5	g/dL
A/G Ratio	1.12	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.

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**Age/Gender** : 28 Years Male

Collected On : 24 Jun, 2023 10:54 AM

**Patient ID** : 1289

Reported On : 24 Jun, 2023 02:09 PM

**Ref. By** : Dr. BOB**MO** : 8875376755**Address** :**THYROID SERUM HORMONS****Thyroid Function Test (TFT)**

Investigation	Observed Value	Biological Reference Interval	Unit
<b>THYROID SERUM HORMONS</b>			
Serum Triiodothyronine (T3)	0.85	0.6 - 1.81	ng/mL
Serum thyroxine (T4)	5.10	4.5 - 12.6	ug/dL
Thyroid Stimulating Hormone (TSH)	1.28	0.30 - 4.20	μIU/mL

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Registered On : 24 Jun, 2023 10:50 AM

Age/Gender : 28 Years Male

Collected On : 24 Jun, 2023 10:54 AM

Patient ID : 1289

Reported On : 24 Jun, 2023 02:09 PM

Ref. By : Dr. BOB

MO : 8875376755

Address :

**URINE ROUTINE****Urine Examination Routine**

Investigation	Observed Value	Biological Reference Interval	Unit
<b>PHYSICAL EXAMINATION</b>			
Quantity	10ml	10ml	
Colour	Pale Yellow	Pale yellow	
Appearance	Clear	whitish	
PH	6.0		
Specific Gravity	1.015A		
Blood	Absent		
<b>CHEMICAL EXAMINATION</b>			
Proteins	Absent	Nil	
Glucose	Absent	Nil	
Ketones	Absent	Nil	
Leucocyte Esterase	Absent	Negative	
Bile Pigment	Negative		
Bile salt	Negative		
<b>MICROSCOPIC EXAMINATION</b>			
R.B.C.	Absent		
Pus Cells	2-3/hpf		
Epithelial Cells	1-2/hpf Squamous		
Bacteria	Absent		

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Reported On : 24 Jun, 2023 02:09 PM

**Ref. By** : Dr. BOB**MO** : 8875376755**Address** :**FASTING BLOOD SUGAR****FBS PP2BS**

Investigation	Observed Value	Biological Reference Interval	Unit
<b>FBS PP2BS</b>			
Fbs	101	70 - 110	mg/dL
PP2BS	98	80 - 140	mg/dL

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M.D.(Pathology)



Pt. Name : Anandsingh Chauhan

Registered On : 24 Jun, 2023 10:50 AM

Age/Gender : 28 Years Male

Collected On : 24 Jun, 2023 10:54 AM

Patient ID : 1289

Reported On : 24 Jun, 2023 02:09 PM

Ref. By : Dr. BOB



MO : 8875376755

Address :

Investigation	Observed Value	Biological Reference Interval	Unit
<b>SERUM CREATININE</b>			
Serum Creatinine	0.94	0.6 - 1.30	mg/dL

Note: 1) Diagnosing and monitoring treatment of acute and chronic renal disease.

2) adjusting dosage of renally excreted medications

3) Monitoring renal transplant recipients.

<b>(GGT)</b>			
Gamma Glutamyl Transferase (GGT)	22.36	8 - 61	U/L
<b>URIC ACID</b>			
Serum Uric Acid	3.97	3.5 - 7.2	mg/dL

Most uric acid is synthesized in the liver and mainly excreted by kidney. It is an end product of purine catabolism. Levels are labile and show day to day and seasonal variation in same person. Levels are also increased by emotional stress, total fasting and increased body weight. Mainly used for monitoring treatment of gout and chemotherapeutic treatment of neoplasm. Levels are increased in renal failure, gout, certain neoplastic condition (Increased cell turn over), Hemolytic anemia, toxemia of pregnancy.

<b>UREA</b>			
Serum Urea	31.53	15 - 40	mg/dL
<b>BUN</b>			
BUN	14.71	7.0 - 20.0	mg/dL

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



 DR.ASHISH JAWARKAR  
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NAME	ANAND SINGH CHOCHAN	AGE/SEX	28/MALE
REF. BY	CHHANI HOSPITAL	DATE	24/06/2023

X-RAY OF CHEST PA VIEW:

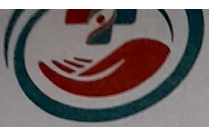
FINDING

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

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





NAME: MR. ANAND SINGH CHOHAN

AGE:26/MALE

DATE: 24/06/2023

**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 83\*38 cm.  
Left kidney measure 96\*48 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. PRANAV PATEL**  
M.D.PHYSICIAN  
G-71382  
FELLOWSHIP IN MEDICAL EMERGENCY  
Consultant Physician

