

Annexure-2

Self-Health Declaration
(Please ✓ Mark Where Applicable)



1 PERSONAL DETAILS:

Name: First Name RAJNI Middle Name _____ Surname KUMARI

Address: Flat no 2402, Tower - 3A, Renewal forest Kanjur Marg, opp. Mangatsam petrol pump - 7
City: Mumbai Pin: 400078

Birth Place: Ranchi Birth Date: 02/02/1989 Religion: Hindu
(dd/mm/yyyy)

Post applied for: _____ Marital Status: Married / Unmarried Gender: M / F

2 PREVIOUS EMPLOYMENT: Yes / No If yes specify

Name	Nature of work	Duration
i)		
ii)		
iii)		

3 NAME OF FAMILY DOCTOR:

Address:

Contact Details:

4 PERSONAL HABITS:

- i) Smoking
- ii) Tobacco chewing
- iii) Alcohol
- iv) Any other

N/A

5 MEDICAL HISTORY:

i) **ANY DISABILITY:** Yes / No If yes specify with disability %

ii) **PERSONAL HISTORY:**

Are you in good health and capable of full work
Have you ever suffered from job related disease or injury?
Have you ever been discharged or rejected on medical grounds?

Yes	No
<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>

Types of Previous Occupation (Pl. describe in brief about company, nature of work, duration in years)

- NA -

iii) Have you ever suffered from any of the following (Answer Yes or No. if yes, give details)

Y	N		Y	N	
	<input checked="" type="checkbox"/>	Hypertension		<input checked="" type="checkbox"/>	Hepatitis-B
	<input checked="" type="checkbox"/>	Diabetes		<input checked="" type="checkbox"/>	Cancer
	<input checked="" type="checkbox"/>	Heart disease		<input checked="" type="checkbox"/>	Stroke
	<input checked="" type="checkbox"/>	Kidney diseases		<input checked="" type="checkbox"/>	Bronchitis
	<input checked="" type="checkbox"/>	Tuberculosis		<input checked="" type="checkbox"/>	Any allergy
	<input checked="" type="checkbox"/>	Chronic lung disease (e.g. Pleurisy Pneumonia etc.)		<input checked="" type="checkbox"/>	Any chronic ear or hearing problem (e.g. sinusitis, rhinitis otitis etc.)
	<input checked="" type="checkbox"/>	Epilepsy, Fits, Fainting or Dizziness		<input checked="" type="checkbox"/>	Mental disorder of any kind
	<input checked="" type="checkbox"/>	Any major operation or injury		<input checked="" type="checkbox"/>	Any other illness

Details of the above if "Yes")

(For female candidates only)

Are you pregnant at present? Y N

Date of L.M.P. _____

iv) Immunization: Yes No

Tetanus Toxoid	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Hepatitis B	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Others	<input type="checkbox"/>	<input checked="" type="checkbox"/>

6 FAMILY HISTORY:

Has anyone of your parents suffered from any of the following: Yes / No

(If yes, Please ✓ Mark Where Applicable)

	Father	Mother
Hypertension	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Heart Disease	<input type="checkbox"/>	<input type="checkbox"/>
Cancer	<input type="checkbox"/>	<input type="checkbox"/>
Diabetes	<input type="checkbox"/>	<input type="checkbox"/>
Tuberculosis	<input type="checkbox"/>	<input type="checkbox"/>
Epilepsy	<input type="checkbox"/>	<input type="checkbox"/>
Any other Disease	<input type="checkbox"/>	<input type="checkbox"/>

	IF LIVING		IF DEAD	
	AGE	HEALTH (Good, Bad, Fair)	AGE AT DEATH	CAUSE OF DEATH
Father	58	Good		
Mother	55	Good		
Spouse	—			
Children-1	—			
Children -2	—			

7 I declare that the above statements are true and complete to the best of my knowledge and belief. In case this information is found to be false by the company, then the company reserves the right to terminate my services without giving any notice. I agree that the results of this medical examination in general terms may be revealed to the company if required. I also fully understand that in case I am declared medically unfit due to any reason, I shall not be entitled for the employment in the company. However, the decision taken by recruitment committee about my medical fitness will be final and binding to me.

