

Multispeciality Hospital Maternity Home & ICU

Plot No. 20, Gut No. 103, Opp. Surya Lawns Beed Bypass, Devlai, Aurangabad. Mob.: 9067028989, 9067038989

RX

Date 27/01/2024

Medical Fitness Certificate

This is to certify that below mentioned candidate has been examined on medical parameters and found free from contagious diseases there by medically fit for work. Final investigation reports will be forwarded to you at the earliest.

1. Name

: SONALI WANIE

2. Age

: 39Yrs.

3. Sex

: FEMALE

4. Physical Examination

: Normal

: Normal

5. Systemic Examination 6. Ophthalmic Examination: Normal

7 Vision /Colour Vision

: I) Normal - Normal

ii) Colour Blindness

: Normal

8. E C G

: Normal

9.X RAY

: Normal

10. 2D ECHO

: Normal

11. USG

: Normal

Remark-Person is fit to work in Company

Medical officer



LIFELINE

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RX

NAME: SONALI WANJE AGE/ SEX: 39/FEMALE

DATE: 27/01/2024

PRE-EMPLOYMENT HEALTH CHECKUP 2024

HISTORY

- Nil

ADDICATION: -

Nil

GENERAL MEDICAL EXAMINATION

1. Physical Examination

Height

: 158Cms

Skin Examination- Any diseases- :- No

Weight

: 45Kg

Oral Examination Hygiene- Any diseases-:-No

Pulse

: 94 Min

ENT Examination- Any diseases- :- No

B.P.

: 100/50mmHg

2. SYSTEMIC EXMINATION

a) Abdomen

: - Soft, No Organomegaly

b) CVS

: - Normal Heart sound

C) Respiratory System

: - Normal Air Entry Both Lungs

d) Nervous System

: - Normal Clinically

INVESTIGATIONS (POSITIVE FINDING)

Pathological investigation :- (Reports Enclosed) Annexure

Vision

: - (Reports Enclosed) Annexure

Color Vision

: - (Reports Enclosed) Annexure

ECG

: - (Reports Enclosed) Annexure

X RAY

: - (Reports Enclosed) Annexure

2DECHO

: - (Reports Enclosed) Annexure

USG

: - (Reports Enclosed) Annexure

Fit for employment

Medical Examiner

२४ तास अत्यावश्यक सेवा उपलब्ध



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OPTHALMIC EXAMINATION

NAME OF EMPLOYEE: SONALI WANJE

AGE: 39/FEMALE

DATE OF EXAMINATION: -27/01/2024

		RE (RIGHT EYE)	LE (LEFT EYE)
	WITH GLASSES		
NEAR VISION	WITH OUT GLASSES	N/6	N/6
DISTANCE VISION	WITH GLASSES		
JISTANCE VISION	WITH OUT GLASSES	6/6	6/6

COLOUR VISION: - NORMAL

PR. SACISING RANGAR PR. SACISING NATUREUS NO. 02/08/REMS



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NAME OF THE PATIENT: SONALI WANJE

AGE: 39/FEMALE

DATE: -27/01/2024

REPORT:

Condition of Lung pleura:

WNL

Heart & Aorta:

Transverse Diameter of Heart:

WNL

Transverse Diameter of Aortic Arch: WNL

WINL

Cardio-Thoracic Ratio:

WNL

Any changes of Arteriosclerosis or Calcification of Aorta etc. **WNL**

CONCLUSION & REMARK:

X-RAY CHEST IS WITH IN NORMAL LIMITS.

Medical Examiner



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RX

Patient Name	SONALI WANJE	Date: 27/01/2024
Age / Sex	39Yrs. /F	Performed By: DR. VIVEK JAJU

USG ABDOMEN AND PELVIS

LIVER: Liver is normal in size measuring 13.5 cm & shows normal echo texture. No evidence of any diffuse or focal pathology. Intrahepatic biliary radicals are not dilated. Portal vein & CBD are normal in diameter.

GALL BLADDER: is well-distended. No evidence of calculus or mass. Gall bladder wall thickness is normal.

PANCREAS: is normal in size and echo texture. Pancreatic duct is not dilated.

SPLEEN: Spleen is normal in size measuring 9.2 cm & shows normal echo texture. No evidence of any focal lesion.

KIDNEYS:

Right Kidney measures 10.5 x 4.9 cm in size.

Left Kidney measures 9.8 x 5.3 cm in size.

