Registered On

Collected

: 23/Oct/2021 10:19:34

: 23/Oct/2021 11:14:58



Patient Name

Age/Gender

Add: 99, Shivaji Nagar Mahmoorganj,Varanasi Ph: 9235447795,0542-2223232 CIN : U85110DL2003PLC308206

: Mr.VIKAS KUMAR -MEDIWHEEL

: 29 Y 0 M 0 D /M



Age/Gender	: 29 Y 0 M 0 D /M		Collected	: 23/Oct/2021 1	
UHID/MR NO	: CVAR.0000023062		Received	: 23/Oct/2021 1	
Visit ID	: CVAR0071852122		Reported	: 23/Oct/2021 1	6:15:08
Ref Doctor	: Dr.Mediwheel - Arcofe			: Final Report	
		DEPARTMENT			_
	MEDIWHEEL			MALE BELOW 40 YRS	
Test Name		Result	Unit	Bio. Ref. Interval	Method
Blood Group (ABC) & Rh typing) * , Bloo	d			
Blood Group	,	A			
Rh (Anti-D)		POSITIVE			
COMPLETE BLOOD	D COUNT (CBC) * , Bloc	od			
Haemoglobin		16.00	mg/dl	Male-13.5-17.5 mg/dl	
				Female-12.0-	
		C 800 00	10	15.5mg/dl	
TLC (WBC)		6,800.00	/Cu mm	4000-10000	ELECTRONIC IMPEDANCE
DLC					
Polymorphs (Neuti	rophils)	60.00	%	55-70	ELECTRONIC IMPEDANCE
Lymphocytes		34.00	%	25-40	ELECTRONIC IMPEDANCE
Monocytes		3.00	%	3-5	ELECTRONIC IMPEDANCE
Eosinophils		3.00	%	1-6	ELECTRONIC IMPEDANCE
Basophils		0.00	%	<1	ELECTRONIC IMPEDANCE
ESR				a start and a start of the	
Observed		10.00	Mm for 1st hr.	1 States	
Corrected		6.00	Mm for 1st hr.		
PCV (HCT)		44.20	cc %	40-54	
Platelet count					
Platelet Count		1.51	LACS/cu mm	1.5-4.0	ELECTRONIC IMPEDANCE/MICROSCOPI
PDW (Platelet Distr	ibution width)	16.60	fL	9-17	ELECTRONIC IMPEDANCE
P-LCR (Platelet Larg	-	nr	%	35-60	ELECTRONIC IMPEDANCE
PCT (Platelet Hema	tocrit)	nr	%	0.108-0.282	ELECTRONIC IMPEDANCE
MPV (Mean Platele	et Volume)	nr	fL	6.5-12.0	ELECTRONIC IMPEDANCE
RBC Count					
RBC Count		4.97	Mill./cu mm	4.2-5.5	ELECTRONIC IMPEDANCE
Blood Indices (MC	V, МСН, МСНС)		-		
MCV	-	88.90	fl	80-100	CALCULATED PARAMETER
МСН		32.30	pg	28-35	CALCULATED PARAMETER
МСНС		36.30	%	30-38	CALCULATED PARAMETER
RDW-CV		12.40	%	11-16	ELECTRONIC IMPEDANCE
RDW-SD		42.00	fL	35-60	ELECTRONIC IMPEDANCE
Absolute Neutroph	ils Count	4,080.00	/cu mm	3000-7000	
		.,	,		

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Absolute Eosinophils Count (AEC)

/cu mm

40-440

204.00



Add: 99, Shivaji Nagar Mahmoorganj,Varanasi Ph: 9235447795,0542-2223232 CIN : U85110DL2003PLC308206



Patient Name	: Mr.VIKAS KUMAR -MEDIWHEEL	Registered On	: 23/Oct/2021 10:19:34
Age/Gender	: 29 Y 0 M 0 D /M	Collected	: 23/Oct/2021 11:14:58
UHID/MR NO	: CVAR.0000023062	Received	: 23/Oct/2021 11:50:43
Visit ID	: CVAR0071852122	Reported	: 23/Oct/2021 16:15:08
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF HAEMATOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method