Date: 19/04/2023

Rajni Kumari
(Signature of Candidate)

Annexure-3

Pre-Employment Medical Assessment

(All details given below will be filled by examine physician & treated as confidential)
(Please ✓ Mark Where Applicable)

1 Personal Habits: - N/A

- i) Smoking
- ii) Tobacco chewing
- iii) Alcohol
- iv) Any other

2 Medical History:

i) **Any Disability:** Yes / No If yes specify with disability %

ii) **Personal History:**

N/A

iii) **Known case of or past history of**

iv) **Immunization:** Yes No

	Yes	No
Tetanus Toxoid	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Hepatitis B	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Others	<input checked="" type="checkbox"/>	<input type="checkbox"/>

COVID vaccine (2 doses)

v) **Family History:**

Has anyone of parents suffered from

<input checked="" type="checkbox"/> Hypertension (mother)	<input type="checkbox"/> Diabetes
<input type="checkbox"/> Heart Disease	<input type="checkbox"/> Tuberculosis
<input type="checkbox"/> Cancer	<input type="checkbox"/> Epilepsy
	<input type="checkbox"/> Any other Disease

3 Physical Examination:

i) Build: Poor / Average / Strong Skin: fair
 ii) Throat: — Tonsils: — Thyroid: — Lymph nodes:
 iii) Teeth & Gums: NAD. Tongue:
 iv) Height 149 cms Weight 65 kg BMI

v) Identification marks:
A mole on the right (lower) elbow

1 Vision (To be checked by eye specialist):

General Eye examination: _____

		Rt	Lt	Colour Vision (Pls ✓ Mark Applicable)	
Visual Acuity	Distance	<input type="checkbox"/>	<input type="checkbox"/>	Normal Colour vision	<input checked="" type="checkbox"/>
	Near	<u>N5</u>	<u>N5</u>	Total colour deficiency	<input type="checkbox"/>
Corrected Vision	Distance	<u>6/6</u>	<u>6/6</u>	Partial Colour Deficiency	<input type="checkbox"/>
	Near	<input type="checkbox"/>	<input type="checkbox"/>	If partial - pl. mention _____	
Power of lens	Spherical	<input type="checkbox"/>	<input type="checkbox"/>		
	Cylindrical	<input type="checkbox"/>	<input type="checkbox"/>		
	Axis	<input type="checkbox"/>	<input type="checkbox"/>		

	Yes	No
Squint	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Nystagmus	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Night Blindness	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Any other eye disease	<input type="checkbox"/>	<input checked="" type="checkbox"/>

If yes pl. give details _____



Dr. Arun
MD Pathology

Signature & Seal of Ophthalmologist

5 Hearing:

External Examination: Rt N Lt N
Rinne's Test: Neg Weber's Test: Neg
Conversational Hearing/ Whispering: -
Audiometry (Comment): -
dB Right Ear _____ dB Left Ear _____

6 Cardio-vascular System:

Pulse-Rate 74 /min Blood Pressure 110 80 mm hg
Sys Dia
Heart Sounds NAD Murmur Present Absent Details if present -
Character: Regular / Irregular Normal

7 Respiratory System:

Shape of Chest: NAD Breath Sounds: _____

8 Abdomen:

Liver: N Spleen: N Any Abdominal Lump: Nil

9 Genito Urinary System:

Hernia: Nil Hydrocele/Varicocele: Nil

10 Venereal Disease: _____

11 Special Conditions: Flat feet _____ Varicose Veins _____

12 Nervous System:

Pupillary Reaction: N Planter Reflex: N
Knee Jerk Reflex: N Romberg Sign: +ve -ve

13 Investigations:

i) Urine: Sp. Gr. 1.020 Reaction 6.0 Albumin Absent Sugar Absent
Microscopic: puscell 2-3 cpi 1-2 lcy
Blood: Haemoglobin 10.9 g% HbA1c 5.38 Bl. Gr. A +ve -ve

ii) Chest X-ray: NAD
iii) E.C.G: WNL
iv) USG Whole Abdomen: NAD

v) 2D Echo/TMT: _____

vi) PFT: FVC _____ FEV1 _____ FEV1/FVC % _____ PEFR _____

vii) Any other Investigations / clinical finding: _____

14 COMMENTS AND RECOMMENDATIONS:

(Pls Mark Applicable)

<input checked="" type="checkbox"/> Fit	<input type="checkbox"/> Unfit
---	--------------------------------

Remarks: _____

Details of Examining Physician:

Name: _____

Registration No.: _____

Address: _____

Contact No.: _____

DR. M. DEBALA MD
Approved By DG Shipping (GOI)
Reg. No. (MMC) 2021/07/6849
102-103-104, Gateway Plaza,
Central Avenue Road,
Hiranandani Gardens,
Powai, Mumbai-400076.
SEA BIRD MEDICARE CENTRE



Signature with Seal of Examining Physician

For office use only:

Date of receipt of original documents: _____ PEM No.: _____

MDMS No: _____

Medically

<input checked="" type="checkbox"/> Fit	<input type="checkbox"/> Temp. Unfit	<input type="checkbox"/> Unfit
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Special Remarks: _____



भारत सरकार



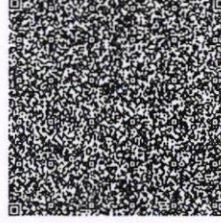
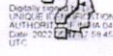
भारत सरकार
Government of India

भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India

नामांकन क्रम/ Enrolment No.: 0656/06920/00775

To
रजनी कुमारी
Rajni Kumari
C/O: Anchal Verma
Pyada Toli
Near Amar Medical Hall
Upper Bazar
Ranchi G.P.O.
Ranchi Jharkhand - 834001
9110156741

Validity: unknown



आपका आधार क्रमांक / Your Aadhaar No. :

4471 2928 9661

VID : 9161 0967 1134 6887

मेरा आधार, मेरी पहचान



भारत सरकार
Government of India



Issue Date: 22/07/2011



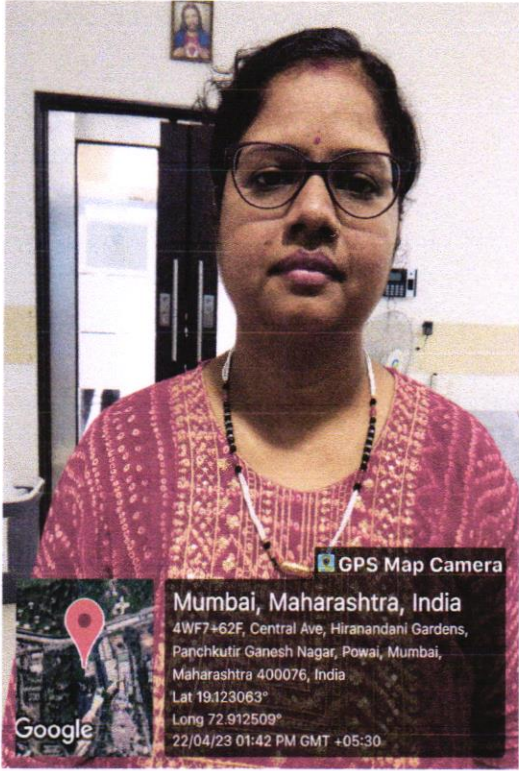
रजनी कुमारी
Rajni Kumari
जन्म तिथि/DOB: 02/02/1989
महिला/ FEMALE

Rajni Kumari

4471 2928 9661

VID : 9161 0967 1134 6887

मेरा आधार, मेरी पहचान



RAJANI KUMARI

Dr- 22/04/2023

TO

The Apollo Medical Healthcare &
The Sea Bird, Powai, Central Avenue

Re: Regarding Pepsmeat test

Dear Sir

I, Anchal Verma, Employee of B02, was going under
health check-up with my spouse ~~was~~ Rajni Kumari. One
of the test regarding female name "Pepsmeat" ~~is~~ my
spouse is not interested for the test.

Kindly consider our request.

Yours faithfully

Rajni Kumari

Rajni Kumari



PID NO. : BDA0311

Name : RAJNI KUMARI

Sex / Age : Female / 33 Years

Ref By : APOLLO HEALTH AND LIFESTYLE LIMITED

Reference :

Sample Collected At :

Sea Bird Medicare
105-107 Gateway Plaza, Central Avenue, Hiranandani Gardens, Powai, Mumbai-400076

Processing Location: - Sea Bird Medicare
105-107 Gateway Plaza, Central Avenue, Hiranandani Gardens, Powai, Mumbai-400076

Reg. Date

19-Apr-2023 / 11:48 am

Coll Date

19-Apr-2023 / 10:33 am

Report Date

19-Apr-2023 / 5:12 pm

REPORT

Blood Group

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>BIOLOGICAL REFERENCE INTERVAL</u>
BLOOD GROUP			
ABO Group	"A"		
RH (D)	Positive		

Method : Slide Method
Sample: Whole Blood (EDTA)

----- End of Report -----

DR. SANDIP M HUDDERAR
MBBS, DCP

Consultant Pathologist

DR. DEBALA CHANU MAIBAM
MBBS, MD (PATH)

Head- Pathology



LATHA SONAWANE
Lab Technician



PID NO. : BDA0311

Name : RAJNI KUMARI

Sex / Age : Female / 33 Years

Ref By : APOLLO HEALTH AND LIFESTYLE LIMITED

Reference :

Sample Collected At :

Sea Bird Medicare
105-107 Gateway Plaza, Central Avenue, Hiranandani Gardens, Powai, Mumbai-400076

Processing Location: - Sea Bird Medicare
105-107 Gateway Plaza, Central Avenue, Hiranandani Gardens, Powai, Mumbai-400076