Both kidneys are normal in size and echo texture. Corticomedullary differentiation is normal. No evidence of calculus or hydronephrosis on both sides.

Urinary Bladder is Well-distended.

IVC and aorta are normal. No Para aortic lymphadenopathy.

No evidence of any intra- abdominal or pelvic mass.

No e/o any free fluid in abdomen and pelvis.

High resolution USG was performed with high frequency linear transducer, which reveals normal bowel loops and mesenteric structures. No evidence of significant mesenteric lymphadenopathy.

IMPRESSION:

No significant abnormality detected.

NAME: SONALI WANJE

AGE: 39YRS/F

DATE: 27/01/2024

2D ECHO DOPPLER REPORT

Patient in tachycardia during study

La Ra Normal in Size and shape.

LV is normal in size and shape.

Good LV Systolic function.

LVEF>55%

NO DIASTOLIC DUSFUNCTION.

NO regional wall motion abnormality

No intra cardiac shunts vegetation.

No MR/TR/AR

NO PERICARDIAL EFFUSSION.

IMPRESSION: ESSENTIALLY NORMAL 2D ECHO DOPPLER STUDY

OR SACHLUBANGAR
MISINGNATURE)
RAIL NO ATURE)



Vigilance Diagnostics PATHOLOGY LABORATORY LIFE LINE MULTISPECIALITY HOSPITAL

Plot No. 20, Gut No. 103, Opp. Surya Lawns, Beed By Pass Road, Deolai, Aurangabad

Accession No : 2024012710

Patient Name: Mrs. SONALI WANJE

Age / Sex : 38 Year/Female

Reffered by : LIFELINE MULTISPECIALITY HOSPITAL

Registered On: 27/01/2024

Reporting On : 27/01/2024

Printed On : 27/01/2024



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La tresposition	
CALL STREET, M. C. STREET, S. STREET, S. C.	Jiii
115 15 15 15	THE STATE OF
11.0 - 16	g/dL
4.50 - 5.50	10^6/u
4000 - 10000	10^3/ul
35.0 - 60.0	%
83.0 - 101.0	fL
27.0 - 32.0	pg
31.5 - 34.5	g/dL
0.0 - 80.0	%
0.0 - 40.0	%
0 - 6.0	%
0-8.0	%
1.0	%
	, A
0000 - 450000	10427.1
	10^3/ul MM/HRS
	0000 - 450000 20

Thanks for referral!

DR.SANDIP AMBEKAR MBBS, DPB Reg.no 2001/02/0426

End of Report-



PATHOLOGY LABORATORY LIFE LINE MULTISPECIALITY HOSPITAL

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Test Name

Patient value

Reference Range

Unit

HEMATOLOGY

BLOOD GROUP

BLOOD GROUP

"B" RH POSITIVE

Note: Grouping & Cross matching is absolutely essential prior to blood transfusion patient identity as disclosed by patients himself/herself.

Mark State Control	BIOCHEMISTRY		
BLOOD SUGAR (FASTING)	BLOOD SUGAR		
BLOOD SUGAR (Post Meal)	82.30 101.6	70 - 110	mg/dl
Kindly Correlate Clinically!		70 - 140	mg/dl

Thanks for referral!

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End of Report-

Page 1 of 1

MOBILE NUMBER: 9067028989



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Test Name	Deal		
	Patient value	Reference Range	
	BIOCHEMIST	RY	Unit
CREATININE	Kidney Functio	n Test	
UREA LIVER FUNCTION TEST BILIRUBIN TOTAL	0.98 23.6	0.5 - 1.4 10 - 50	mg/dl mg/dl
DIRECT INDIRECT SGOT SGPT ALKALINE PHOSPHATASE TOTAL PROTINE ALBUMIN GLOBULIN	0.87 0.29 0.58 21.63 23.44 102.36 6.98 3.89 3.09	0.1 - 1.2 0.0 - 0.3 0.1 - 1.0 10 - 40 06 - 40 42 - 141 6 - 8 3.5 - 4.8	mg/dl mg/dl mg/dl mg/dl mg/dl g/dl g/dl
indly Correlate Clinically!		2.8 - 3.3	g/dL

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- End of Report-



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Test Name	LIPID PRO	FILE	
S. Cholesterol	Patient Value	Reference Range	
S. Triglycerides	174.3	0 - 200	Unit
HDL Cholesterol	139.6	25 - 160	mg/dl
LDL Cholestrol	34.86	30 - 60	mg/dl
-	111.52	85 - 150	md/dl
	FND OF DED	WULL TO SERVICE THE SERVICE STATE OF THE SERVICE ST	mg/dL

