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अमन सिंह

LIG-110

Huzur

15/03/2012

Date:

Aman Singh

Bharti Niketan

Bhopal Madhya Pradesh - 462023

govindpura

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भारत सरकार

Government of India

भारतीय विशिष्ट पहचान प्राधिकरण

Unique Identification Authority of India

नामांकन ऋम/ Enrolment No.: 0820/10002/70614

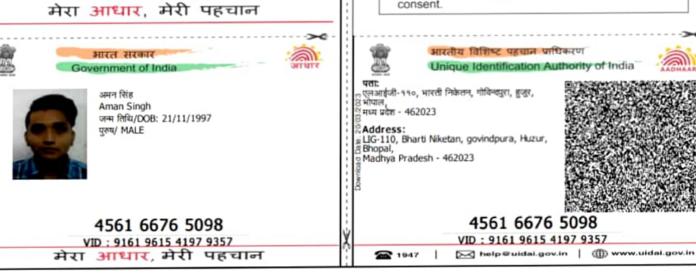
आपका आधार क्रमांक / Your Aadhaar No. :

4561 6676 5098 VID : 9161 9615 4197 9357





- आधार विशिष्ट और सुरक्षित है।
- सरक्षित क्युआर कोड/ऑफ़लाइन एक्सएमएल/ऑनलाइन प्रमाणीकरण का उपयोग करके पहचान सत्यापित करें।
- आधार के सभी रूप जैसे आधार पत्र, पीवीसी कार्ड, ई-आधार और एम-आधार समान रूप से मान्य हैं। १२ अंकों की आधार संख्या के स्थान पर आभासी (वर्च्अल) आधार पहचान (VID) का भी उपयोग किया जा सकता है।
- १० साल में कम से कम एक बार आधार अपडेट जरूर करें।
- आधार आपको विभिन्न सरकारी और गैर-सरकारी योजनाओं /सेवाओं का लाभ उठाने में मदद करता है।
- आधार में अपना मोबाइल नंबर और ई-मेल आईडी अपडेट रखें।
- आधार सेवाओं का लाभ उठाने के लिए स्मार्टफोन पर mAadhaar ऐप डाउनलोड करे।
- आधार/बायोमेट्रिक्स को लॉक/अनलॉक करने की विशेषता का उपयोग स्रक्षा सुनिश्चित करने के लिए करे।
- आधार (पत्र/ नंबर) चाहने वाली संस्थायों को उचित सहमति लेने के लिए बाध्य किया गया है।
- Aadhaar is a proof of identity, not of citizenship.
- Aadhaar is unique and secure.
- Verify identity using secure QR code/offline XML/online Authentication.
- All forms of Aadhaar like Aadhaar letter, PVC Cards, eAadhaar and mAadhaar are equally valid. Virtual Aadhaar Identity (VID) can also be used in place of 12 digit Aadhaar number.
- Update Aadhaar at least once in 10 years.
- Aadhaar helps you avail various Government and Non-Government benefits/services.
- Keep your mobile number and email id updated in Aadhaar.
- Download mAadhaar app on smart phones to avail Aadhaar Services.
- Use the feature of lock/unlock Aadhaar/biometrics to ensure security.
- Entities seeking Aadhaar are obligated to seek due consent.







YOUR HEALTH IS OUR PRIORITY

Laboratory Report

Patient Name: MR AMAN SINGHAge/Gender: 27 Yrs/MaleRef. Dr.: Dr. APOLLO CLINICCenter: CMH OPD

Registration Date : 15/04/2024 12:10 PM Collection Date : 15/04/2024 12:11 PM

Report Date : 15/04/2024 02:14 PM



HAEMATOLOGY REPORT

Test Description	Result	Unit	Biological Reference Ranges
BLOOD GROUP AND RH	FACTOR		
АВО Туре	А		
Rh Factor	POSITIVE(+V	'E)	

BIOCHEMISTRY REPORT

Result	Unit	Biological Reference Ranges	
0.56	mg/dl	0.2 - 1.2	
0.12	mg/dl	0.0 - 0.3	
0.4	mg/dl	0.2 - 0.8	
23.6	mg/dl	15 - 45	
11		7 - 21	
	0.56 0.12 0.4 23.6	0.56 mg/dl 0.12 mg/dl 0.4 mg/dl 23.6 mg/dl	

Method : Calculated Clinical Significance:

Urea Nitrogen (BUN) - Urea is the principle waste product of protein catabolism. BUN is most commonly measured in the diagnosis and treatment of certain renal and metabolic diseases. Increased BUN concentration may result from increased production of urea due to

(1) diet or excessive destruction of cellular proteins as occurs in massive infection and fevers,

0.71

(2) reduced renal perfusion resulting from dehydration or heart failure,

(3) nearly all types of kidney disease, and

(4) mechanical obstruction to urine excretion such as is caused by stones, tumors, infection, or stricture. Decreased urea levels are less frequent and occur primarily in advanced liver disease and in overhydration.