Reg. Date

19-Apr-2023 / 10:28 am

Coll Date

19-Apr-2023 / 10:33 am

Report Date

19-Apr-2023 / 5:12 pm

REPORT

BLOOD SUGAR

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>BIOLOGICAL REFERENCE INTERVAL</u>
Blood Glucose (Fasting), plasma (Plasma, Method- Hexokinase) NORMAL : 70 - 100 mg/dl Pre-Diabetic : 100 - 125 mg/dl Diabetic : >125 mg/dl (ON MORE THAN ONE OCCASION) Reference : American diabetes association guidelines 2022	88	mg/dl	70.00 - 100.00 mg/dl
Urine Glucose (Fasting)	Absent		Absent
Urine Ketones (Fasting)	Absent		Absent

Test Done on Fully Automated Cobas C111 Analyser

----- End of Report -----



MC - 5321

DR. SANDIP M HUDDEDAR
MBBS, DCP

Consultant Pathologist

DR. DEBALA CHANU MAIBAM
MBBS, MD (PATH)

Head- Pathology



LATHA SONAWANE
Lab Technician

Proudly... Caring For You

This is computer generated medical diagnostics report that has been validated by an Authorized Medical Practitioner/Doctor. The report does not need physical signature. Results relate only to the sample as received. Refer to conditions of reporting overleaf.

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



PID NO. : BDA0311

Name : RAJNI KUMARI

Sex / Age : Female / 33 Years

Ref By : APOLLO HEALTH AND LIFESTYLE LIMITED

Reference :

Sample Collected At :

Sea Bird Medicare
105-107 Gateway Plaza, Central Avenue, Hiranandani Gardens, Powai, Mumbai-400076

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105-107 Gateway Plaza, Central Avenue, Hiranandani Gardens, Powai, Mumbai-400076

Reg. Date

19-Apr-2023 / 10:28 am

Coll Date

19-Apr-2023 / 10:33 am

Report Date

19-Apr-2023 / 5:15 pm

REPORT

Complete Blood Count

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>BIOLOGICAL REFERENCE INTERVAL</u>
Hemoglobin	10.9	gm/dl	13.0 - 17.0
RED BLOOD CELLS			
R.B.C. Count	4.74	million / cumm	4.5- 5.5
PCV	36.1	%	40- 50
MCV	76.2	fL	83 - 101
MCH	23	pg	27 - 32
MCHC	30.2	gm / dl	31.5 - 34.5
RDW (CV)	13.8	%	11.6- 14.0
Total W.B.C. Count	4380	/cu.mm.	4000 - 10000
DIFFERENTIAL COUNT			
Neutrophils	57	%	40 - 80
Lymphocytes	29	%	20 - 40
Eosinophils	08	%	1 - 6
Monocytes	06	%	2 - 10
Basophils	00	%	0 - 1



MC - 5321

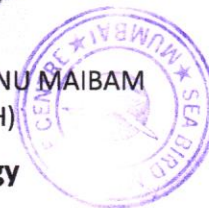
DR.SANDIP M HUDDEDAR
MBBS, DCP

Consultant Pathologist

Debala

DR.DEBALA CHANU MAIBAM
MBBS, MD (PATH)

Head- Pathology



Latha Sonawane

LATHA SONAWANE
Lab Technician



PID NO. : BDA0311

Name : RAJNI KUMARI

Sex / Age : Female / 33 Years

Ref By : APOLLO HEALTH AND LIFESTYLE LIMITED

Reference :

Sample Collected At :

Sea Bird Medicare
105-107 Gateway Plaza, Central Avenue, Hiranandani Gardens, Powai, Mumbai-400076

Processing Location: - Sea Bird Medicare

105-107 Gateway Plaza, Central Avenue, Hiranandani Gardens, Powai, Mumbai-400076

Reg. Date

19-Apr-2023 / 10:28 am

Coll Date

19-Apr-2023 / 10:33 am

Report Date

20-Apr-2023 / 3:46 pm

REPORT

Complete Blood Count

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>BIOLOGICAL REFERENCE INTERVAL</u>
Platelet Count	152000	/cumm	150000 - 410000

MORPHOLOGY

RBC Morphology	Normocytic Normochromic
WBC Morphology	Normal
Platelets on Smear	Adequate on smear

(EDTA Whole Blood - Tests done Automated Three part cell counter (RBC, WBC, Platelets count by impedance, Haemoglobin by colorimetric Cyanmeth free method. Rest are calculated parameters. Microscopy is manual by Pathologist.)

