

MER- MEDICAL EXAMINATION REPORT

Date of Examination	3/8/24.		
NAME	Alex Benjamin Bolly		
AGE	26 yrs.	Gender	Male.
HEIGHT(cm)	180 cm	WEIGHT (kg)	102 kg
B.P.	130/80 mm Hg.		
ECG	Normal		
X Ray	NAD		
Vision Checkup	Color Vision : Normal		
	Far Vision Ratio : 6/6		
	Near Vision Ratio : N5 } uncorrected.		
Present Ailments	Nil		
Details of Past ailments (If Any)	① wrist hairline # in childhood Red e POP.		
Comments / Advice : She / He is Physically Fit			

Signature with Stamp of Medical Examiner

Dr. MUKUL ARTE MBBS, DNB
 Regn. No: 44293 (MMC)
 Approved By DG Shipping (GOI)
 Consultant in Marine Medicine & Aviation Medicine
 A-101-102, Heritage Plaza, Tell Cross Lane,
 Andheri East, Mumbai-400 059
 SEA BIRD MEDICARE CENTRE

CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

of Alex Dolly on 27/8/2024

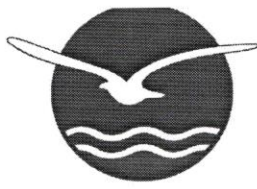
After reviewing the medical history and on clinical examination it has been found that he/she is

	Tick
<ul style="list-style-type: none"> • Medically Fit 	<input checked="" type="checkbox"/>
<ul style="list-style-type: none"> • Fit with restrictions/recommendations <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>	
<ul style="list-style-type: none"> • Currently Unfit. <p>Review after _____ recommended</p>	
<ul style="list-style-type: none"> • Unfit 	

Dr. _____
Medical Officer
The Apollo Clinic, (Location)

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 Andheri East, Mumbai-400 059
 SEA RISK MEDICARE CENTRE

This certificate is not meant for medico-legal purposes.



SEA BIRD MEDICARE CENTRE

Report ID : **AABM38123621**
Patient Name : **Mr. ALEXBENZAMIN**
Rank :
Ref By : **DR.MUKUL ARTE**
Location : **SEA BIRD- ANDHERI**

Reg. : **03-Aug-2024**
Report Date : **03-Aug-2024**
Company Name : **M/S. APOLLO HEALTH AND**
Age/Sex : **26 Year / Male**

HEMATOLOGY

INVESTIGATION


Complete Blood Count

<u>INVESTIGATION</u>	<u>OBSERVED VALUE</u>	<u>UNITS</u>	<u>REFERENCE RANGE</u>
Haemoglobin	14.8	gm/dl	13-18 gm/dl
Total W.B.C	5300	/cu.mm	4000-11000 /cu.mm
Neutrophils	59	%	50-70 %
Lymphocytes	40	%	20-40 %
Eosinophils	01	%	0-7 %
Monocytes	00	%	0-8 %
Basophils	00	%	0-2 %
R.B.C Total	5.10	millions/cu .mm	4.5-5.5 millions/cu.mm
P.C.V	41.8	%	42-55 %
MCV	81.9	femolitre	80-96 femolitre
MCH	29.1	picogram	27-33 picogram
MCHC	35.5	%	32-36 %
W.B.C Morphology	Normal		
R.B.C Morphology	Normal		
Platelet Count	210000	/cu.mm	150000-450000 /cu.mm
Blood Group			
Blood Group	A Positive		
ESR			
ESR	05	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


SONALI VASANT ADELKAR
Lab Technician

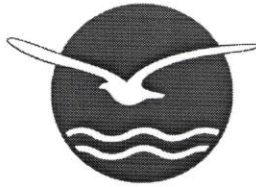
Proudly... Caring For You

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 | Email: seabird@seabirdhf.com



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BIO-CHEMISTRY

INVESTIGATION

Liver Function Test

	<u>OBSERVED VALUE</u>	<u>UNITS</u>	<u>REFERENCE RANGE</u>
SGPT	12	IU/L	9-43 IU/L
Sr.Bilirubin (T)	1.2	mg/dl	0.2-1.2 mg/dl
Sr.Bilirubin (D)	0.2	mg/dl	0.0-0.3 mg/dl
Sr.Bilirubin (I)	1.0	mg/dl	

Renal Function Test

BUN	14.9	mg/dl	6-21 mg/dl
Sr.Creatinine	1.3	mg/dl	0.7-1.4 mg/dl


Blood Sugar Estimation

Fasting Blood Sugar	103	mg/dl	70-110 mg/dl
Fasting Urine Sugar	Absent		
Post Prandial Blood Sugar	105	mg/dl	70-140 mg/dl
Post Prandial Urine Sugar	Absent		
BUN/Creatinine Ratio	- 7.8		

---END OF REPORT---

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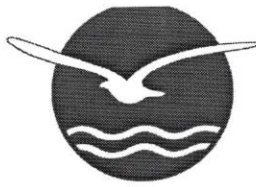
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URINE ROUTINE

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.