END OF REPORT -

Kindly Correlate Clinically!
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Vigilance Diagnostics PATHOLOGY LABORATORY LIFE LINE MULTISPECIALITY HOSPITAL

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Test Name	THYROID PR	OFILE	A
T3	Patient Value	Reference Range	7. 30 30 30 30
T4	1.20	0.58 - 1.59	Unit
TSH	7.96	4.87 - 11.92	nmo
Oternrotetiant	3.00	0.27 - 4.20	nmo ulU/ml

Interpretation(s)

TSH stimulates the production and secretion of the metabolically active thyroid hormones, thyroxine (T4) and triiodothyronine (T3) by interacting with a specific receptor on the thyroid cell surface.

The synthesis and secretion of TSH is stimulated by Thyrotropin releasing hormone (TRH), the hypothalamic tripeptide, in response to low levels of circulating thyroid hormones. Elevated levels of T3 and T4 suppress the production of TSH a classic negative feedback mechanism. Failure at any level of regulation of the hypothalamic-pituitary-thyroid axis will result in either underproduction (hypothyroidism) or overproduction (hyperthyroidisim) of T4 and /or T3.

Clinical Condition T3 Levels T4 Levels TSH level

Primary hypothyroidism Reduced Reduced Increased(Significantly)

Subclinical Hypothyroidism Normal or Low Normal Normal or Low Normal High

Increased

Increased

Reduced(at times undetectable)

Subclinical Hyperthyroidism

Normal of High Normal Normal of High Normal Reduced

END OF REPORT -

Kindly Correlate Clinically! Thanks for referral!

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GLYCOSYLATED HAEMOGLOBIN

Test Name	SELECTION HAEMOGLOBIN		
	Patient Value	Reference Range	Maria Paris
Glycosylated Haemoglobin (HbA1c)	6.02		Unit
		Non-Diabetic : Upto 6%, Pre- Diabetic :6.0-6.5%,	%
		Diabetic :>6.5%, Good Control : 6.5-7.0%, Moderate Control: 7-8%,	
Estimated average glucose (eAG)	100,3	Poor Control:>8.0%	
Kindly Correlate Clinically	END OF REP	ORT	%

Kindly Correlate Clinically ! Thanks for referral!

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2.0	_	-	400
	u	u	-

Test Name	YGGTP	and the same	
The second of th	Patient Value	Reference Range	Part and Ann
Y-Glutamyl Transpeptidase	21.6	0 - 55	Unit
Kindly Correlate Clinically I	END OF REF	PORT	U/L

Kindly Correlate Clinically! Thanks for referral!