----- End of Report -----



MC - 5321

DR. SANDIP M HUDDERAR
MBBS, DCP

Consultant Pathologist

Debala

DR. DEBALA CHANU MAIBAM
MBBS, MD (PATH)

Head- Pathology



Gavali

Pranali Gavali
Lab Technician

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Powai: 022-25701053 / 25704157

Kochi: 0484- 2322022 / 4032022



PID NO. : BDA0311

Name : RAJNI KUMARI

Sex / Age : Female / 33 Years

Ref By : APOLLO HEALTH AND LIFESTYLE LIMITED

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Reg. Date

19-Apr-2023 / 11:48 am

Coll Date

19-Apr-2023 / 10:33 am

Report Date

19-Apr-2023 / 5:12 pm

REPORT

Erythrocyte Sedimentation Rate (ESR)

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>BIOLOGICAL REFERENCE INTERVAL</u>
E.S.R	30	mm at 1hr	0 - 20

Method: Wintrobe . Sample: Whole Blood (EDTA)

----- End of Report -----

DR.SANDIP M HUDDER
MBBS, DCP

Consultant Pathologist

DR.DEBALA CHANU MAIBAM
MBBS, MD (PATH)

Head- Pathology



LATHA SONAWANE
Lab Technician



PID NO. : BDA0311

Name : RAJNI KUMARI

Sex / Age : Female / 33 Years

Ref By : APOLLO HEALTH AND LIFESTYLE LIMITED

Reference :

Sample Collected At :

Sea Bird Medicare
105-107 Gateway Plaza, Central Avenue, Hiranandani Gardens, Powai, Mumbai-400076

Processing Location: - Sea Bird Medicare
105-107 Gateway Plaza, Central Avenue, Hiranandani Gardens, Powai, Mumbai-400076

Reg. Date

19-Apr-2023 / 11:48 am

Coll Date

19-Apr-2023 / 10:33 am

Report Date

19-Apr-2023 / 4:54 pm

REPORT

Glycosylated Haemoglobin (HbA1c)

Test	Result	Units	BIOLOGICAL REFERENCE INTERVAL
HbA1c	5.38	%	< 5.7
Non-diabetic : <= 5.7 % Pre-Diabetic : 5.7 - 6.4 % Diabetic : > = 6.5 (EDTA Whole Blood, Turbidimetric)			
Mean Blood Glucose (MBG)	114.23	mg/dl	

Interpretation & Remark:

- HbA1c is used for monitoring diabetic control. It reflects the estimated average glucose (eAG).
- HbA1c has been endorsed by clinical groups & ADA (American Diabetes Association guideline 2022, for diagnosis of diabetes using a cut-off points of 6.5 %.
- Trends in HbA1c are a better indicator of diabetic control than a solitary test.
- Low glycated haemoglobin (below 4%) in a non-diabetic individual are often associated with systemic inflammatory diseases, chronic anaemia (especially severe iron deficiency & haemolytic), chronic renal failure and liver diseases. Clinical correlation suggested.
- To estimate the eAG from the HbA1C value, the following equation is used : $eAG(mg/dl) = 28.7 * A1c - 46.7$.
- Interference of Haemoglobinopathies in HbA1c estimation.
 - For Hb > 25%, an alternate platform (Fructosamine) is recommended for testing of HbA1c.
 - Homozygous hemoglobinopathy is detected, fructosamine is recommended for monitoring diabetic status.
 - Heterozygous state detected (D10/ Tosha G8 is corrected for HbS and HbC trait).
- In known diabetic patients, following values can be considered as a tool for monitoring the glycemic control.
 - Excellent Control - 6 to 7 %
 - Fair to Good Control - 7 to 8 %
 - Unsatisfactory Control - 8 to 10 %
 - and Poor Control - More than 10 %

Note : Hemoglobin electrophoresis (HPLC method) is recommended for detecting hemoglobinopathy.

----- End of Report -----



MC - 5321

DR.SANDIP M HUDDERAR
MBBS, DCP

Consultant Pathologist

DR.DEBALA CHANU MAIBAM
MBBS, MD (PATH)

Head- Pathology

LATHA SONAWANE
Lab Technician



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PID NO. : BDA0311

Name : RAJNI KUMARI

Sex / Age : Female / 33 Years

Ref By : APOLLO HEALTH AND LIFESTYLE LIMITED

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Processing Location: - Sea Bird Medicare

105-107 Gateway Plaza, Central Avenue, Hiranandani Gardens, Powai, Mumbai-400076

Reg. Date

19-Apr-2023 / 11:48 am

Coll Date

19-Apr-2023 / 10:33 am

Report Date

19-Apr-2023 / 5:12 pm

REPORT

LFT

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>BIOLOGICAL REFERENCE INTERVAL</u>
Sr. Alkaline Phosphatase (Serum, AMP Buffer IFCC) Test Done on Fully Automated Cobas C111 Analyser	49	U/L	35 - 104

----- End of Report -----



MC - 5321

DR. SANDIP M HUDDERAR
MBBS, DCP

Consultant Pathologist

DR. DEBALA CHANU MAIBAM
MBBS, MD (PATH)

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LATHA SONAWANE
Lab Technician

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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

