

MER- MEDICAL EXAMINATION REPORT

Date of Examination	29/03/2024		
NAME	Swati Soy		
AGE	33	Gender	Female
HEIGHT(cm)	156	WEIGHT (kg)	85 kg
B.P.	130/80		
ECG	Borderline		
X Ray	No significant abnormality detected.		
Vision Checkup	Color Vision : Normal		
	Far Vision Ratio : Normal		
	Near Vision Ratio : Normal		
Present Ailments	NIL		
Details of Past ailments (If Any)	NIL		
Comments / Advice : She /He is Physically Fit	FIT		



Dr. VATSAL SINGH
CIMS, Bilaspur (C.G.)
CGMC-8519/2018

Signature with Stamp of Medical Examiner

Swati Soy
29/03/2024

CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

of Swati Soy on 29/03/2024

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. Review after _____ recommended	
<ul style="list-style-type: none">• Unfit	

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

Dr. VATSAL SINGH
GIMS, Bilaspur (C.G.)
CGMC-8519/2018

This certificate is not meant for medico-legal purposes

Swati Soy
29/03/2024



Miss SWATI SOY

Reference: HEALTH CHECKUP,Bilaspur

VID: 600100/3810

PID NO. 202429319313

AGE 33 Y / SEX Female

Sample Received on/at:

29/03/2024 10:23AM

Reported on/at

29/03/2024 05:04PM

HAEMATOLOGY

Investigation	Observed Value	Unit	Biological Reference Interval
ESR- Erythrocyte Sedimentation Rate			
ESR- Erythrocyte Sedimentation Rate 26 (Citrate Blood)		mm/hr	0 - 15

Method: Westergren manual

Interpretation:-

1. It indicates presence and intensity of an inflammatory process, never diagnostic of a specific disease. Changes are more significant than a single abnormal test.
2. It is a prognostic test and used to monitor the course or response to treatment of diseases like tuberculosis, bacterial endocarditis, acute rheumatic fever, rheumatoid arthritis, SLE, Hodgkins disease, temporal arteritis, polymyalgia rheumatica.
3. Also increased in pregnancy, multiple myeloma, menstruation & hypothyroidism

Blood Group ABO & Rh Typing

(EDTA Whole Blood)

Blood Group (ABO Typing)	"B"
RhD (Rh Typing)	Positive

HbA1c (Glycosylated Haemoglobin)

HbA1C-Glycated Haemoglobin	4.8	%	Less than 5.7% Non-diabetic Prediabetes 5.7% to 6.4% Diabetes 6.5% or Higher 6.4 to 7% Excellent control 7 to 8% fair to good control 8 to 10% Unsatisfactory control
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Estimated Average Glucose (EAG) 91.06

Interpretation & Remark:

1. HbA1c is used for monitoring diabetic control. It reflects the estimated average glucose (eAG).
2. HbA1c has been endorsed by clinical groups & ADA (American Diabetes Association) guidelines 2017, for diagnosis of diabetes using a cut-off point of 6.5%.
3. Trends in HbA1c are a better indicator of diabetic control than a solitary test.
4. Low glycated haemoglobin(below 4%) in a non-diabetic individual are often.


Checked By
Sr. Technician

Page 5 of 7


Dr. Digvijay Singh
MBBS, DCP (Pathologist)
Ex Resident AIIMS, New Delhi

Kamla Complex, Beside Tehsil Office
Nehru Chowk, Bilaspur (C.G.) 495001
Cont.No. : 07752 408222, +91 9630066355
E-mail : riddhidiagnosticsbilaspur@gmail.com



RIDDHI

DIAGNOSTICS PVT. LTD.