Serum-Creatinine

Method: Enzymatic

Interpretation

The primary use of a creatinine test is to better understand how well the kidneys are working. A measurement of creatinine can be employed for screening, diagnosis, and/or monitoring of kidney problems.

mg/dL

0.4 - 1.50



Dr. Sushil Kumar Sharma M.D (Pathology) Consultant Pathologist





Clinical Significance

Alanine Aminotransferase (ALT) (REFL) - Alanine Aminotransferase (ALT) measurements are particularly useful in the diagnosis and management of certain liver diseases, e.g., viral hepatitis and cirrhosis. ALT activity in tissue is generally much lower than aspartate aminotransferase (AST) activity and is found in highest concentrations in the liver. Significant elevations of ALT occur only in diseases of the liver. ALT is often measured in conjunction with AST to determine whether the source of the AST is the liver or the heart. ALT is normally not elevated in cases of myocardial infarction, i.e., a normal ALT, in conjunction with an elevated AST, tends to suggest cardiac disease. However, slight elevations of ALT may occur if an infarct destroys a very large volume of heart muscle.

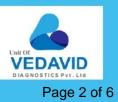
CLINICAL BIOCHEMISTRY REPORT

Test Description	Result	Unit	Biological Reference Ranges
Fasting Blood Sugar	121.0	mg/dl	Normal: 70-110
Method: GOD-POD			Impaired Fasting Glucose(IFG):
			100-125
			Diabetes mellitus: >= 126

Note:- An individual may show higher fasting glucose level in comparison to post prandial glucose level due to following reasons. The glycaemic index and response to food consumed, Changes in body composition, Increased insulin response and sensitivity, Alimentary hypoglycemia, Renal glycosuria, Effect of oral hypoglycaemics & Insulin treatment.



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YOUR HEALTH IS OUR PRIORITY

Laboratory Report

Patient Name: MR AMAN SINGHAge/Gender: 27 Yrs/MaleRef. Dr.: Dr. APOLLO CLINICCenter: CMH OPD

CPL24/9237

 Registration Date
 : 15/04/2024 12:10 PM

 Collection Date
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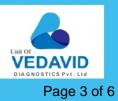


URINE EXAMINATION REPORT				
Test Description	Result	Unit	Biological Reference Ranges	
General Examination				
Colour	Pale Yellow		Pale Yellow	
Transparency (Apperance)	Clear		Clear	
Deposit	Absent		Absent	
Reaction (pH)	Acidic		5.0-8.5	
Specific Gravity	1.025		-1.005-1.030	
Chemical Examination				
Jrine Protein	Absent		Absent	
Jrine Ketones (Acetone)	Absent		Absent	
Jrine Glucose	Absent		Absent	
Bile pigments	Absent		Absent	
Bile salts	NIL		NIL	
Jrobilinogen	Normal		Normal	
Nitrite	Negative		Negative	
Microscopic Examination				
RBC's	NIL	/hpf	NIL	
_eukocyte (Pus cells)	1-2	/hpf	0-5/hpf	
Epithelial Cells	2-4	/hpf	0-4/hpf	
Crystals	Absent		Absent	
Casts	Not Seen		Not Seen	
Amorphous deposits	Absent		Absent	
Bacteria	Not seen		Not seen	
Yeast Cells	Not seen		Not seen	

Note: 1. Chemical examination through Dipstick includes test methods as Protein (Protein Error Principle), Glucose (Glucose oxidase-Peroxidase), Ketone (Legals Test), Bilirubin (Azo- Diazo reaction), Urobilinogen (Diazonium ion Reaction) Nitrite (Griess Method). All abnormal results of chemical examination are confirmed by manual methods. 2. Pre-test conditions to be observed while submitting the sample- First void, mid-stream urine, collected in a clean, dry, sterile container is recommended for routine urine analysis, avoid contamination with any discharge from vaginal, urethra, perineum, as applicable, avoid prolonged transit time & undue exposure to sunlight. 3. During interpretation, points to be considered are Negative nitrite test does not exclude the urinary tract infections, Trace proteinuria can be seen with many physiological conditions like prolonged recumbency, exercise, high protein diet. False positive reactions for bile pigments, proteins, glucose and nitrites can be caused by peroxidase like activity by disinfectants, therapeutic dyes,



