



If the examinee is suffering from an acute life threatening situation, you may be obliged to disclose the result of the medical examination to the examinee.

1. Name of the examinee	:	Mr./Mrs./Ms. <i>USHA PANDALAI S</i>
2. Mark of Identification	:	(Mole/Scar/any other (specify location)): <i>note behind right ear head area</i>
3. Age/Date of Birth	:	Gender: <i>F</i> F/M
4. Photo ID Checked	:	(Passport/Election Card/PAN Card/Driving Licence/Company ID)

PHYSICAL DETAILS:

a. Height <i>161</i> (cms)	b. Weight <i>80</i> (Kgs)	c. Girth of Abdomen <i>92</i> (cms)
d. Pulse Rate <i>55</i> (/Min)	e. Blood Pressure:	Systolic <i>1</i> Diastolic
	1 st Reading	<i>140</i> <i>100</i>
	2 nd Reading	

FAMILY HISTORY:

Relation	Age if Living	Health Status	If deceased, age at the time and cause
Father	80 YRS		<i>80 YRS - HEART ATTACK</i>
Mother	<i>90 YRS</i>	<i>Tongue cancer, BP, Sugar</i>	
Brother(s)	<i>56 YRS</i>	<i>Healthy</i>	
Sister(s)	<i>60 YRS</i>	<i>Healthy</i>	

HABITS & ADDICTIONS: Does the examinee consume any of the following?

Tobacco in any form	Sedative	Alcohol
<i>NO</i>		

PERSONAL HISTORY

- a. Are you presently in good health and entirely free from any mental or Physical impairment or deformity. If No, please attach details. **Y/N**
- b. Have you undergone/been advised any surgical procedure? *Right Nephrectomy, Cesarian delivery and.* **Y/N**
- c. During the last 5 years have you been medically examined, received any advice or treatment or admitted to any hospital? **Y/N**
- d. Have you lost or gained weight in past 12 months? **Y/N**

Have you ever suffered from any of the following?

- Psychological Disorders or any kind of disorders of the Nervous System? **Y/N**
- Any disorders of Respiratory system? **Y/N**
- Any Cardiac or Circulatory Disorders? **Y/N**
- Enlarged glands or any form of Cancer/Tumour? **Y/N**
- Any Musculoskeletal disorder? **Y/N**
- Any disorder of Gastrointestinal System? *having gastric problems* **Y/N**
- Unexplained recurrent or persistent fever, and/or weight loss **Y/N**
- Have you been tested for HIV/HBsAg / HCV before? If yes attach reports **Y/N**
- Are you presently taking medication of any kind? **Y/N**

DDRC SRL Diagnostics Private Limited

Corp. Office: DDRC SRL Tower, G- 131, Panampilly Nagar, Ernakulam - 682 036
Ph No. 0484-2318223, 2318222, e-mail: info@ddrcsrl.com, web: www.ddrcsrl.com

Corp. Office: DDRC SRL Tower, G- 131, Panampilly Nagar, Ernakulam - 682 036, Ph No: 2310688, 2318222, web: www.ddrcsrl.com

• Any disorders of Urinary System? **Y/N**
Right kidney removed

• Any disorder of the Eyes, Ears, Nose, Throat or Mouth & Skin **Y/N**
wearing spectacles

FOR FEMALE CANDIDATES ONLY

- a. Is there any history of diseases of breast/genital organs? **Y/N**
- b. Is there any history of abnormal PAP Smear/Mammogram/USG of Pelvis or any other tests? (If yes attach reports) **Y/N**
- c. Do you suspect any disease of Uterus, Cervix or Ovaries? **Y/N**

- d. Do you have any history of miscarriage/abortion or MTP **Y/N**
- e. For Parous Women, were there any complication during pregnancy such as gestational diabetes, hypertension etc **Y/N**
- f. Are you now pregnant? If yes, how many months? **Y/N**

CONFIDENTIAL COMMENTS FROM MEDICAL EXAMINER

- Was the examinee co-operative? **Y/N**
- Is there anything about the examinee's health, lifestyle that might affect him/her in the near future with regard to his/her job? **Y/N**
- Are there any points on which you suggest further information be obtained? **Y/N**
- Based on your clinical impression, please provide your suggestions and recommendations below;

.....

.....

➤ Do you think he/she is **MEDICALLY FIT** or **UNFIT** for employment.