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CBC Haemogram

Haemoglobin(Hb)	12.0	gm/dl	11-15
Erythrocyte (RBC) Count	4.2	mill/cu.mm.	3.0-6.0
PCV (Packed Cell Volume)	33.6	%	36-45
MCV (Mean Corpuscular Volume)	80.0	fL	78 - 92
MCH (Mean Corpuscular Haemoglobin)	28.6	pg	27 - 32
MCHC (Mean Corpuscular Hb Concn.)	35.7	g/dl	32 - 36
Total Leucocytes Count (TLC)	7400	cells/cu.mm.	4000 - 11000
Differential Leucocyte Count (DLC)			
Neutrophils	66	%	40-75
Lymphocytes	28	%	20-45
Monocytes	04	%	2 - 10
Eosinophils	02	%	1 - 6
Basophils	00	%	0 - 1
Absolute Neutrophil count	4884	/cu.mm	2000-7000
Absolute Lymphocyte count	2072	/cu.mm	1000-3000
Absolute Eosinophils Count	148	/cmm	20-500
Absolute Monocyte count	296	/cu.mm	200-1000
Absolute Basophil count	0	/cu.mm	0-200
Platelets			
PLT Count	197,000	/cmm	150,000- 450,000

Remarks (CBC)

EDTA Whole Blood - Tests done on Automated Five Part Cell Cellenium 5D Retic.
(WBC, RBC Platelet count by impedance method, WBC differential by VCS technology other parameters calculated) All Abnormal Haemograms are reviewed confirmed microscopically.
Differential count is based on approximately 10,000 cells.

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BIOCHEMISTRY

Investigation	Observed Value	Unit	Biological Reference Interval
Creatinine	0.8	mg/dl	0.6-1.2

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BUN Urea Nitrogen Serum

BUN-Blood Urea Nitrogen (Serum, Urease)	14.1	mg/dl	7 - 20
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Remark: In blood, Urea is usually reported as BUN and expressed in mg/dl. BUN mass units can be converted to urea mass units by multiplying by 2.14.

FBS (Fasting Blood Sugar)

Glucose- Fasting	77	mg/dl	Normal: 70-99 Impaired Tolerance: 100-125 Diabetes mellitus: \geq 126
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(on more than one occasion) (American diabetes association guidelines 2018)

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Lipid Profile

Cholesterol - Total	162	mg/dl	Desirable: < 200 Borderline High: 200-239 High: >= 240
Triglycerides level	118	mg/dl	40 - 140
HDL Cholesterol	49	mg/dl	Major risk factor for heart disease: < 35 Negative risk factor for heart disease :>800
LDL Cholesterol	89.40	mg/dl	Optimal:< 100 Near Optimal :100 – 129 Borderline High : 130-159 High : 160-189 Very High : >=190
VLDL Cholesterol	23.60	mg/dl	6 - 38
LDLC/HDLC Ratio	1.82		2.5 - 3.5
TCH/HDLC Ratio	3.31		0-5.0

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PP (Glucose-Post Prandial)

Glucose -Post prandial	116	mg/dl	Normal: 70-139 Impaired Tolerance: 140-199 Diabetes mellitus: >= 200
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An individual may show higher fasting glucose level in comparison to post prandial glucose level due to following reasons :
The glycaemic index and response to food consumed, Changes in body composition, Increased insulin response and sensitivity. Alimentary hypoglycemia, Renal glycosuria, Effect of oral hypoglycaemics & Insulin treatment.

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Uric Acid

Uric Acid	5.1	mg/dL	2.6 - 6.2
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BUN/Creatinine Ratio

BUN-Blood Urea Nitrogen 14.1 mg/dl 7 - 20

(Serum, Urease)

Remark: In blood, Urea is usually reported as BUN and expressed in mg/dl. BUN mass units can be converted to urea mass units by multiplying by 2.14.