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		lahor	atory Report			
		Labor				
Patient Name	: MR AMAN SINGH					
Age/Gender	: 27 Yrs/Male		Registration Date	: 15/04/2	024 12:10 PM	
Ref. Dr.	: Dr. APOLLO CLINIC		Collection Date	: 15/04/2	024 12:11 PM	
Center	: CMH OPD		Report Date	: 15/04/2	024 02:14 PM	
Test Descript	ion	Result	Unit		Biological Refe	erence Ranges
COMPLETE B						
Haemoglobin		15.9	gm/dl	L	12.0 - 16.0	
RBC Count		4.33	mil/cu	u.mm	4.00 - 5.50	
Hematocrit HC	т	47.1	%		40.0 - 54.0	
Mean Corp Vol	ume MCV	108.8	fL		80.0 - 100.0	
Mean Corp Hb	МСН	36.7	pg		27.0 - 34.0	
Mean Corp Hb	Conc MCHC	33.8	gm/dl	L	32.0 - 36.0	
Platelet Count		1.67	lac/cr	mm	1.50 - 4.50	
Total WBC Cou	unt /TLC	7.0	10^3/	/cu.mm	4.0 - <mark>11.0</mark>	
DIFFERENTIA	L LEUCOCYTE COUNT					
Neutrophils		53	%		40 - 70	
Lymphocytes		41	%		20 - 40	
Monocytes		04	%		02 - 10	
Eosinophils		02	%		01 - 06	
Basophils		00	%		00 - 01	
Absolute Diffe	erential Count					
Absolute Neutr	ophils Count	3.7	thou/i	mm3	2.00 - 7.00	
Absolute Lymp	hocyte Count	2.9	thou/i	mm3	1.00 - 3.00	
Absolute Mono	cytes Count	0.3	thou/i	mm3	0.20 - 1.00	
Absolute Eosin		0.1	thou/i	mm3	0.02 - 0.50	

EDTA Whole Blood - Tests done on Automated Three Part Cell Counter. (WBC, RBC Platelet count by impedance method, WBC differential by VCS technology other parameters calculated) All Abnormal Haemograms are reviewed confirmed microscopically.



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Test Description	Result	Unit	Biological Reference Ranges
ESR - ERYTHROCYTE SEDIMENTATION RATE	07	mm/hr	0 - 09

Method: Wintrobes

INTERPRETATION:

1. It indicates presence and intensity of an inflammatory process, never diagnostic of a specific disease. Changes are more significant than a single abnormal test.

It is a prognostic test and used to monitor the course or response to treatment of diseases like tuberculosis, bacterial endocarditis, acute rheumatic fever, rheumatoid arthritis, SLE, Hodgkins disease, temporal arteritis, polymyalgia rheumatica.
 It is also increased in pregnancy, multiple myeloma, menstruation, and hypothyroidism.

**** End of the report****

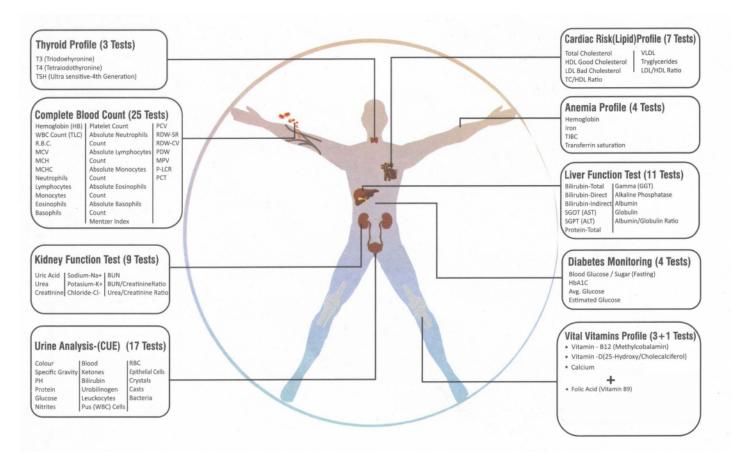
This report is not valid for medico legal aspects. This is just a professional opinion not the final. Kindly correlate clinically because of technical, lack of clinical information and physical findings, if any disparity noted please inform.