Fit

MEDICAL EXAMINER'S DECLARATION

I hereby confirm that I have examined the above individual after verification of his/her identity and the findings stated above are true and correct to the best of my knowledge.

Name & Signature of the Medical Examiner : *Dr. Austin Varghees*

Seal of Medical Examiner : *[Signature]*

Dr. Austin Varghees
MBBS
TCMC Reg. No:77017



Name & Seal of DDRC SRL Branch :

Date & Time :

DDRC SRL Diagnostics Private Limited

Corp. Office: DDRC SRL Tower, G- 131, Panampilly Nagar, Ernakulam - 682 036
Ph No. 0484-2318223, 2318222, e-mail: info@ddrcsrl.com, web: www.ddrcsrl.com

Regd. Office: 4th Floor, Prime Square, Plot No.1, Gaiwadi Industrial Estate, S.V. Road, Goregaon (West), Mumbai - 400062.

X - RAY CHEST - REPORT

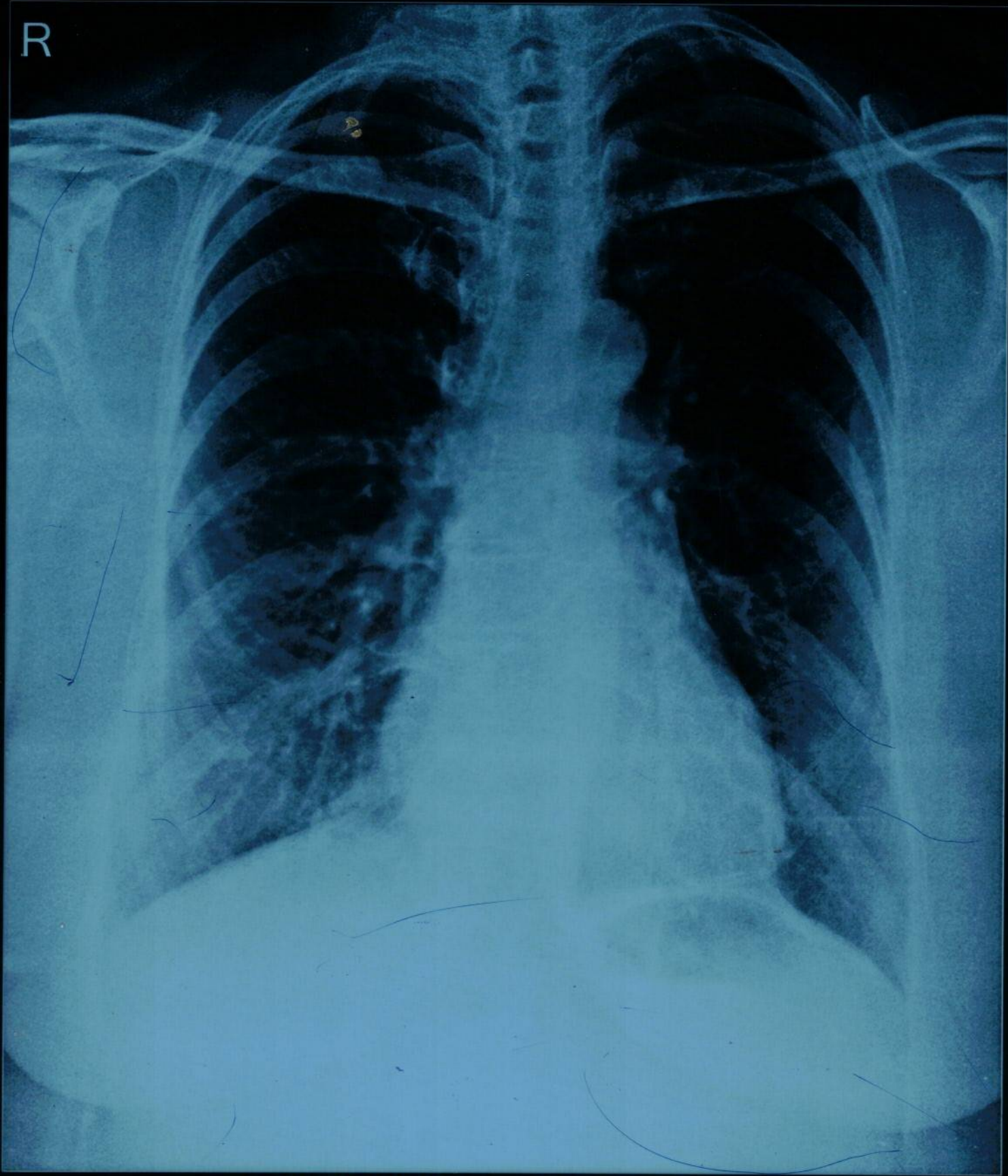
ACCESSION NO : 4036WB002798
 NAME : S USHA PANDALAI
 AGE : 53
 SEX : FEMALE
 DATE : 15..02.2023
 COMPANY : MEDIWHEEL