Creatinine 0.8 mg/dl 0.6-1.2

BUN/Creatinine Ratio 17.63 10-20:1

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LFT-Liver Function Test

Bilirubin - Total 0.44 mg/dl 0.1 - 1.2

(Serum, Diazo)

Bilirubin - Direct 0.13 mg/dl 0 - 0.2

(Serum, Diazo)

Bilirubin (Indirect) 0.31 mg/dl 0 - 1

(Serum, Calculated)

Total Proteins 7.26 g/dl 6.6-8.8

(Serum, Biuret)

Albumin 3.89 g/dl 3.5 - 5.2

(Serum, Bromocresol green)

Globulin 3.37 g/dl 1.8 - 3.6

(Serum)

A/G Ratio 1.15 % 1.1 - 2.2

(Serum)

SGOT (AST) 23 U/L 0 - 31

(Serum, Enzymatic)

SGPT (ALT) 29 U/L 0 - 34

(Serum, Enzymatic)


Alkaline Phosphatase 148 U/L 64 - 306

Gamma-glutamyltransferase (GGT) 17.4 U/L <32

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IMMUNOASSAY

Investigation	Observed Value	Unit	Biological Reference Interval
Thyroid Panel-1(T3T4TSH)			
T3	1.89	ng/mL	0.69 - 2.15
T4	113	ng/ml	52 - 127
TSH	3.62	uIU/ml	0.3 - 4.5

Method: CLIA

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CLINICAL PATHOLOGY

Investigation	Observed Value	Unit	Biological Reference Interval
<u>Urine Examination Routine</u>			
Volume	25	ml	
Colour	Pale yellow		Straw
Transparency	Clear		Clear
Reaction (pH)	5.5		5.0 - 8.0
Specific Gravity	1.014		1.010 - 1.030
<u>Chemical Examination</u>			
Urine Protein(Albumin)	Nil		Nil
Urine Glucose(Sugar)	Nil		Nil
<u>Microscopic Examination</u>			
Pus cells	1-2	/hpf	0 - 5
Red Blood Cells	Nil	/hpf	Nil
Epithelial Cell	0-1	/hpf	0 - 4
Crystals	Nil	/hpf	Nil
Casts	Nil	/hpf	Nil

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Urine - Sugar PP

Urine S(PP) Nil Nil

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Urine Sugar - Fasting

Urine - Glucose Nil Nil

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PATIENT NAME	MISS SWATI SOY	AGE / SEX	33YRS / FEMALE
REF. BY	HEALTH CHECKUP	DATE	29/03/2024

2 D ECHO REPORT

M MODE STUDY

Ao =2.10	LA =2.85
IVSd =1.10	LVPWd =0.70
LVIDd = 4.55	LVIDs = 2.90
EF = 66.05%	

DOPPLER STUDY FINDINGS

No diastolic Dysfunction
No AS/AR/MS/MR
NO PAF

Description

- Mitral valve leaflets normal, subvalvular apparatus normal, Mitral valve areas normal, no evidence of prolapse, calcification or vegetation.
- Aortic valve trileaflet , Opening amplitude is adequate, No significant AS/AR
- Tricuspid Valve is normal , No TR
- Pulmoanry valve is normal.
- PA is normal in size.
- Normal chamber dimension.
- No regional wall motion abnormality.
- NO CLOT/VEGETATION/EFFUSION.