S. M. Sinton Dr.S.N. Sinha (MD Path)

150 9001:2015

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Add: 99, Shivaji Nagar Mahmoorganj,Varanasi Ph: 9235447795,0542-2223232 CIN : U85110DL2003PLC308206



Patient Name	: Mr.VIKAS KUMAR -MEDIWHEEL	Registered On	: 23/Oct/2021 10:19:35
Age/Gender	: 29 Y 0 M 0 D /M	Collected	: 23/Oct/2021 11:14:58
UHID/MR NO	: CVAR.0000023062	Received	: 23/Oct/2021 11:50:43
Visit ID	: CVAR0071852122	Reported	: 23/Oct/2021 15:17:54
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Uni	t Bio. Ref. Interv	al Method
Glucose Fasting Sample:Plasma	90.70	0,	< 100 Normal 100-125 Pre-diabetes ≥ 126 Diabetes	GOD POD

Interpretation:

a) Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.
b) A negative test result only shows that the person does not have diabetes at the time of testing. It does not mean that the person will never get diabetics in future, which is why an Annual Health Check up is essential.
c) I.G.T = Impared Glucose Tolerance.

Glucose PP Sample:Plasma After Meal	110.00	mg/dl	<140 Normal 140-199 Pre-diabetes	GOD POD
			>200 Diabetes	

Interpretation:

a) Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.b) A negative test result only shows that the person does not have diabetes at the time of testing. It does not mean that the person will never get diabetics in future, which is why an Annual Health Check up is essential.c) I.G.T = Impared Glucose Tolerance.

GLYCOSYLATED HAEMOGLOBIN (HBA1C) * , EDTA BLOOD

Glycosylated Haemoglobin (HbA1c)	4.70	% NGSP	HPLC (NGSP)
Glycosylated Haemoglobin (Hb-A1c)	26.00	mmol/mol/IFCC	
Estimated Average Glucose (eAG)	97	mg/dl	

Interpretation:

NOTE:-

- eAG is directly related to A1c.
- An A1c of 7% -the goal for most people with diabetes-is the equivalent of an eAG of 154 mg/dl.
- eAG may help facilitate a better understanding of actual daily control helping you and your health care provider to make necessary changes to your diet and physical activity to improve overall diabetes mnagement.

The following ranges may be used for interpretation of results. However, factors such as duration of diabetes, adherence to therapy and the age of the patient should also be considered in assessing the degree of blood glucose control.





Add: 99, Shivaji Nagar Mahmoorganj,Varanasi Ph: 9235447795,0542-2223232 CIN : U85110DL2003PLC308206



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Age/Gender	: 29 Y 0 M 0 D /M	Collected	: 23/Oct/2021 11:14:58
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DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Unit

Bio. Ref. Interval Method

Haemoglobin A1C (%)NGSP	mmol/mol / IFCC Unit	eAG (mg/dl)	Degree of Glucose Control Unit
> 8	>63.9	>183	Action Suggested*
7-8	53.0 -63.9	154-183	Fair Control
< 7	<63.9	<154	Goal**
6-7	42.1 -63.9	126-154	Near-normal glycemia
< 6%	<42.1	<126	Non-diabetic level

*High risk of developing long term complications such as Retinopathy, Nephropathy, Neuropathy, Cardiopathy, etc. **Some danger of hypoglycemic reaction in Type 1 diabetics. Some glucose intolerant individuals and "subclinical" diabetics may demonstrate HbA1C levels in this area.

N.B.: Test carried out on Automated G8 90 SL TOSOH HPLC Analyser.

<u>Clinical Implications:</u>

*Values are frequently increased in persons with poorly controlled or newly diagnosed diabetes.

*With optimal control, the HbA 1c moves toward normal levels.