EXPOSURE : Adequate
 POSITIONING : Central
 SOFT TISSUES : Normal
 LUNG FIELDS : Normal
 HEART SHADOW : Normal
 CARDIOPHRENIC ANGLE : No obstruction
 COSTOPHRENIC ANGLE :
 HILUM : Normal
 OPINION : Normal chest XRay




Dr. Austin Varghese
 MBBS
 TCMC Reg. No: 77017

R



S USHA PANDALAI 53 Y 586 CHEST-PA 15-02-2023

DDRC SRL DIAGNOSTICS, GANDHI NAGAR, KOTTAYAM

DDRC SRL

ECG REPORT

ACCESSION NO : 4036WB002798

NAME : S USHA PANDALAI

AGE : 53

SEX : FEMALE

DATE : 15..02.2023

COMPANY : MEDIWHEEL

RATE : 55 bpm

RHYTHM : Sinus bradycardia

P. WAVE : Normal

P-R INTERVAL : 163 ms

Q,R,S,T. WAVES : Normal

AXIS : Normal

ARRHYTHMIAS : Nil

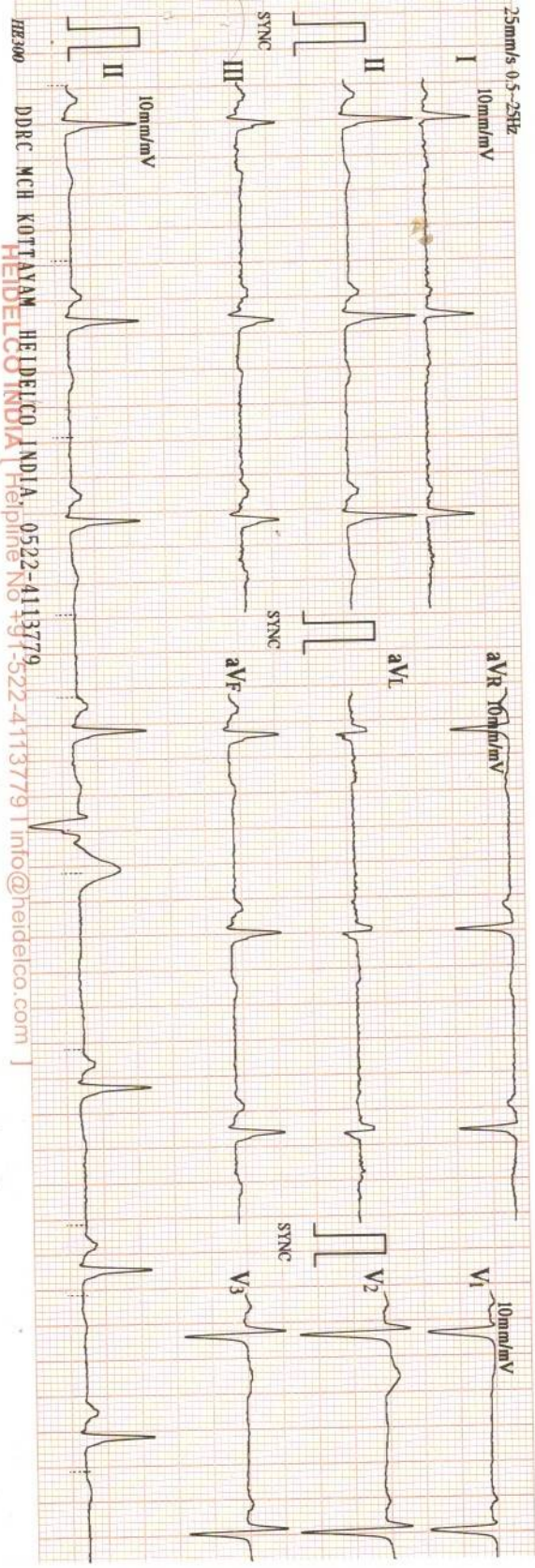
QT INTERVAL : 642 ms

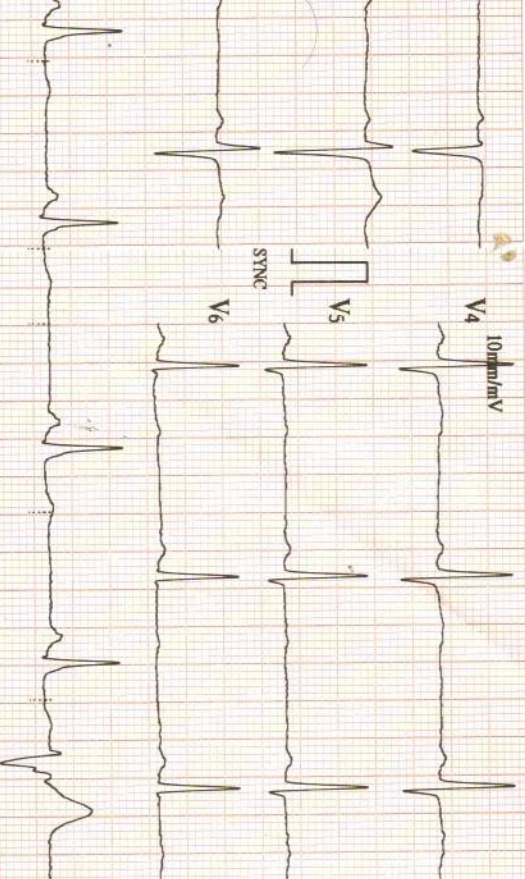
OTHERS : Ventricular premature complex in lead II

OPINION : Repeat ECG in 1 year lead II graph.



Austin Varghees
Dr. Austin Varghees
MBBS
TCMC Reg. No:77017





15/02/2023 11:22

ID : 1264

Name: S **USHA**

PANDALAI

Sex : Female

Age : 53

HR : 55

R-R : 1076

P-R : 163

QRS : 104

QT/QTc : 642/618

P/QRS/T : 72/60/-40

RV5/SV1 : 1.110/0.880 mV

RV5+SV1 : 1.990

V2:002(RIGS:V2.004/AMP:V1.006)



Confirmation with Physician

Physician:



**Dr. RAJENDRAN'S
CARE & CURE DENTAL CLINIC**

KHI - 2653/13

OTHALATHUMOOTIL COMMERCIAL COMPLEX (FIRST FLOOR)
SAMKRANTHI, KOTTAYAM - 686 016, KERALA. Mob: 9446026310

DATE 15/02/2023

OP NO. NAME Usha Pandalai S AGE 53 SEX F

C/O

D/O