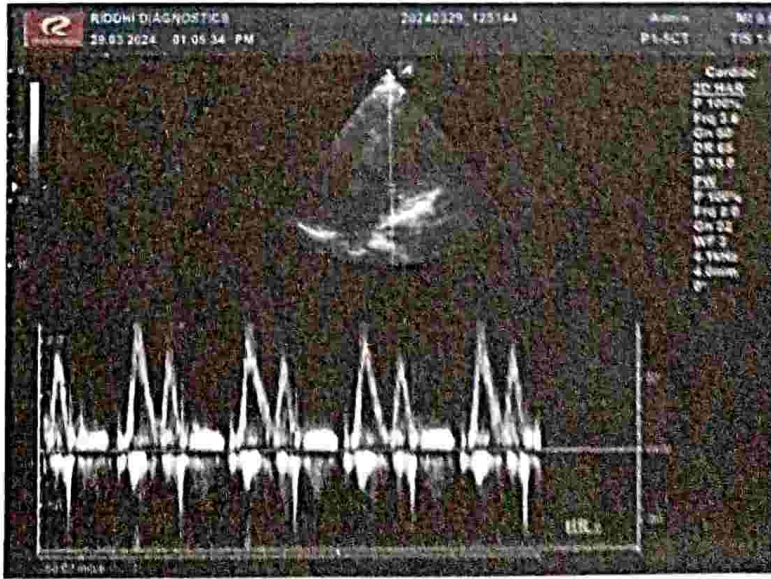
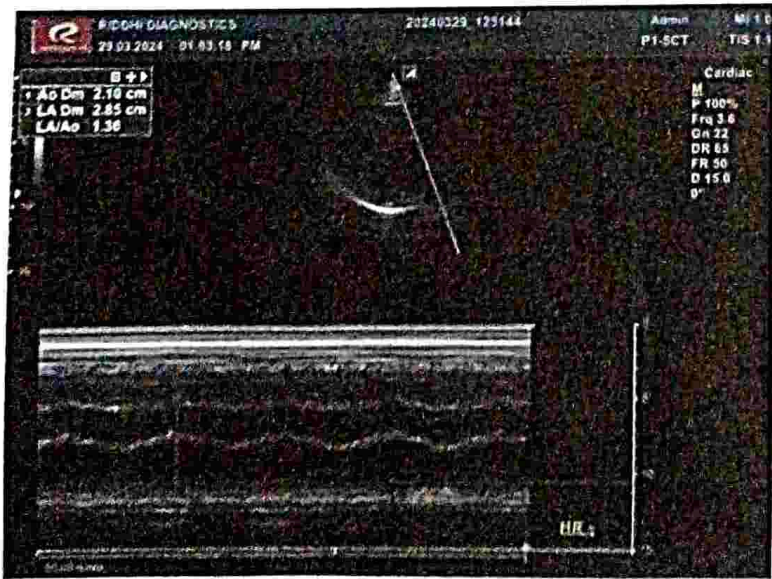
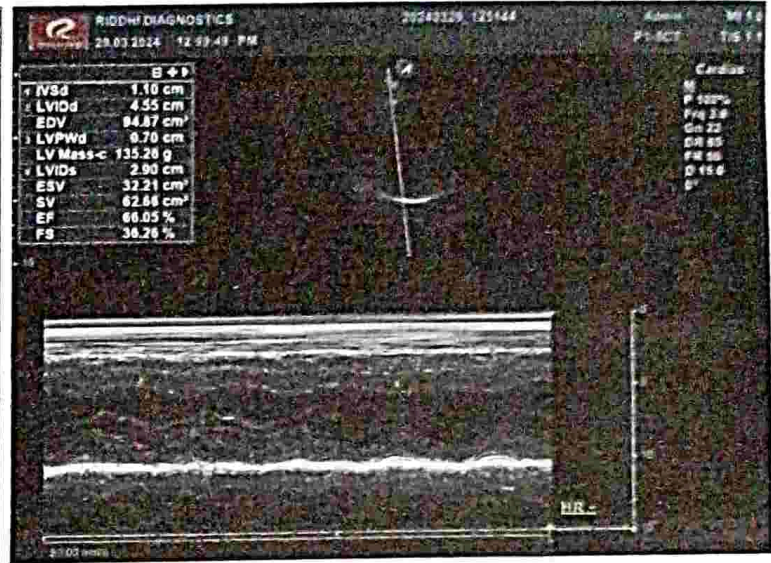
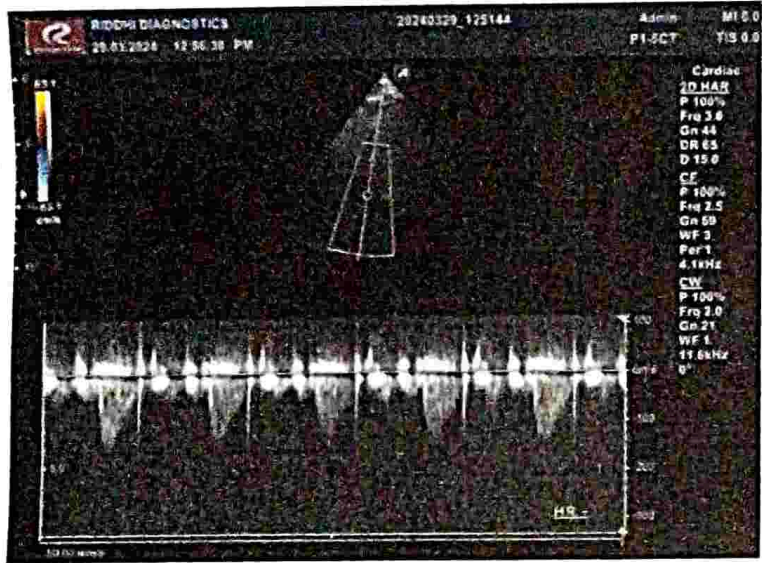
IMPRESSION : NORMAL STUDY.