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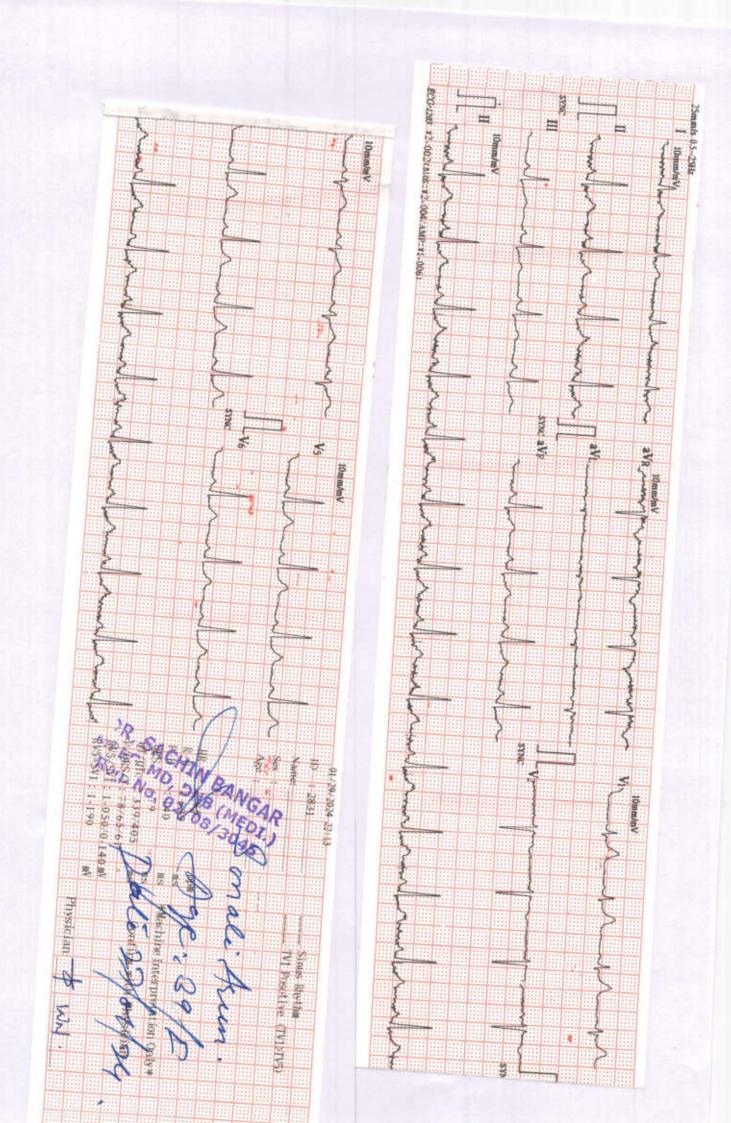
Test Name URINE ROUTINE EXAMINATION				
Test Name	Patient Value			
PHYSICAL EXAMINATIN VOLUME	5.40	Reference Range	Unit	
COLOUR APPERANCE	5 ML PALE YELLOW	(NORMAL: 2 TO 6)		
CHEMICAL EXAMINATION PROTEIN	CLEAR			
MICROSCPIC EXAMINATION	NIL NIL	NOT DETECTED		
PITHELIAL CELLS US CELL / LEUCOCYTES ED BLOOD CELLS/BLD	1-2 2-4		/hpf	
ASTS RYSTALS	ABSENT NOT DETECTED NOT DETECTED	NOT DETECTED	/hpf/Leu/UL /hpf/Ery/UL	
ACTERIA	NOT DETECTED	NOT DETECTED NOT DETECTED		

END OF REPORT

Kindly Correlate Clinically!

Thanks for referral!

DR.SANDIP AMBEKAR MBBS,DPB Reg.no 2001/02/0426



Package name	Package Inculsions	Custome
GL ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324 FAS PRI SMEA AN CONSU INDEX PAPS PERIPI HEM PROFIL T4, TS TEST (LE	Glycosylated Hemoglon (HbA1C) - Whole Blood,ECG,Package Gynaeocological Consultation,HEMOGRA (CBC+ESR),X-Ray Che PA,Opthal by General Physician,BMI,URINE GLUCOSE(POST PRANDIAL),Consultation Dental,Package Consultation ENT,Fitness by General Physician,2 D ECHO,Lipic Profile (all Parameters),Ren Function Test,Ultrasound Whole Abdomen,URINE UCOSE(FASTING),Dieticia Consultation,GLUCOSE ERUM / PLASMA(FASTING) ID POST PRANDIAL,Blood ID PO	MM st - on - d al an G d d MS. AMLE





भारत सरकार Government of India

भारतीय विशिष्ट ओळख प्राधिकरण Unique Identification Authority of India

नोंदणी ऋमांकः/ Enrolment No.: 0983/25307/02192

तोगाती देवानंद वंधे Sonali Devanand Wanje Hwara Tarf Jawala Hiwara Tarf Jawala Hingoli Maharashbra - 431701 9518589812

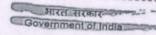


आपला आधार क्रमांक / Your Aadhaar No. :

9228 4706 1468 VID: 9146 6217 5152 5311

माझे आधार, माझी ओळख









सोनासी केवानंद दंखे Sonali Devanand Wanje जन्म तारीख/DOB: 04/09/1985 महिला/ FEMALE

9228 4706 1468

VID: 9146 6217 5152 5311 आधार, माझी ओळख माझे







माहिती

- आधार ओळखींचा पुरावा आहे नागरिकत्वाचा नाही
- सुरक्षित QR कोड / ऑफलाइन XML / ऑनलाइन प्रमाणीकरण वापरून ओळख सत्यापित करा.
- है इलेक्ट्रॉनिक प्रक्रिये द्वारा तयार झालेले एक पत्र आहे.

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 - आपला मोबाइल नंबर आणि ईमेल आयडी आधारमध्ये अदयावत ठेवा
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Address: Hiwara Tarf Jawala, Hiwara Tarf Jawala, Hingoll, Maharashtra - 431701



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