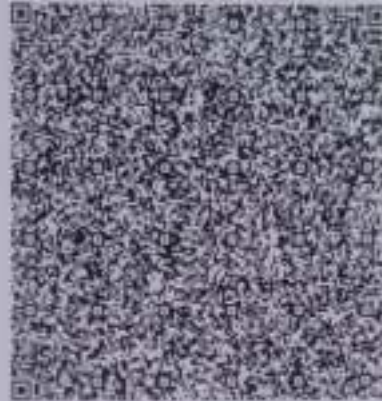


सीताराम अहिस्वार
Sitaram Ahirwar
C/O Omkar Ahirwar
ward no 13
kalika nagar
babai road
Hoshangabad
Hoshangabad Madhya Pradesh - 461001
9755887341



आपका **आधार** क्रमांक / Your **Aadhaar** No. :

5005 8567 3503

VID : 9139 9205 5433 9359

मेरा **आधार**, मेरी पहचान



भारत सरकार

Government of India

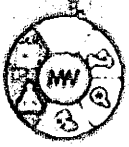


सीताराम अहिस्वार
Sitaram Ahirwar
जन्म तिथि/DOB: 05/04/1993
पुरुष/ MALE

5005 8567 3503

VID : 9139 9205 5433 9359

मेरा **आधार**, मेरी पहचान



Mediwheel
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Arcofemi Healthcare Pvt Ltd

(Formerly known as Arcofemi Healthcare Ltd)

F-701A, Lado Sarai, Mehrauli, New Delhi - 110030

Email: wellness@mediwheel.in, Website: www.mediwheel.in

Tel: +91-11-41195959, Fax: +91-11-29523020

CIN: U24240DL2011PTC216307

MEDICAL FITNESS CERTIFICATE

(To be signed by a registered medical practitioner holding a Medical degree)

This is to certify that **Mr. Prateek Agarwal** aged, **35yrs.** Based on the examination, I certify that he is in good mental and physical health and it is free from any physical defects such as deafness, colour blindness, and any chronic or contagious diseases.

Place: **Mohali**

Date: 25/04/2024

Dr. Nitesh Kumar

MBBS

BCMR 47093

Name & Signature of

Medical officer

Laboratory Report

Patient Name : MR SITARAM AHIRWAR



CPL24/32091

Age/Gender : 31 Yrs/Male

Registration Date : 04/11/2024 01:19 PM

Ref. Dr. : Dr. APOLLO CLINIC

Collection Date : 04/11/2024 01:21 PM

Center : CMH OPD

Report Date : 05/11/2024 10:14 AM



HAEMATOTOLOGY REPORT

Test Description	Result	Unit	Biological Reference Ranges
BLOOD GROUP AND RH FACTOR			
ABO Type	O		
Rh Factor	POSITIVE(+VE)		

BIOCHEMISTRY REPORT

Test Description	Result	Unit	Biological Reference Ranges
Post-Prandial Blood Sugar	125.3	mg/dl	70 - 140
<i>Method : GOD-POD</i>			
Interpretation:-			
Normal: 70-140			
Impaired Glucose Tolerance:140-200			
Diabetes mellitus: >= 200 (on more than one occassion)			
BILIRUBIN-SERUM			
Total Bilirubin-Serum	0.79	mg/dl	0.2 - 1.2
Direct Bilirubin-Serum	0.16	mg/dl	0.0 - 0.3
Indirect Bilirubin-Serum	0.6	mg/dl	0.2 - 0.8
<i>Method : DIAZO</i>			

Laboratory Report

Patient Name : MR SITARAM AHIRWAR



CPL24/32091

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BLOOD UREA	24.5	mg/dl	15 - 45
BUN	11		7 - 21

Method : Calculated

Clinical Significance:

Urea Nitrogen (BUN) - Urea is the principle waste product of protein catabolism. BUN is most commonly measured in the diagnosis and treatment of certain renal and metabolic diseases. Increased BUN concentration may result from increased production of urea due to

- (1) diet or excessive destruction of cellular proteins as occurs in massive infection and fevers,
- (2) reduced renal perfusion resulting from dehydration or heart failure,
- (3) nearly all types of kidney disease, and
- (4) mechanical obstruction to urine excretion such as is caused by stones, tumors, infection, or stricture. Decreased urea levels are less frequent and occur primarily in advanced liver disease and in overhydration.

Serum-Creatinine	0.83	mg/dL	0.4 - 1.50
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Method: Enzymatic

Interpretation

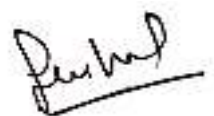
The primary use of a creatinine test is to better understand how well the kidneys are working. A measurement of creatinine can be employed for screening, diagnosis, and/or monitoring of kidney problems.