Good LV/RV function.


DR. PRAKSH JAISWAL (MD MEDICINE)

Kamla Complex, Beside Tehsil Office
Nehru Chowk, Bilaspur (C.G.) 495001
Cont.No. : 07752 408222, +91 9630066355
E-mail : riddhidiagnosticsbilaspur@gmail.com

Swati Soy





RIDDHI

DIAGNOSTICS PVT. LTD.

NAME	MISS. SWATI SOY	AGE / SEX	33Y/FEMALE
REF BY.	DR. SELF	DATE	29/ 03/ 2024

X-RAY CHEST PA VIEW

FINDINGS :-

The lungs on the either side show equal translucency.

The peripheral pulmonary vasculature is normal.

No focal lung lesion is seen.

Bilateral CP angles are normal.

Both hila are normal in size, have equal density and bear normal relationship.

The heart and trachea are central in position and no mediastinal abnormality is visible.

The cardiac size is normal.

The domes of the diaphragms are normal in position, and show smooth outline.

IMPRESSION :- No significant abnormality detected.

ADVICE :- Clinical correlation and follow up.

Dr. Avinash. Rathod.
MBBS, DMRD.
Consultant Radiologist
Reg.no 2011/05/1616.

Disclaimer: Report is done by teleradiology after the images acquired by PACS (picture archiving and communication system). Investigations have their limitations. Solitary pathological/Radiological and other investigations never confirm the final diagnosis. Conclusion is markedly affected by input provided at that time. They only help in diagnosing the disease in correlation to clinical symptoms and other related tests. Please interpret accordingly.

