



**Apollo Clinic**  
PHYSICAL EXAMINATION FORM

**Apollo Clinic**  
Expt. of Diagnostics

Date 25.10.23

UHID 183403

Name Mrs J m

Kalashwari Age 44 yrs F

Height

139 Cms

Weight

40.1 Kgs

Chest Measurement

(in)cm

(out)cm

HIP

cm

Kgs/cm<sup>2</sup>

Waist

94 Bt/Min

BMI

31

%

Pulse

94

mm/Hg

SPO2

93

BP

101/80

Apollo Clinic, A. S. Rao Nagar.

## CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination of  
T.M. Lakshmi Sai on 26/10/23

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

	Tick
<ul style="list-style-type: none"> <li>• Medically Fit</li> </ul>	<input type="checkbox"/>
<ul style="list-style-type: none"> <li>• Fit with Restrictions/ Recommendations</li> </ul> <p>Though following restrictions have been revealed in my opinion, these are not impediments to the job.</p> <ol style="list-style-type: none"> <li>1. <u>USG changes noted. Adv: follow up (er)</u></li> <li>2. <u>consult Cardiologist</u></li> <li>3. _____</li> </ol> <p>However the candidate should follow the advice medication that has been communicated to him/her.</p> <p>Review after .....</p>	<input checked="" type="checkbox"/>
<ul style="list-style-type: none"> <li>• Currently Unfit.</li> </ul> <p>Review after.....recommended.</p>	<input type="checkbox"/>
<ul style="list-style-type: none"> <li>• Unfit</li> </ul>	<input type="checkbox"/>



**Dr. VIVEK BELDE**  
 M.D.B., D.F.M.(UK)  
 Regd. No. 24141  
**CONSULTANT PHYSICIAN**  
 Dr. Vivek Belde  
 Reg No :24141  
**Consultant physician**  
**Apollo Clinic**  
**A S Rao Nagar**

Patient Name	: Mrs. T M Lakshmi Sai	Age	: 47 Y/F
UHID	: CASR.0000183403	OP Visit No	: CASROPY214848
Reported By:	: Dr. MRINAL .	Conducted Date	: 25-10-2023 12:04
Referred By	: SELF		

### **ECG REPORT**

#### **Observation :-**

1. Normal Sinus Rhythm.
2. Heart rate is 85 beats per minutes.
3. No pathological Q wave or ST-T changes seen.
4. Normal P,QRS,T waves and axis.
5. No evidence of chamber, hypertrophy or enlargement see

#### **Impression:**

NORMAL RESTING ECG.