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PID NO. : BDA0311

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Reg. Date

19-Apr-2023 / 10:28 am

Coll Date

19-Apr-2023 / 10:33 am

Report Date

19-Apr-2023 / 4:54 pm

REPORT

Lipid Profile

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>BIOLOGICAL REFERENCE INTERVAL</u>
Total Cholesterol	134.7	mg/dl	Upto 240
Method: CHOD-PAP			
Triglycerides	59.89	mg/dl	0 - 150
Method: GPO-PAP			
HDL Cholesterol-Direct	43.81	mg/dl	35 - 55
Method: Cholesterol-esterase-Direct			
LDL Cholesterol	78.91	mg/dl	<100
Calculated			
VLDL-Cholesterol	11.98	mg/dl	10 - 40
Calculated			
CHO/HDLC Ratio	3.07		Upto 5.0
Calculated			
LDLC/HDLC Ratio	1.80		2.5 - 3.5
Calculated			

Desirable Cholesterol Level : <200 mg/dl
Bordeline High Cholesterol : 200-239 mg/dl

Test Done on Fully Automated Cobas C111 Analyser
Sample: Serum

----- End of Report -----



MC - 5321

DR.SANDIP M HUDDEDAR
MBBS, DCP

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DR.DEBALA CHANU MAIBAM
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Head- Pathology

LATHA SONAWANE
Lab Technician





PID NO. : BDA0311

Name : RAJNI KUMARI

Sex / Age : Female / 33 Years

Ref By : APOLLO HEALTH AND LIFESTYLE LIMITED

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Report Date

19-Apr-2023 / 5:12 pm

REPORT

Liver Function Tests

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>BIOLOGICAL REFERENCE INTERVAL</u>
S.G.O.T. (Serum ,Method-IFCC / UV without P5P)	21.2	U/L	0 - 32
S.G.P.T. (Serum,Method- IFCC / UV without P5P)	17.9	U/L	0 - 33.0
GGT (Serum ,Method- IFCC Method)	12.1	U/L	5 - 36
Bilirubin (Total) (Serum ,Method-Diazo- End point)	0.44	mg/dl	0.0 - 1.20
Bilirubin (Direct) (Serum,Method-Diazo-End point)	0.16	mg/dl	0.0 - 0.80
Bilirubin (Indirect) Calculated	0.28	mg/dl	0.0 - 0.90
Total Proteins (serum,Method-Biuret)	7.3	g/dl	6.6 - 8.7
Albumin (Serum,Method-Bromocresol Green)	4.85	g/dl	3.5 - 5.2
Globulin Calculated	2.45	g/dl	1.90 - 3.70
A/G ratio Calculated	1.98		

Test Done on Fully Automated Cobas C111 Analyser

----- End of Report -----



MC - 5321

DR.SANDIP M HUDDERAR
MBBS, DCP

Consultant Pathologist

Debala

DR.DEBALA CHANU MAIBAM
MBBS, MD (PATH)

Head- Pathology

Latha Sonawane

LATHA SONAWANE
Lab Technician



Proudly... Caring For You

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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



PID NO. : BDA0311

Name : RAJNI KUMARI

Sex / Age : Female / 33 Years

Ref By : APOLLO HEALTH AND LIFESTYLE
LIMITED

Reference :

Sample Collected At :

Sea Bird Medicare
105-107 Gateway Plaza, Central Avenue, Hiranandani
Gardens, Powai, Mumbai-400076

Processing Location: - Sea Bird Medicare
105-107 Gateway Plaza, Central Avenue, Hiranandani
Gardens, Powai, Mumbai-400076

Reg. Date

19-Apr-2023 / 11:48 am

Coll Date

19-Apr-2023 / 10:33 am

Report Date

19-Apr-2023 / 4:54 pm

REPORT

RENAL PROFILE

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>BIOLOGICAL REFERENCE INTERVAL</u>
Blood Urea Method-Urease	23.76	mg/dl	16.6 - 48.5 mg/dl
Blood Urea Nitrogen Method-Urease	11.10	mg/dl	06 - 20 mg/dl
Creatinine Method-Kinetic Jaffes	0.59	mg/dL	0.5 - 0.90 mg/dl
Uric Acid Method: Uricase-POD	4	mg/dl	2.4 - 5.7

Test Done on Fully Automated Cobas C111 Analyser

----- End of Report -----



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105-107 Gateway Plaza, Central Avenue, Hiranandani Gardens, Powai, Mumbai-400076

Reg. Date

19-Apr-2023 / 11:48 am

Coll Date

19-Apr-2023 / 10:33 am

Report Date

19-Apr-2023 / 5:13 pm

REPORT

THYROID FUNCTION TEST

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>BIOLOGICAL REFERENCE INTERVAL</u>
TSH	2.78	µIU/ml	0.25-5 µIU/ml
T3	1.68	nmol/l	0.92-2.33 nmol/l
T4	90.33	nmol/l	60-120 nmol/l

The assay principle combines an enzyme immunoassay competition method with a final fluorescent detection (ELFA).