*A diabetic patient who recently comes under good control may still show higher concentrations of glycosylated hemoglobin. This level declines gradually over several months as nearly normal glycosylated *Increases in glycosylated hemoglobin occur in the following non-diabetic conditions: a. Iron-deficiency anemia b. Splenectomy

c. Alcohol toxicity d. Lead toxicity

*Decreases in A 1c occur in the following non-diabetic conditions: a. Hemolytic anemia b. chronic blood loss

*Pregnancy d. chronic renal failure. Interfering Factors:

*Presence of Hb F and H causes falsely elevated values. 2. Presence of Hb S, C, E, D, G, and Lepore (autosomal recessive mutation resulting in a hemoglobinopathy) causes falsely decreased values.

BUN (Blood Urea Nitrogen) *

11.30

mg/dL 7.0-23.0

CALCULATED





CHANDAN DIAGNOSTIC CENTRE Add: 99, Shivaji Nagar Mahmoorganj,Varanasi Ph: 9235447795 0542-2223232

Since 1991

Ph: 9235447795,0542-2223232 CIN : U85110DL2003PLC308206



Patient Name	: Mr.VIKAS KUMAR -MEDIWHEEL	Registered On	: 23/Oct/2021 10:19:35
Age/Gender	: 29 Y 0 M 0 D /M	Collected	: 23/Oct/2021 11:14:58
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Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Ur	nit Bio. Ref. Inter	val Method
Sample:Serum				
Creatinine Sample:Serum	1.00	mg/dl	0.7-1.3	MODIFIED JAFFES
e-GFR (Estimated Glomerular Filtration Rate) Sample:Serum	105.00	ml/min/1.73m	2 - 90-120 Normal - 60-89 Near Normal	CALCULATED
Uric Acid Sample:Serum	7.40	mg/dl	3.4-7.0	URICASE
L.F.T.(WITH GAMMA GT) * , Serum				
SGOT / Aspartate Aminotransferase (AST) SGPT / Alanine Aminotransferase (ALT)	30.00 32.00	U/L U/L	< 35 < 40	IFCC WITHOUT P5P
Gamma GT (GGT) Protein	42.60 7.80	IU/L gm/dl	11-50 6.2-8.0	OPTIMIZED SZAZING BIRUET
Albumin	4.20	gm/dl	3.8-5.4	B.C.G.
Globulin A:G Ratio	3.60 1.17	gm/dl	1.8-3.6 1.1-2.0	CALCULATED
Alkalin <mark>e Ph</mark> osphatase (Total) Bilirubin (Total)	130.90 0.40	U/L mg/dl	42.0-165.0 0.3-1.2	IFCC METHOD JENDRASSIK & GROF
Bilirubin (Direct)	0.20	mg/dl	< 0.30	JENDRASSIK & GROF
Bilirubin (Indirect)	0.20	mg/dl	< 0.8	JENDRASSIK & GROF
LIPID PROFILE (MINI) * , Serum				
Cholesterol (Total)	213.00	mg/dl	<200 Desirable 200-239 Borderline Hi > 240 High	CHOD-PAP gh
HDL Cholesterol (Good Cholesterol)	47.50	mg/dl	30-70	DIRECT ENZYMATIC
LDL Cholesterol (Bad Cholesterol)	127	mg/dl	< 100 Optimal 100-129 Nr. Optimal/Above Optim 130-159 Borderline Hi 160-189 High > 190 Very High	
VLDL	38.08	mg/dl	10-33	CALCULATED
Triglycerides	190.40	mg/dl	< 150 Normal 150-199 Borderline Hi 200-499 High >500 Very High	GPO-PAP gh S. N. Sinda Dr.S.N. Sinha (MD



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Add: 99, Shivaji Nagar Mahmoorganj,Varanasi Ph: 9235447795,0542-2223232 CIN : U85110DL2003PLC308206