----- END OF THE REPORT -----



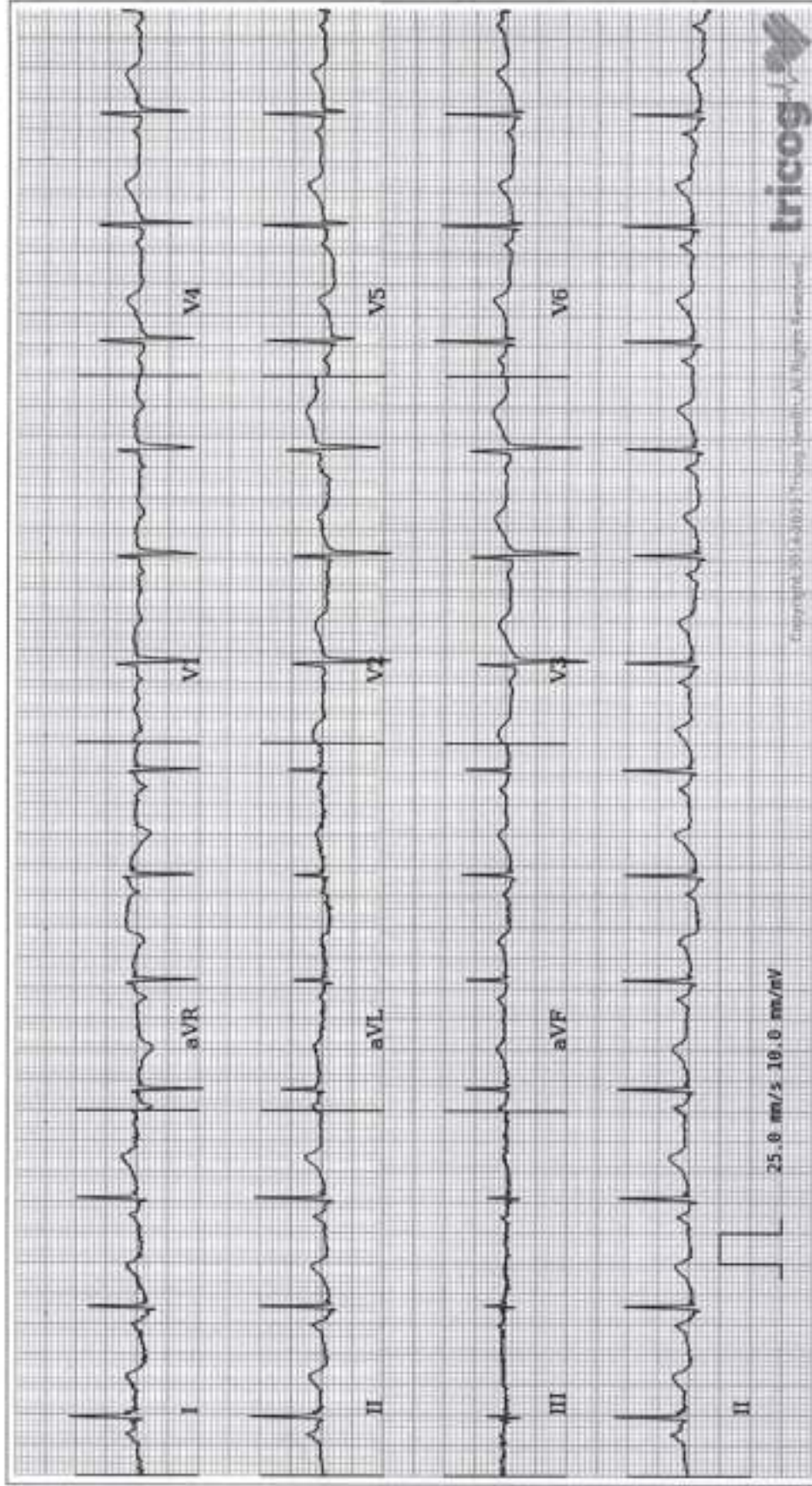
Dr. MRINAL .



Apollo Clinic

Age / Gender: 47/Female  
Patient ID: 0000183403

Date and Time: 25th Oct 23 8:12 AM



AR: 85bpm    VR: 85bpm    QRSO: 68ms    QT: 386ms    QTcB: 45.9ms    PRI: 132ms    P-R-T: 50° 37° 47°

**ECG Within Normal Limits: Sinus rhythm, Normal ECG, correlate clinically. Please correlate clinically.**

REPORTED BY



Disclaimer: Analysis in this report is based on ECG alone and should only be used as an adjunct to clinical history, symptoms and results of other invasive and non-invasive tests and must be interpreted by a qualified physician.

# ORAL EXAMINATION FORM



Date: 25/10/2023

Patient ID: \_\_\_\_\_ MHC

Patient Name: Ms. TM Lakshmi Sai Age: 47 Sex: Male  Female

Chief Complaint: General checkup

Medical History:

Drug Allergy:

Medication currently taken by the Guest:

Initial Screenign Findings:

Dental Caries:

Missing Teeth:

Impacted Teeth:

Attrition / Abrasion:

Bleeding: ++

Pockets / Recession:

Calculus / Stains: ++

Mobility:

Restored Teeth: Spacing

Non - restorable Teeth for extraction /  
Root Stumps:

Malocclusion:

Others:

Nil

Advice: (1) Advised oral prophylaxis & follow up.