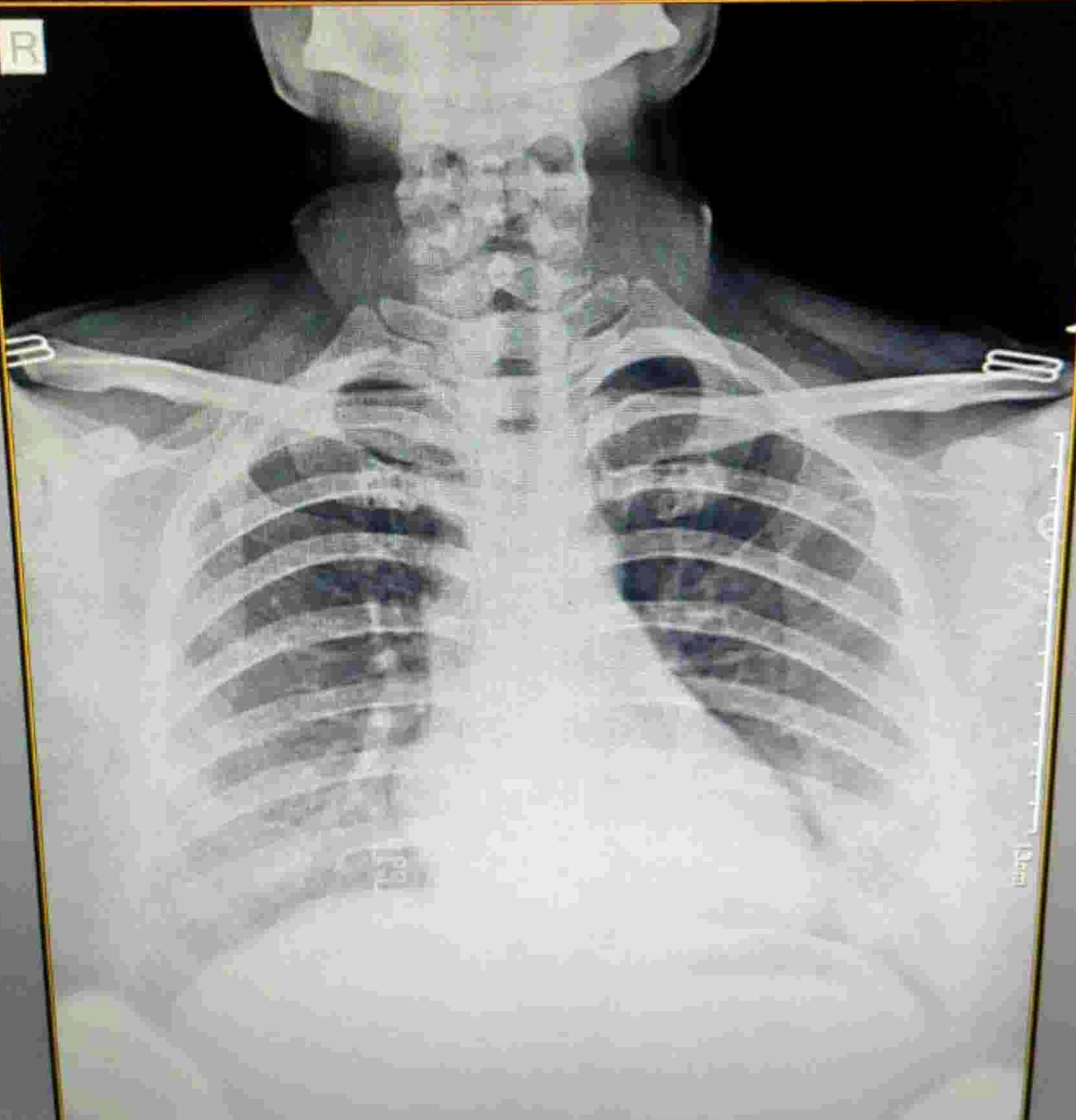
आप सभी को दीपावली की हार्दिक शुभकामनाएं...