Patient Name	: Mr.VIKAS KUMAR -MEDIWHEEL	Registered On	: 23/Oct/2021 10:19:35
Age/Gender	: 29 Y 0 M 0 D /M	Collected	: 23/Oct/2021 16:59:54
UHID/MR NO	: CVAR.0000023062	Received	: 23/Oct/2021 17:02:38
Visit ID	: CVAR0071852122	Reported	: 23/Oct/2021 17:05:58
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF CLINICAL PATHOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
	ine			
Color	PALE YELLOW			
Specific Gravity	1.030			
Reaction PH	Acidic (6.0)			DIPSTICK
Protein	ABSENT	mg %	< 10 Absent	DIPSTICK
			10-40 (+)	
			40-200 (++)	
			200-500 (+++) > 500 (++++)	
Sugar	ABSENT	gms%	< 0.5 (+)	DIPSTICK
Sugar	ADJEINT	gills 70	< 0.5 (+) 0.5-1.0 (++)	DIPSTICK
			1-2 (+++)	
			> 2 (++++)	
Ketone	ABSENT		1 1 1 1 1 1	DIPSTICK
Bile Salts	ABSENT			
Bile Pigments	ABSENT			
Urobilinogen(1:20 dilution)	ABSENT		Contract Providence	
Microscopic Examination:				
Epithelial cells	1-2/h.p.f			MICROSCOPIC
	and the second sec			EXAMINATION
Pus cells	0-1/h.p.f			MICROSCOPIC
				EXAMINATION
RBCs	ABSENT			MICROSCOPIC
				EXAMINATION
Cast	ABSENT			
Crystals	ABSENT			MICROSCOPIC
	3 			EXAMINATION
Others	ABSENT			
SUGAR, FASTING STAGE * , Urine				
Sugar, Fasting stage	ABSENT	gms%		

Interpretation:

 $\begin{array}{ll} (+) & < 0.5 \\ (++) & 0.5 \\ (+++) & 1 \\ (+++) & 1 \\ (++++) & > 2 \end{array}$

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Add: 99, Shivaji Nagar Mahmoorganj,Varanasi Ph: 9235447795,0542-2223232 CIN : U85110DL2003PLC308206



Patient Name	: Mr.VIKAS KUMAR -MEDIWHEEL	Registered On	: 23/Oct/2021 10:19:35
Age/Gender	: 29 Y 0 M 0 D /M	Collected	: 23/Oct/2021 16:59:54
UHID/MR NO	: CVAR.0000023062	Received	: 23/Oct/2021 17:02:38
Visit ID	: CVAR0071852122	Reported	: 23/Oct/2021 17:05:58
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF CLINICAL PATHOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method

SUGAR, PP STAGE * , Urine

Sugar, PP Stage

ABSENT

Interpretation:

(+) < 0.5 gms% (++) 0.5-1.0 gms% (+++) 1-2 gms% (++++) > 2 gms%



S. M. Sinton Dr.S.N. Sinha (MD Path)

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Add: 99, Shivaji Nagar Mahmoorganj,Varanasi Ph: 9235447795,0542-2223232 CIN : U85110DL2003PLC308206



Patient Name	: Mr.VIKAS KUMAR -MEDIWHEEL	Registered On	: 23/Oct/2021 10:19:35
Age/Gender	: 29 Y 0 M 0 D /M	Collected	: 23/Oct/2021 11:14:58
UHID/MR NO	: CVAR.0000023062	Received	: 23/Oct/2021 17:11:42
Visit ID	: CVAR0071852122	Reported	: 23/Oct/2021 17:16:56
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF IMMUNOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
THYROID PROFILE - TOTAL * , Serum				
T3, Total (tri-iodothyronine)	110.00	ng/dl	84.61-201.7	CLIA
T4, Total (Thyroxine)	5.50	ug/dl	3.2-12.6	CLIA
TSH (Thyroid Stimulating Hormone)	4.80	µIU/mL	0.27 - 5.5	CLIA
Interpretation:		0.3-4.5 μIU/	mL First Trimester	

0.3-4.5	µIU/mL	First Trimester
0.5-4.6	µIU/mL	Second Trimester
0.8-5.2	µIU/mL	Third Trimester
0.5-8.9	µIU/mL	Adults 55-87 Years
0.7-27	µIU/mL	Premature 28-36 Week
2.3-13.2	µIU/mL	Cord Blood > 37Week
0.7-64	µIU/mL	Child(21 wk - 20 Yrs.)
1-39	µIU/mL	Child 0-4 Days
1.7-9.1	µIU/mL	Child 2-20 Week

1) Patients having low T3 and T4 levels but high TSH levels suffer from primary hypothyroidism, cretinism, juvenile myxedema or autoimmune disorders.