Doctor Name & Signature: Dr. Manika

Mrs. T. M. Lakshmi Sai

474/F

05. Oct. 2023.

DNS to @ B/L Ad.OM


OSA

Adv

1) Pure tone Audiometry  
Impedence Audiometry  
Speech Audiometry.

2) CT scan Pns ← <sup>long</sup> Axial  
Sagittal.

3) PSG.

  
(D. Vanshi)

CONSENT FORM

MR/MRS/MISS TM Lakshmi Sai I AM NOT INTERESTED TO GIVE THE <sup>Pap Smear</sup> STOOL/URINE

SAMPLE IN THE GIVEN HEALTH CHECK PACKAGE

UHID: 183403

CORPORATE NAME: Ascend

SIGNATURE: Lakshmi Sai

DATE: 25/10/2023

# POWER PRESCRIPTION

NAME: *Lakshmi Sai*  
AGE: *47 years.*

GENDER: *M/F*      DATE:  
UHID:

## RIGHT EYE

	SPH	CYL	AXIS	VISION
DISTANCE	<i>-0.50</i>	<i>-</i>	<i>-</i>	<i>6/6</i>
<i>ADD</i> NEAR	<i>+1.75</i>	<i>-</i>	<i>-</i>	<i>nb</i>

## LEFT EYE

	SPH	CYL	AXIS	VISION
DISTANCE	<i>-0.50</i>	<i>-</i>	<i>-</i>	<i>6/6</i>
<i>ADD</i> NEAR	<i>+1.75</i>	<i>-</i>	<i>-</i>	<i>nb</i>

COLOUR VISION : *normal*

DIAGNOSIS :

OTHER FINDINGS :

INSTRUCTIONS :

*[Signature]*  
SIGNATURE



<b>Patient Name</b>	: Mrs. T M Lakshmi Sai	<b>Age/Gender</b>	: 47 Y/F
<b>UHID/MR No.</b>	: CASR.0000183403	<b>OP Visit No</b>	: CASROPV214848
<b>Sample Collected on</b>	:	<b>Reported on</b>	: 25-10-2023 15:52
<b>LRN#</b>	: RAD2132741	<b>Specimen</b>	:
<b>Ref Doctor</b>	: SELF		
<b>Emp/Auth/TPA ID</b>	: 721658		

**DEPARTMENT OF RADIOLOGY**

**ULTRASOUND - WHOLE ABDOMEN**

**Liver 16.3cm** Enlarged in size and shows increased echotexture.

Portal vein branches are mildly dilated

Main portal vein diameter measuring **12.7mm**

**Gall bladder** is well distended. No evidence of calculus. Wall thickness appears normal.  
No evidence of periGB collection. No evidence of focal lesion is seen.

**Spleen** appears normal. No focal lesion seen. Splenic vein appears normal.

**Pancreas** appears normal in echopattern. No focal/mass lesion/calcification.  
No evidence of peripancreatic free fluid or collection. Pancreatic duct appears normal.

**Right kidney : 92x42mm**                      **Left kidney : 95x44mm**

Both the kidneys appear normal in size, shape and echopattern. Cortical thickness and CM differentiation are maintained. No calculus / hydronephrosis seen on either side.

**Urinary Bladder** is well distended and appears normal. No evidence of any wall thickening or abnormality.

**Uterus** Small in size post menopausal status

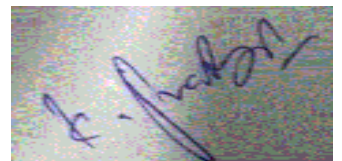
ET : Not well delineated

**Both ovaries** : Not adequately demonstrable

**IMPRESSION:-Fatty Liver With Mild Hepatomegaly.**

**Main Portal Vein Mildly Prominent Portal Vein Branches Are Mildly Dilated**

**Suggested MRCP if Clinically Indicated.**



**Dr. PRAVEEN BABU KAJA**  
Radiology