विचार



Erasing

R



CHEST P
MISS. SWATI SAY.,
SELF

33Y Female

24/03/2024 4:51:48 PM

DELL

29-03-2024 11:17:49 AM

ID: 214

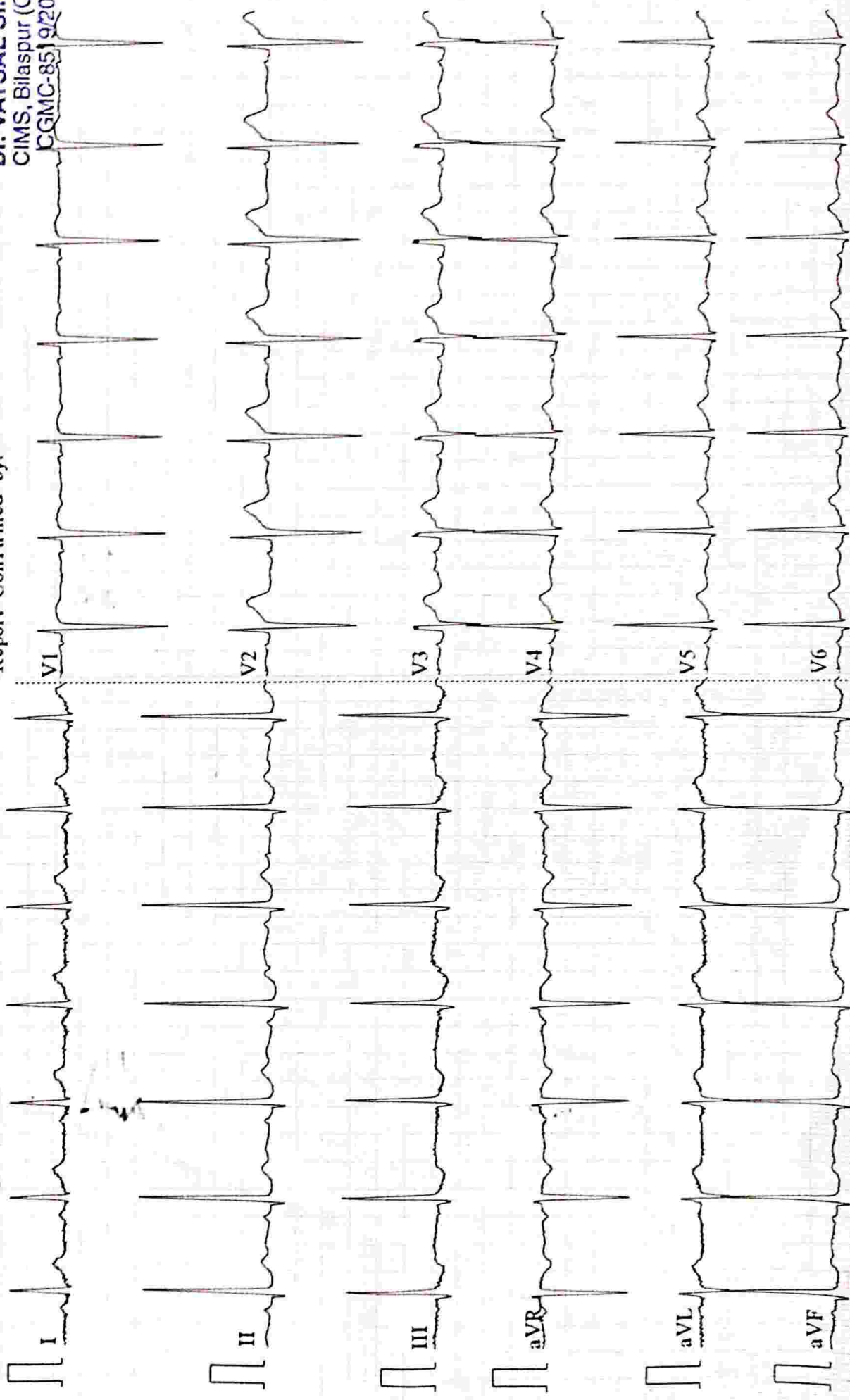
swati say
Female 33Years
Req. No. :

HR : 83 bpm
P : 86 ms
PR : 130 ms
QRS : 86 ms
QT/QTcBz : 344/405 ms
P/QRS/T : 29/66/4 °
RV5/SV1 : 1.730/1.856 mV

Diagnosis Information:
Sinus rhythm
Inferior ST-T abnormality is borderline for age and gender
Borderline ECG