IND FOR

Rx

The patient named Usha Pandalai S of age 53 years has undergone routine dental checkup. On examination caries noted w.r.t $\overline{67}$. Edentulous space noted w.r.t $\overline{87}$. Patient is advised to undergo restorations and denture replacement along with scaling procedure. Examination Fee: 100/- Dr. Namitha.



Dr. ANN NAMITHA JACOB, BDS
Dental Surgeon
KDC, Reg.No: 15586/A
Kottayam, Kerala



Name: USHA PANDALAI
Age/Sex: 53 yrs/F
Accession No: 4036WB002798

Report Date: 15.02.2023
Ref.by: Mediwheel

USG ABDOMEN & PELVIS

OBSERVATIONS:

Liver: **Mildly enlarged in size. Shows increased parenchymal echotexture.** No focal parenchymal lesion noted. The biliary radicals appear normal. Portal vein is normal (11 mm).

Gall bladder: Distended (measures 5.4 x 1.5 cm) No calculus seen. No e/o of any wall thickening / edema. No e/o any pericholecystic collection.

CBD: Not dilated (4 mm).

Spleen: Normal in size (10.3 cm) and echotexture. No focal lesion.

Pancreas: Head (2 cm), body (1.3 cm) and tail (1.4 cm) appear normal. No focal lesion. No calcification or duct dilatation noted.

Kidneys: Right kidney not visualized.
Left kidney measures 13.5 x 5.2 cm. Parenchymal thickness 2.1 cm Normal in position & size. Cortical echogenicity is normal. There is good cortico-medullary differentiation. No calculus seen. **A small cortical cyst measuring 2.5 x 2 cm is noted in lower pole.** No hydronephrosis.