SGPT (ALT)- Serum	30.7	unit/L	5 - 45
--------------------------	------	--------	--------

Method : IFCC

Clinical Significance

Alanine Aminotransferase (ALT) (REFL) - Alanine Aminotransferase (ALT) measurements are particularly useful in the diagnosis and management of certain liver diseases, e.g., viral hepatitis and cirrhosis. ALT activity in tissue is generally much lower than aspartate aminotransferase (AST) activity and is found in highest concentrations in the liver. Significant elevations of ALT occur only in diseases of the liver. ALT is often measured in conjunction with AST to determine whether the source of the AST is the liver or the heart. ALT is normally not elevated in cases of myocardial infarction, i.e., a normal ALT, in conjunction with an elevated AST, tends to suggest cardiac disease. However, slight elevations of ALT may occur if an infarct destroys a very large volume of heart muscle.

Dr. Sushil Kumar Sharma
M.D (Pathology)
Consultant Pathologist
Reg. No.-MP-30165

Laboratory Report

Patient Name : MR SITARAM AHIRWAR



CPL24/32091

Age/Gender : 31 Yrs/Male

Registration Date : 04/11/2024 01:19 PM

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Report Date : 05/11/2024 10:14 AM



CLINICAL BIOCHEMISTRY REPORT

Test Description	Result	Unit	Biological Reference Ranges
Fasting Blood Sugar	85.4	mg/dl	Normal: 70-110
			Impaired Fasting Glucose(IFG): 100-125
			Diabetes mellitus: ≥ 126

Method: GOD-POD

Note:- 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.




Dr. Sushil Kumar Sharma
M.D (Pathology)
Consultant Pathologist
Reg. No.-MP-30165

Laboratory Report

Patient Name : MR SITARAM AHIRWAR



CPL24/32091

Age/Gender : 31 Yrs/Male

Registration Date : 04/11/2024 01:19 PM

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Report Date : 05/11/2024 10:14 AM



URINE EXAMINATION REPORT

Test Description	Result	Unit	Biological Reference Ranges
URINE ROUTINE			
General Examination			
Colour	Pale Yellow		Pale Yellow
Transparency (Apperance)	Clear		Clear
Deposit	Absent		Absent
Reaction (pH)	Acidic		5.0-8.5
Specific Gravity	1.025		-1.005-1.030
Chemical Examination			
Urine Albumin	Absent		Absent
Urine Ketones	Absent		Absent
Urine Glucose	Absent		Absent
Bile pigments	Absent		Absent
Bile salts	NIL		NIL
Urobilinogen	Normal		Normal
Nitrite	Negative		Negative
Microscopic Examination			
RBC's	NIL	/hpf	NIL
Leukocyte (Pus cells)	2-4	/hpf	0-5/hpf
Epithelial Cells	1-2	/hpf	0-4/hpf
Crystals	Absent		Absent
Casts	Not Seen		Not Seen
Amorphous deposits	Absent		Absent
Bacteria	Not seen		Not seen
Yeast Cells	Not seen		Not seen

Note: 1. Chemical examination through Dipstick includes test methods such as Protein (Protein Error Principle), Glucose (Glucose oxidase-Peroxidase), Ketone (Legals Test), Bilirubin (Azo- Diazo reaction), Urobilinogen (Diazonium ion Reaction) Nitrite (Griess Method).. 2. Pre-test conditions to be observed while submitting the sample- First void, mid-stream urine, collected in a clean, dry, sterile container is recommended for routine urine analysis, avoid contamination with any discharge from the vaginal, urethra, perineum, as applicable, avoid prolonged transit time & undue exposure to sunlight.