Swati say
29/03/2024

Report Confirmed by:
Dr. VATSAL SINGH
CIMS, Bilaspur (C.G.)
CGMC-8519/2018



भारत सरकार
Government of India

आधार

Aadhaar no. issued: 25/09/2011



स्वाति सोय
Swati Soy
जन्म तिथि/DOB: 29/03/1990
महिला/ FEMALE

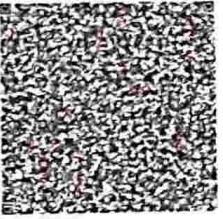
आधार पहचान का प्रमाण है, नागरिकता या जन्मतिथि का नहीं।
इसका उपयोग सत्यापन (ऑनलाइन प्रमाणीकरण, या बायोमेट्रिक कोड/
ऑफलाइन एबसाइल की स्कैनिंग) के साथ किया जाना चाहिए।
Aadhaar is proof of identity, not of citizenship
or date of birth. It should be used with verification (online
authentication, or scanning of QR code / offline L1)

9195 3083 6801
मेरा आधार, मेरी पहचान

भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India

आधार

पता:
D/O शिंदार सोय, ताला साई वार्ड नं०. ६, पोस्ट- घाघरी
खाना- मुस्कसिल, आबु, पश्चिमी सिंहभूम,
झारखण्ड - 833201



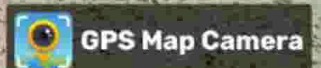
Address:
D/O Shndhar Soy, tala sai ward no. 6, post-
ghagni p.s- mufasil, achu, DIST: Pashchimi
Singhbhum,
Jharkhand - 833201

Details as on: 28/01/2014

9195 3083 6801
VID : 9169 2231 8522 5985

1047 | help@uidai.gov.in | www.uidai.gov.in

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29/03/2024



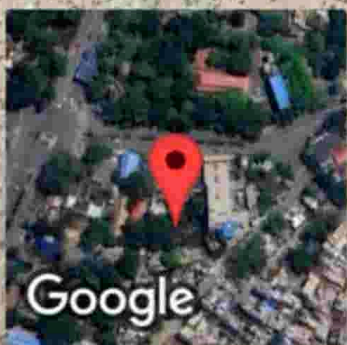
Bilaspur, Chhattisgarh, India

Vrindavan plaza, C-22, Nehru Chowk, near Bilaspur Post Office, Civil Lines, Bilaspur, Masanganj, Chhattisgarh 495001, India


Lat 22.086718°

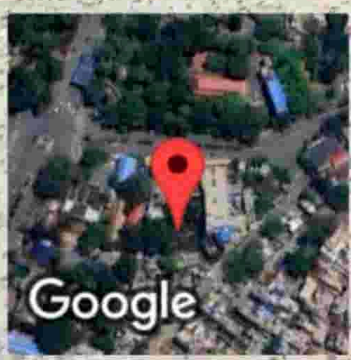
Long 82.143998°

29/03/24 09:27 AM GMT +05:30





 GPS Map Camera



Bilaspur, Chhattisgarh, India
Vrindavan plaza, C-22, Nehru Chowk, near Bilaspur Post Office, Civil Lines, Bilaspur, Masanganj, Chhattisgarh 495001, India
Lat 22.086712°
Long 82.144036°
29/03/24 09:01 AM GMT +05:30



 GPS Map Camera

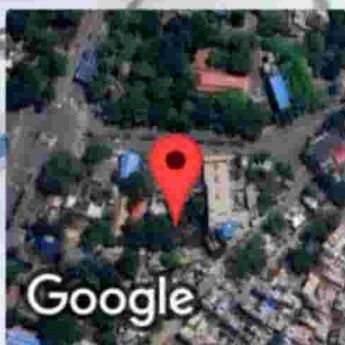
Bilaspur, Chhattisgarh, India

Vrindavan plaza, C-22, Nehru Chowk, near Bilaspur Post Office, Civil
Lines, Bilaspur, Masanganj, Chhattisgarh 495001, India

Lat 22.086718°

Long 82.143998°

29/03/24 09:09 AM GMT +05:30



Google



 GPS Map Camera

Masanganj, Chhattisgarh, India
40, Nehru Nagar Rd, Masanganj, Chhattisgarh 495001, India
Lat 22.086508°
Long 82.132859°
29/03/24 08:56 AM GMT +05:30