Ureters: Not dilated.

Urinary Bladder: Distended, No luminal or wall abnormality noted.

Uterus: Is anteverted and normal in size measures 7 x 4.2 x 4.2 cm. Myometrial echo is uniform. Endometrial echo is normal. ET- 4.5 mm. Cavity is empty.

Ovaries: Right ovary: 3.3 x 1.3 cm, Normal in size and morphology.
Left ovary: Suboptimally visualized.

Adnexa: No adnexal lesions.

Others: No evident lymphadenopathy. No evidence of bowel wall thickening/echogenic mesentery/dilated bowel loops. Normal peristalsis seen. No free fluid in the peritoneal cavity. No pleural effusion noted.

IMPRESSION:

- **Mild hepatomegaly with grade I fatty changes.**
- **Small left renal cortical cyst.**

Dr. Deepak.V, MBBS, DMRD
Radiologist

Note: This is radiological opinion and not the final diagnosis. Ultrasound is limited by patient adiposity, bowel gas and correlate clinically and investigate further as needed.

Patient

Exam

ID
Name
Birth Date
Gender

15-02-2023-0016
USHA
Other

Accession #
Exam Date
Description
Sonographer

15022023

[2D] G8/118dB/FA10/P90/HAR/FSI 1



[2D] G8/118dB/FA10/P90/HAR/FSI 1



[2D] G8/118dB/FA10/P90/HAR/FSI 1



[2D] G24/118dB/FA10/P90/HAR/FSI 1



[2D] G29/118dB/FA10/P90/HAR/FSI 1



[2D] G29/118dB/FA10/P90/HAR/FSI 1



Name: USHA PANDALAI
Age/Sex: 53 yrs/F
Accession No: 4036WB002798

Report Date: 15.02.2023
Ref.by: Mediwheel

MAMMOGRAM REPORT (BOTH BREASTS)

Cranio-caudal and Medio-lateral oblique views of both breasts were taken.

Right breast

Multiple small rounded calcified foci are noted distributed diffusely.
No evidence of any mass lesion / asymmetric density noted.
No evidence of any architectural distortion seen.
There is no skin thickening or nipple retraction.
No obvious lymph nodes seen in the axillary region.

High frequency Sonography: Reveals no focal / diffuse mass lesion or obviously dilated ducts.


Left breast

Multiple small rounded calcified foci are noted distributed diffusely.
No evidence of any mass lesion / asymmetric density noted.
No evidence of any architectural distortion seen.
There is no skin thickening or nipple retraction.
No obvious lymph nodes seen in the axillary regions.

High frequency Sonography: Reveals no focal / diffuse mass lesion or obviously dilated ducts.

IMPRESSION:

- **Multiple small round calcifications in right and left breast.** Suggest correlation with previous study.


Dr. Deepak.V, MBBS, DMRD
Radiologist

Encl: Film

This is a professional opinion based on imaging findings and not a diagnosis by it self. Please correlate clinically and with other imaging / laboratory investigations.

RCC



RMLO




Bank of Baroda
बैंक ऑफ बड़ौदा

नाम
Name : USHA PANDALAI S.

कर्मचारी कूट. क्र
E.C.No: 155294

जारीकर्ता प्राधिकारी
Issuing Authority : ज. म. प्र. क्ष. का. त्रिचन्द्रम
DGM, RO, Trivandrum

धारक के हस्ताक्षर
Signature of Holder : *Usha Pandalai*



मिलने पर निम्नलिखित को लौटाए
सहायक महाप्रबंधक (सुरक्षा)
बैंक ऑफ बड़ौदा, चंडीदा कापोरेट सेन्टर
सी - 26 जी-ब्लॉक, बान्द्रा कुर्ला कॉम्प्लेक्स, मुंबई 400051 भारत
फोन 91 22 5698 5196 फैक्स 91 22 2652 5747

If found, please return to
Asst. General Manager (Security)
Bank of Baroda, Baroda Corporate Centre
C-26, G-Block, Bandra-Kurla Complex, Mumbai 400051 - India
Phone 91 22 5698 5196, F 91 22 2652 5747

ररर ररर /Blood Group: O+ve
पहचान चिह्न /Identification Marks: Brown mole on right side of head
behind the ear.

Usha Pandalai