Laboratory Report

Patient Name : MR SITARAM AHIRWAR



CPL24/32091

Age/Gender : 31 Yrs/Male

Registration Date : 04/11/2024 01:19 PM

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Test Description	Result	Unit	Biological Reference Ranges
COMPLETE BLOOD COUNT			
Haemoglobin	14.4	gm/dL	12.0 - 16.0
RBC Count	5.29	mil/cu.mm	4.00 - 5.50
Hematocrit HCT	44.4	%	40.0 - 54.0
Mean Corp Volume MCV	83.9	fL	80.0 - 100.0
Mean Corp Hb MCH	27.2	pg	27.0 - 34.0
Mean Corp Hb Conc MCHC	32.4	gm/dL	32.0 - 36.0
Platelet Count	2.21	lac/cmm	1.50 - 4.50
Total WBC Count /TLC	6.8	10 ³ /cu.mm	4.0 - 11.0
DIFFERENTIAL LEUCOCYTE COUNT			
Neutrophils	70	%	40 - 70
Lymphocytes	25	%	20 - 40
Monocytes	03	%	02 - 10
Eosinophils	02	%	01 - 06
Basophils	00	%	00 - 01
Absolute Differential Count			
Absolute Neutrophils Count	4.8	thou/mm ³	2.00 - 7.00
Absolute Lymphocyte Count	1.7	thou/mm ³	1.00 - 3.00
Absolute Monocytes Count	0.2	thou/mm ³	0.20 - 1.00
Absolute Eosinophils Count	0.1	thou/mm ³	0.02 - 0.50

EDTA Whole Blood - Tests done on Automated Three Part Cell Counter. (WBC, RBC Platelet count by impedance method, WBC differential by VCS technology other parameters calculated) All Abnormal Haemograms are reviewed confirmed microscopically.



Laboratory Report

Patient Name : MR SITARAM AHIRWAR



CPL24/32091

Age/Gender : 31 Yrs/Male

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Test Description	Result	Unit	Biological Reference Ranges
ESR - ERYTHROCYTE SEDIMENTATION RATE	08	mm/hr	0 - 09

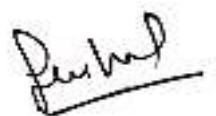
Method: Wintrob's

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. It is also increased in pregnancy, multiple myeloma, menstruation, and hypothyroidism.