2) Patients having high T3 and T4 levels but low TSH levels suffer from Grave's disease, toxic adenoma or sub-acute thyroiditis.
3) Patients having either low or normal T3 and T4 levels but low TSH values suffer from iodine deficiency or secondary hypothyroidism.

4) Patients having high T3 and T4 levels but normal TSH levels may suffer from toxic multinodular goiter. This condition is mostly a symptomatic and may cause transient hyperthyroidism but no persistent symptoms.

5) Patients with high or normal T3 and T4 levels and low or normal TSH levels suffer either from T3 toxicosis or T4 toxicosis respectively.

6) In patients with non thyroidal illness abnormal test results are not necessarily indicative of thyroidism but may be due to adaptation to the catabolic state and may revert to normal when the patient recovers.

7) There are many drugs for eg. Glucocorticoids, Dopamine, Lithium, Iodides, Oral radiographic dyes, etc. which may affect the thyroid function tests.

8) Generally when total T3 and total T4 results are indecisive then Free T3 and Free T4 tests are recommended for further confirmation along with TSH levels.



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Dr.S.N. Sinha (MD Path)





Add: 99, Shivaji Nagar Mahmoorganj,Varanasi Ph: 9235447795,0542-2223232 CIN : U85110DL2003PLC308206



Patient Name	: Mr.VIKAS KUMAR -MEDIWHEEL	Registered On	: 23/Oct/2021 10:19:36
Age/Gender	: 29 Y 0 M 0 D /M	Collected	: N/A
UHID/MR NO	: CVAR.0000023062	Received	: N/A
Visit ID	: CVAR0071852122	Reported	: 23/Oct/2021 15:08:02
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF X-RAY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

X-RAY DIGITAL CHEST PA * (500 mA COMPUTERISED UNIT SPOT FILM DEVICE)

DIGITAL CHEST P-A VIEW

- Soft tissue shadow appears normal.
- Bony cage is normal.
- Diaphragmatic shadows are normal on both sides.
- Costo-phrenic angles are bilaterally clear.
- Trachea is central in position.
- Cardiac size & contours are normal.
- Hilar shadows are normal.
- Pulmonary vascularity & distribution are normal.
- Pulmonary parenchyma did not reveal any significant lesion.

IMPRESSION: NORMAL SKIAGRAM



Dr Raveesh Chandra Roy (MD-Radio)

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1800-419-0002



Add: 99, Shivaji Nagar Mahmoorganj,Varanasi Ph: 9235447795,0542-2223232 CIN : U85110DL2003PLC308206



Patient Name	: Mr.VIKAS KUMAR -MEDIWHEEL	Registered On	: 23/Oct/2021 10:19:36
Age/Gender	: 29 Y 0 M 0 D /M	Collected	: N/A
UHID/MR NO	: CVAR.0000023062	Received	: N/A
Visit ID	: CVAR0071852122	Reported	: 23/Oct/2021 11:13:44
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF ULTRASOUND

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

ULTRASOUND WHOLE ABDOMEN (UPPER & LOWER) *

- The liver measures 14.6 cm in mid clavicular line. It is normal in shape and echogenecity. No focal lesion is seen. No intra hepatic biliary radicle dilation seen.
- Gall bladder is well distended and is normal.
- Portal vein measures 10.9 mm in caliber. CBD measures 3.4 mm in caliber.
- Pancreas is normal in size, shape and echogenecity.
- Spleen is normal in size (9.7 cm in its long axis), shape and echogenecity.
- Right kidney measures : 9.7 x 3.5 cm.No focal lesion or calculus seen. Right pelvicalyceal system is not dilated.
- Left kidney measures : 10.4 x 6.0 cm.No focal lesion or calculus seen. Left pelvicalyceal system is not dilated.
- Urinary bladder is normal in shape, outline and distension. Lumen is anechoic and no wall thickening seen.Prevoid urine volume 239 cc.
- The prostate is normal in size (31 x 27 x 30mm/14gms), shape and echopattern.
- No free fluid is seen in the abdomen/pelvis.