Dr. Sushil Kumar Sharma M.D (Pathology) Consultant Pathologist



BODY CARE



CONDITIONS OF REPORTING

- 1. Individual laboratory investigations should not be considered as conclusive and should be used along with other relevant clinical examinations to achieve the final diagnosis. Therefore these reported results are for the information of referring clinician only
- 2. The values of a laboratory investigation are dependent on the quality of the sample as well as the assay procedures used. Further all samples collected outside Citi Pathlabs labs / patient centers are required to be prepared, stored, labelled and brought as per the guidelines of Citi Pathlabs. Citi Pathlabs cannot be held liable for incorrect results of any samples which are not as per the guidelines issued
- 3. Electronic images in the report are created by electronic processing. Citi Pathlabs makes no expressed or implied warranties or representations with respect to it and takes no responsibility for the authenticity, quality and size of the image, affected possibly due to a computer virus or other contamination
- 4. Citi Pathlabs confirms that all tests have been carried out with reasonable care, clinical safety & technical integrity A. However due to certain factors such as reagent inconsistency, machine breakdown etc. beyond its control which could affect the testing, it does not make any representation or give any warranty about the accuracy of the reported results B. The test results are to be used for help in diagnosing / treating medical diseases & not for forensic applications. Hence these results cannot be used for medico legal purposes
- 5. Partial representation of report is not allowed.
- 6. All dispute / claims concerning to this report are subject to Bhopal jurisdiction only.

For Any Enquiry Citi Pathlabs Flat No. 004, Shivaay South City Complex, Phase-2, G-3 Gulmohar Colony, Bhopal (M.P.) citipathlabs@gmailcom 9454786340, 9407658222

MER- MEDICAL EXAMINATION REPORT

C.Fincling	11	5-4-24	
Date of Examination	AMAN SINGH		
NAME	271	Gender	Male
AGE		WEIGHT (kg)	77
HEIGHT(cm)	1. · · ·	1	
B.P.	110	80 mm	.G.
ECG	W	NL	
X Ray		LORMAL	
Vision Checkup		ision: No sion Ratio : No 'ision Ratio : No	
Present Ailments	No	Any prosta Any past a is physical	ent allhents
Details of Past ailments (If Any)	No.	Any past a	illnents.
Comments / Advice : She / He is Physically Fit	He	is physical	ly fit -

Dr. SABYASACHI GUPTA NBBB (Gold Medalist), MD (Med.), RCGP (U.K.) Rog. No.11671 Signature with Stamp of Medical Examiner



CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

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()	I.	

AMAN	SiNGM
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on 15/04/2024

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

it ne/sne is]	Tick
Medically Fit	1	
• Fit with restrictions/recommendations		
Though following restrictions have been not impediments to the job.	revealed, in my opinion, these are	
1 2		X
3		
However the employee should follow the been communicated to him/her.	e advice/medication that has	•
Review after	_	
Currently Unfit. Review after	recommended	Y
• Unfit	Dr. SABYASACHI GUPTA BBS (Gold Medal St. MD (Med.), RCGP (U.K.)	4
	Dr. Reg. No.11671 Medical Officer The Apollo Clinic, (Location)	

This certificate is not meant for medico-legal purposes





T SPECIALITY HOSPITAL MULT

15 216,Gautam Nagar, Govindpura, Bhopal-462023 (M.P.) Phone No.: 0755 - 4250134 Mobile No. : 7771008660,8319214664, 9303135719



15-4-024 AMAN - SITCH RZIM <10 no, complising 010 VATL.G. 2002 | 2 NO, ANY ERASH COMPLOTING in R.G. & L.G. 240, coastre - Sigcharell, in Bosh-Gull - clame - vision in Bosh Gull

Empanelled with : State Government, M.P.Police, ESIC, HPCL, Punjab National Bank, Indian Bank Food Corporation of India, Ayushman Bharat Alexand





SPECIALITY HOSPITAL

Gautam Nagar, Govindpura, Bhopal-462023 (M.P.) Phone No. : 0755 - 4250134 71008660.8319214664, 9303135719



Patient- Name:	MR. AMAN SINGH	Age/Sex:	27Y/M	
Referred. By:	INS	Date:	15.04.2024	

X-RAY CHEST PA VIEW

-Bilateral Lungs Fields Appear Clear.

-Bilateral Hilar Shadows Appear Clear.

-Bilateral CP Angels Appear Clear.

-Both The Domes Of Diaphragm Appear normal in shape and position.

-Visualized bony cage and soft tissue appear normal.