INTERPRETATION

TSH : A high TSH result often means an under active thyroid gland that is not responding adequately to the stimulation of TSH due to some type of acute or chronic thyroid dysfunction. A high TSH value can also occur when someone with a known thyroid disorder or who has had their thyroid gland removed is receiving too little thyroid hormone medication. A low TSH result can indicate an over active thyroid gland (hyperthyroidism) or excessive amounts of thyroid hormone medication in those who are being treated for an under active (or removed) thyroid gland. An abnormal TSH test result is usually followed by additional testing to investigate the cause of the increase or decrease.

T3: Triiodothyronine T3 contributes significantly to the maintenance of the euthyroid state, and the total T3 concentration has a role in screening for thyroid disease in conjunction with other tests. T3 alone cannot diagnose hypothyroidism, but it may be more sensitive than thyroxine (T4) for hyperthyroidism.

T4 : Thyroxine accounts for at least 90% of circulating protein-bound iodine. While >99.9% of T4 is protein-bound, primarily to thyroglobulin (TBG), it is the free fraction that is biologically active. In most patients the total T4 level is a good indicator of thyroid status, however it can sometimes be inadequate, and diagnostic efficiency may be improved by use of a total T4 test in conjunction with other tests.

----- End of Report -----

DR.SANDIP M HUDDERAR
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LATHA SONAWANE
Lab Technician

Page 11 of 13

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Powai: 022-25701053 / 25704157

Kochi: 0484- 2322022 / 4032022



PID NO. : BDA0311

Name : RAJNI KUMARI

Sex / Age : Female / 33 Years

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105-107 Gateway Plaza, Central Avenue, Hiranandani Gardens, Powai, Mumbai-400076

Reg. Date

19-Apr-2023 / 10:28 am

Coll Date

19-Apr-2023 / 10:33 am

Report Date

19-Apr-2023 / 5:13 pm

REPORT

URINE ANALYSIS

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>BIOLOGICAL REFERENCE INTERVAL</u>
<u>PHYSICAL EXAMINATION</u>			
Colour	Pale Yellow		Pale Yellow
Quantity	30 ml	ml	20 - 50
Appearance	Clear		Clear
Reaction (pH)	6.0		5.0 - 9.0
Specific Gravity	1.020		1.000 - 1.030
<u>CHEMICAL EXAMINATION</u>			
Proteins	Absent		Absent
Sugar	Absent		Absent
Ketone Bodies	Absent		Absent
Bile Salts	Absent		Absent
Bile Pigment	Absent		Absent
Urobilinogen	Normal	mg/dl	Normal (0.1 - 1.0 mg/dl)
Ocult Blood	Absent		Absent

MICROSCOPIC EXAMINATION

DR.SANDIP M HUDDERAR
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Head- Pathology

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19-Apr-2023 / 10:28 am

Coll Date

19-Apr-2023 / 10:33 am

Report Date

19-Apr-2023 / 5:13 pm

REPORT

URINE ANALYSIS

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>BIOLOGICAL REFERENCE INTERVAL</u>
Pus Cells	2 - 3 / hpf		2 - 3 / hpf
Red Blood Cells	Absent		Absent
Epithelial cells	1 - 2 / hpf		2 - 3 / hpf
Casts	Absent		Absent
Crystals	Absent		Absent
Other Findings	Absent		

METHOD:

Physical Examination : Visual Strip Method.

Chemical Examination : Bilirubin(Azo-coupling), Blood(Peroxidase), Glucose(Specific glucose-oxidase/oxidase reaction), Ketone(Rothera's test), Leukocytes(Reflectance Photometer(Leucocyte esterase)), Nitrite(Diazotization), pH(Double Indicator), Protein(Protein Error of Indicators), Specific Gravity(Refractometric method), Urobilinogen(Ehrlich).

Microscopy Examination : Automation/Manual Microscopy.

----- End of Report -----

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Sea Bird
Sea Bird Medicare Centre



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Accredited



PID NO. : BDA0311

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Sex / Age : Female / 33 Years

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LIMITED

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Reg. Date

19-Apr-2023 / 11:48 am

Coll Date

19-Apr-2023 / 10:33 am

Report Date

22-Apr-2023 / 5:09 pm

REPORT

BLOOD SUGAR

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>BIOLOGICAL REFERENCE INTERVAL</u>
Blood Glucose (PP) plasma (Plasma, Method- Hexokinase) Non-Diabetic : 70 - 140 mg/dl Pre-Diabetic : 140 - 199 mg/dl Diabetic : >200 mg/dl (ON MORE THAN ONE OCCASION) Reference : American diabetes association guidelines 2022	81.92	mg/dl	70.00 - 140.00
Urine Glucose (PP)	Absent		Absent
Urine Ketones (PP)	Absent		Absent