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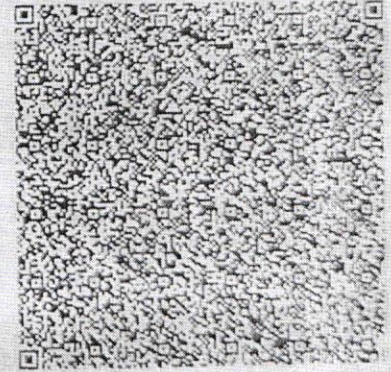
आयकर विभाग
INCOME TAX DEPARTMENT



भारत सरकार
GOVT. OF INDIA



स्थायी लेखा संख्या कार्ड
Permanent Account Number Card
DXLPB6594P



नाम / Name

ALEXBENZAMIN ARTHURMADHURMOHAN
BOLLY

पिता का नाम / Father's Name

ARTHURMADHURMOHAN BOLLY

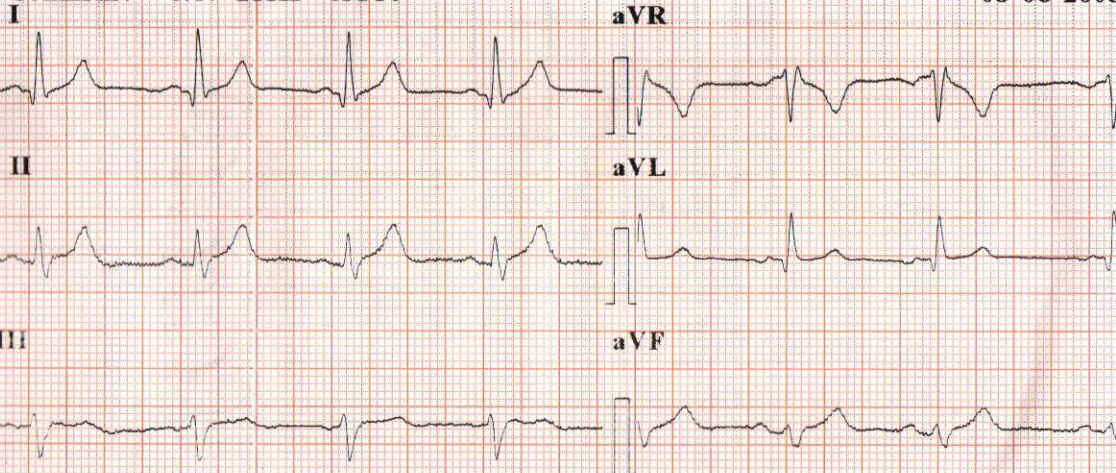
जन्म की तारीख / Date of Birth

17/01/1998

हस्ताक्षर / Signature

10mm/mV 0.67~25Hz AC50

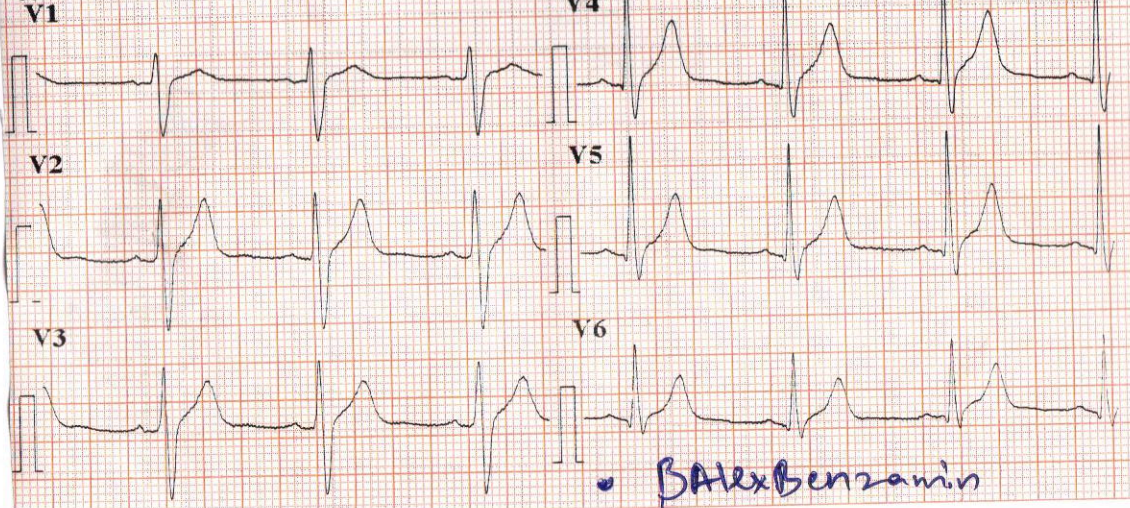
08-06-2005



25mm/s ♡70

V2.45

09:11:03



• B Alex Benzamin

E. C. G. REPORT

RATE 74/min Q. WAVE _____
RHYTHM Regular QRS COMPLEX N
VOLTAGE N ST. SEGMENT iso-electric
P. WAVE N T. WAVE _____
PR. INTERVAL N

REMARKS well

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SEA BIRD MEDICARE CENTRE

ELECTROCARDIOGRAPHIC REPORT



Sea Bird
Sea Bird Medicare Centre

NAME Alex Bolly
AGE 26. DATE 31/8/2024

- 102, Heritage Plaza, Telli Cross Lane, Nr. Andheri (E) Stn., Andheri (East), Mumbai - 400 069.
Tel.: 2682 1823, 5578 3905
- 102-103-104, Gateway Plaza, Central Avenue Road, Hiranandani Gardens, Powai, Mumbai - 400076
Tel.: 2570 4157