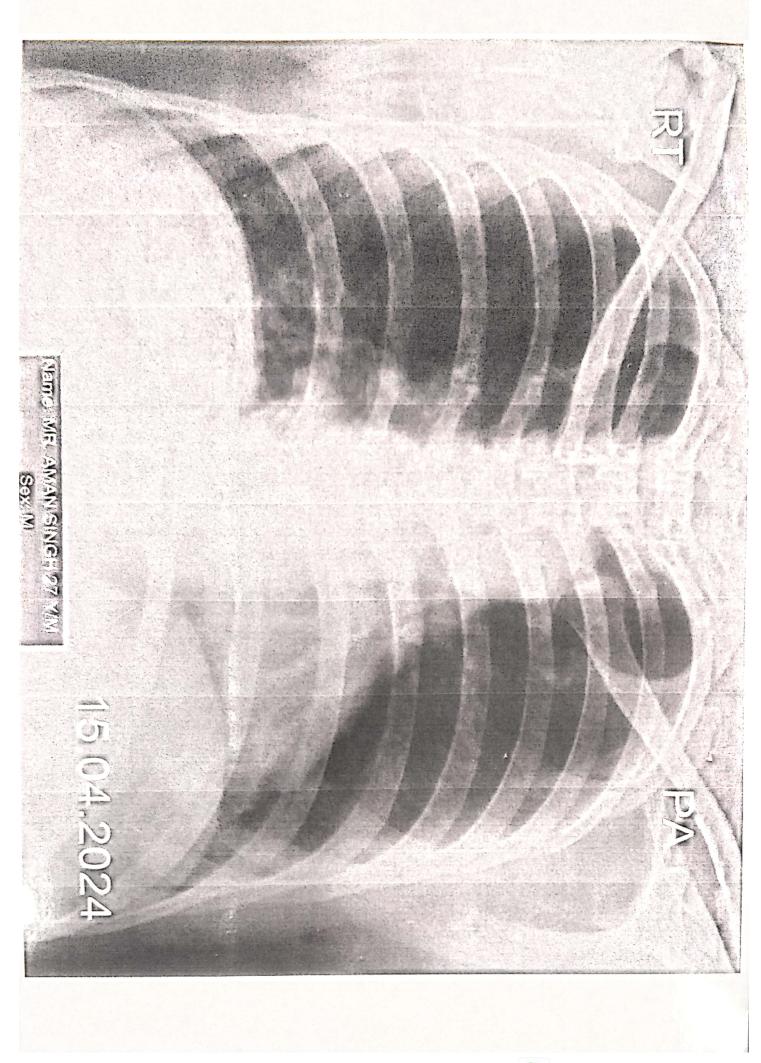
IMPRESSION

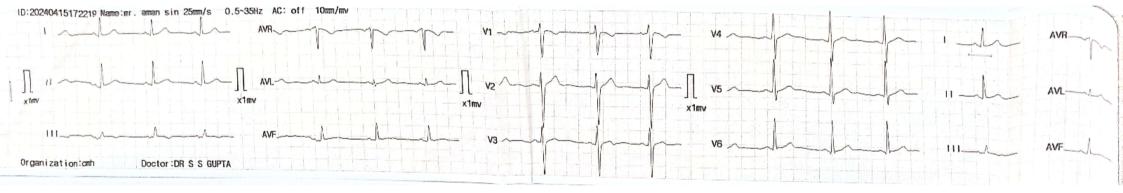
No Significant Abnormality.

Dr. SANJAY ... CONSULTANT RADIOLOGIST

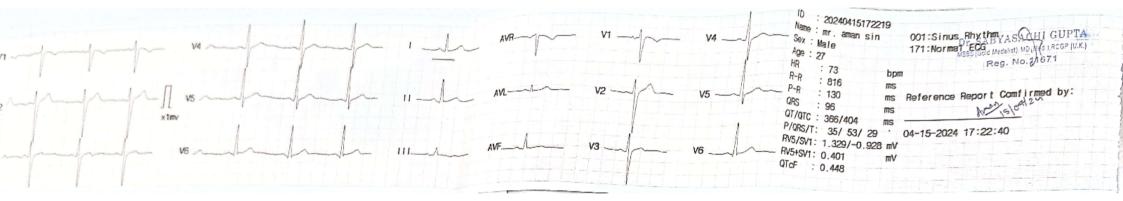
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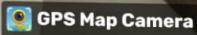














Bhopal, Madhya Pradesh, India 6CMR+XFG, Gautam Nagar, Housing Board Colony, Bhopal, Madhya Pradesh 462023, India Lat 23.234911° Long 77.441115° 15/04/24 12:10 PM GMT +05:30

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