IMPRESSION : No significant abnormality seen.

Please correlate clinically

*** End Of Report ***

Result/s to Follow: STOOL, ROUTINE EXAMINATION, ECG / EKG



Dr Raveesh Chandra Roy (MD-Radio)

This report is not for medico legal purpose. If clinical correlation is not established, kindly repeat the test at no additional cost within seven days

Facilities: Pathology, Bedside Sample Collection, Health Check-ups, Digital X-Ray, ECG (Bedside also), Allergy Testing, Test And Health Check-ups, Ultrasonography, Sonomammography, Bone Mineral Density (BMD), Doppler Studies, 2D Echo, CT Scan, MRI, Blood Bank, TMT, EEG, PFT, OPG, Endoscopy, Digital Mammography, Electromyography (EMG), Nerve Condition Velocity (NCV), Audiometry, Brainstem Evoked Response Audiometry (BERA), Colonoscopy, Ambulance Services, Online Booking Facilities for Diagnostics, Online Report Viewing * *365 Days Open*

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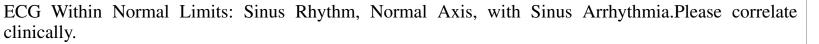
Chandan Diagnostic Centre, Varanasi

Date and Time: 23rd Oct 21 2:09 PM



Age / Gender: 29/Male Patient ID: CVAR0071852122 Patient Name: Mr.VIKAS KUMAR -MEDIWHEEL

aVR V4T V V2 Π aVL V5 aVF V6 III V3 Π 25.0 mm/s 10.0 mm/mV 0-20Hz, 50Hz AR: 82 bpm VR: 82 bpm QRSD: 76 ms QT: 354 ms QTc: 413 ms PRI: 130 ms P-R-T: 56° 57° 39°



AUTHORIZED BY

Dr. Charit MD, DM: Cardiology REPORTED BY

Dr Kavitha A

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.

63382





CHANDAN DIAGNOSTIC CENTRE mediconel Name of Company: Nilkars Human Name of Executive: Date of Birth: 22 02 1992 Mall Sex: Height: 172 Weight: 12 BMI (Body Mass Index): 27-8 Chest (Expiration / Inspiration) 98 10 4 10 Abdomen: Blood Pressure: 128 84 80 gar negular Pulse: 16 RR: Ident Mark: Cart Moule Delow Left Euge Any Allergies: NO NO Vertigo: Any Medications: NG Any Surgical History: 2019 Star Surgery Der Saved gupen Ashe Habits of alcoholism/smoking/tobacco: NO NO Chief Complaints if any: Lab Investigation Reports 2 6 . Eye Check up vision & Color vision: Noune Normal Left eye: Normal Right eye: Near vision: Normal

omer Care No.: +91-9918300637 E-mail: customercare.diagnostic@chandan.co.in Web.: www.chandandiagnostic







Far vision :

Dental check up :

Normal

Normal Normal Normal

Customer Care No.: +91-9918300637 E-mail: customercare.diagnostic@chandan.co.in Web.: www.chandandiagnostic.

ENT Check up :

Eye Checkup:

Final impression

Certified that I examined NALCAS WINDOWN is presently in good health and free from any cardio-respiratory/communicable ailment, he/she is fit / Unfit to join any organization.

Client Signature :-

Dr. R.C. ROY MBBS.,MD. (Radic Diagnosis) Reg., No.-26918 Signature of Medical Examiner

Name & Qualification . An R CRay, MBBS, MD Date 21, 19, 11. Place. Voranazy



Feb 202

5378 1636 6873 🗐

Vikas Kumar जन्म तिथि / DOB : 22/02/1992 पुरुष / MAI. E 0

GOVERNMENT OF IND

भारत सरकार

विकास कुमार