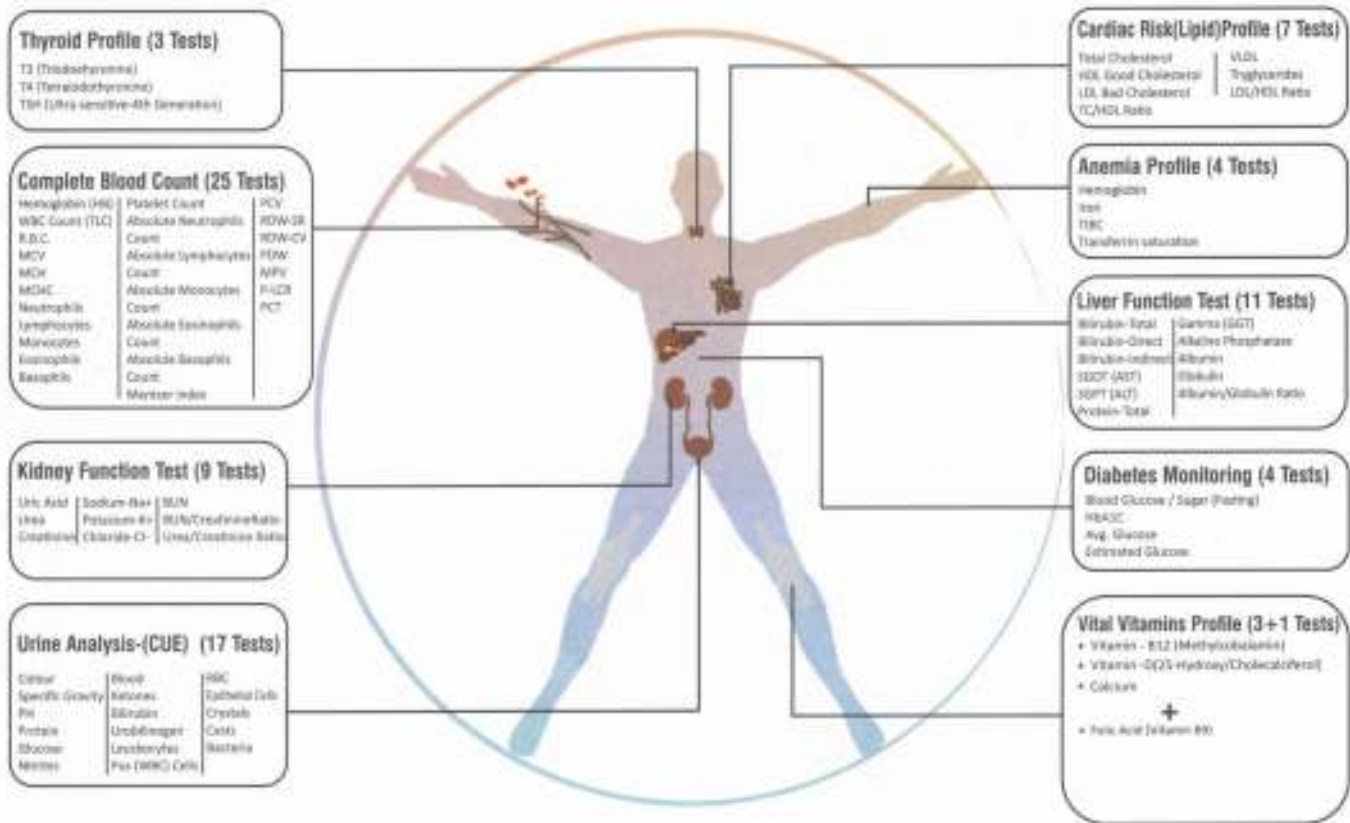
**** End of the report****

This report is not valid for medico legal aspects. This is just a professional opinion not the final. Kindly correlate clinically because of technical, lack of clinical information and physical findings, if any disparity noted please inform.

Dr. Sushil Kumar Sharma
M.D (Pathology)
Consultant Pathologist
Reg. No.-MP-30165

BODY CARE



CONDITIONS OF REPORTING

- Individual laboratory investigations should not be considered as conclusive and should be used along with other relevant clinical examinations to achieve the final diagnosis. Therefore these reported results are for the information of referring clinician only
- The values of a laboratory investigation are dependent on the quality of the sample as well as the assay procedures used. Further all samples collected outside Citi Pathlabs labs / patient centers are required to be prepared, stored, labelled and brought as per the guidelines of Citi Pathlabs. Citi Pathlabs cannot be held liable for incorrect results of any samples which are not as per the guidelines issued
- Electronic images in the report are created by electronic processing. Citi Pathlabs makes no expressed or implied warranties or representations with respect to it and takes no responsibility for the authenticity, quality and size of the image, affected possibly due to a computer virus or other contamination
- Citi Pathlabs confirms that all tests have been carried out with reasonable care, clinical safety & technical integrity
A. However due to certain factors such as reagent inconsistency, machine breakdown etc. beyond its control which could affect the testing, it does not make any representation or give any warranty about the accuracy of the reported results
B. The test results are to be used for help in diagnosing / treating medical diseases & not for forensic applications. Hence these results cannot be used for medico-legal purposes
- Partial representation of report is not allowed.
- All dispute / claims concerning to this report are subject to Bhopal jurisdiction only.

For Any Enquiry

Citi Pathlabs
 Flat No. 004, Shivaay South City Complex,
 Phase-2, G-3 Gulmohar Colony, Bhopal (M.P.)
 citipathlabs@gmail.com
 9454786340, 9407658222

MER-MEDICAL EXAMINATION REPORT

Date of Examination	04-11-2024		
NAME	SITARA AHIRWAR		
AGE	31	Gender	M
HEIGHT (cm)	170	WEIGHT (kg)	78.9
B.P.	130/80		
ECG	WNL		
X Ray	Normal		
Vision Checkup	Color Vision : Normal		
	Far Vision Ratio : NO		
	Near Vision Ratio : NO		
Present Ailments	No Any Present Ailment's.		
Details of Past ailments (If Any)	No Any Past Ailment's.		
Comments / Advice : She / He is Physically Fit	He is Physically Fit.		

Dr. Sabyasachi Gupta
 MBBS (Gold Medalist) MD (Med) RCPSC (UK)
 Reg No: 11671

Signature with Stamp of Medical Examiner

CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

of Sitaram Mishra on 04/11/24

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

Dr. Sabyasachi Gupta
 MBBS (Gold Medalist) MD (Med.) RGP (UK)
 Dr. _____ Reg No.: 11671
 Medical Officer
 The Apollo Clinic, (Location)

This certificate is not meant for medico-legal purposes



CITI MULTI SPECIALITY HOSPITAL

MIG - 215 216, Gautam Nagar, Govindpura, Bhopal-462022 (M.P.)
Phone No. : 9765 - 4259134
Mobile No. : 7771008608, 8319214884, 9303135719



Patient Name :	MR. SITARAM AHIRWAR	Age /sex :	31 Y/M
Referred .By:	INS	Date	04.11.2024

X-RAY CHEST PA VIEW

- Bilateral Lungs Fields Appear Clear .
- Bilateral Hilar Shadows Appear Clear .
- Bilateral CP Angles Appear Clear .
- Both The Domes of Diaphragm Appear normal in Shape and position
- Visualized bony cage and soft tissue appear normal .

IMPRESSION

NO Significant Abnormality Seen.