----- End of Report -----



MC - 5321

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Debala

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MBBS, MD (PATH)

Head- Pathology



Pritam Dhanawade

Pritam Dhanawade
Lab Technician

Proudly... Caring For You

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Powai: 022-25701053 / 25704157

Kochi: 0484- 2322022 / 4032022

Website: www.seabirdhf.com | Email: seabird@seabirdhf.com



Report ID : **RKM19416446**

Reg. : **19-Apr-2023**

Patient Name : **Ms. RAJNI KUMARI**

Report Date : **21-Apr-2023**

Rank :

Company Name : **M/S. APOLLO HEALTH AND LIFESTYLE**

Ref By : **DR.PARAG ARVIND PRADHAN**

Age/Sex : **34 Year / Female**

SONOGRAPHY (ABDOMEN)

Ref No : 21/04/2023

The real-time Sonography using 3.5 MHZ transducer shows:

LIVER: Liver is normal in size and echotexture. There is no focal or diffuse lesion seen. No intra or extrahepatic biliary radicle dilatation seen. Portal vein is normal in course and calibre.

GALL BLADDER: The Gall Bladder is well distended with normal wall thickness. No evidence of any calculus or mass seen. No pericholecystic fluid collection seen.

PANCREAS : Pancreas is normal in size and echogenicity. No focal lesion or peripancreatic fluid collection seen.

SPLEEN: Spleen is normal in size and echogenicity. No focal lesions seen.

BOTH KIDNEYS: Right kidney and left Kidney are normal in size, position and echogenicity; Cortico Medullary differentiation is normal. Right kidney measures 100.5x39.1mm in size. Left kidney measures 101.2x36.5mm in size. No hydronephrosis or calculi noted in both the kidneys.

URINARY BLADDER: Bladder normal in contour, capacity and wall thickness; No vesical calculi noted.

UTERUS & OVARIES: Uterus is normal in size and normal parenchymal echogenicity. No focal lesion seen. Impression:

This sonography study does not rule out intestinal lesions or mucosal lesions of other Viscera.

**Dr. Jacob
Mathew MD**

**Dr. Jagmohan L
Chopra MD**

Dr. Asghar Majeed



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E. C. G. REPORT

RATE 86 L Q. WAVE N

RHYTHM Reg QRS COMPLEX N

VOLTAGE N ST. SEGMENT N

P. WAVE N T. WAVE N

PR. INTERVAL N

REMARKS NSR/ no Lf - ST-T changes



ELECTROCARDIOGRAPHIC REPORT



Sea Bird

Sea Bird Medicare Pvt Ltd.

(ISO: 9001 - 2015)

NAME Rajni kumar

AGE 33 yrs DATE 19-04-23

- 101-102, 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

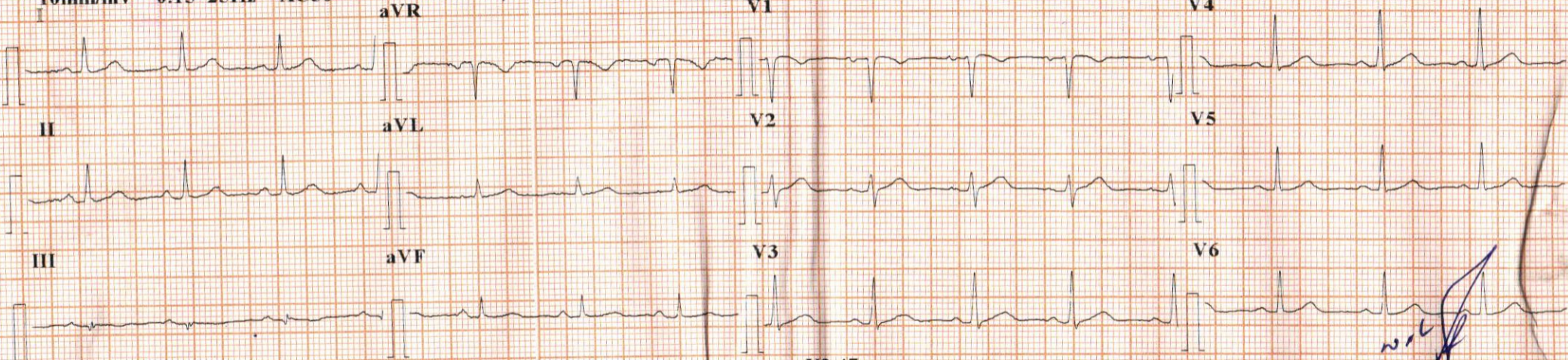
Apollo

19-04-23

Rajani kumari

08-06-2005 08:28:55

10mm/mV 0.15~25Hz AC50



25mm/s ♡86

V2.47

[Handwritten signature]