Prinal

Dr. DADHANIA PRINALBEN
MD RADIODIAGNOSIS
CONSULTANT RADIOLOGIST

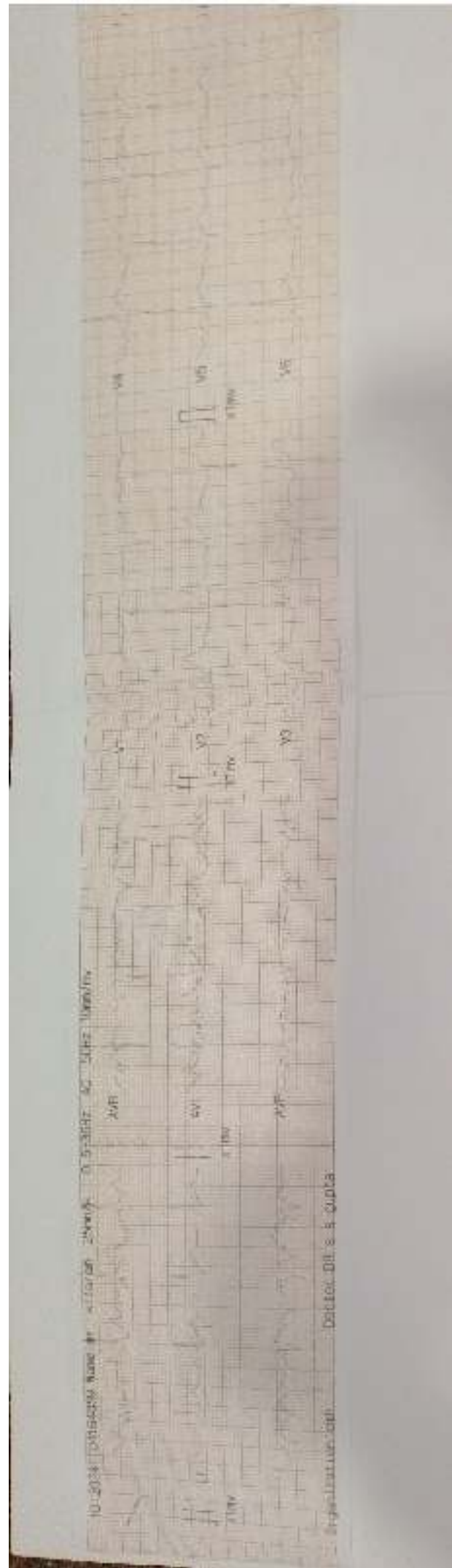


PA

RT

04.11.2024

Name: MR. SITARAM AHIRWAR 31Y/M
Sex: M



ID: 202411041104059
 Name: Mr. Sathish
 Sex: Male
 Age: 37
 HR: 65
 RR: 705
 PR: 191
 QRS: 108
 QT/QTc: 353/420
 P/QRS/T: 16/ -3/ 11
 RS/SV1: 1.400/-0.772
 RS/SV1: 0.528
 QTcF: 0.500

001 Sinus Rhythm
 171 Normal ECG



Reference Report: Covid 19
 11-04-2024 16:48:20
Dr. Sabryaschi Gupta
 MBBS (Cardiology) MD (Med) FRCP (UK)
 Reg. No.: 11671





CITI MULTI SPECIALITY HOSPITAL

Mkt - 215, 216, Gaurav Nagar, Ghosia Road, Bhopal-462023 (M.P.)
Phone No. - 9792 - 4200134
Mobile No. - 7729000002, 91192214064, 9320190719

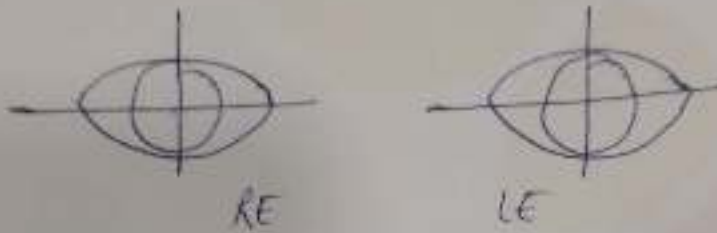


MR SITARAM AHIRWAR
31Y / M

04/11/24

c/o


No complaints



RE -> NAD
LE ->

- Both the eyes have normal & clear vision.
- No colour blindness.
- No watery discharge in any eye.
- No itching



 **GPS Map Camera**



Bhopal, Madhya Pradesh, India
M216, Gautam Nagar, Housing Board Colony, Bhopal,
Madhya Pradesh 462024, India
Lat 23.23503° Long 77.441106°
04/11/24 12:09 PM GMT +05:30