



भारत सरकार

GOVERNMENT OF INDIA



Jitesh Ramchandani

Jitesh Ramchandani

जन्म तिथि/ DOB: 26/02/1995

पुरुष / MALE

5567 1332 9899



आधार-आम आदमी का अधिकार





# CITI MULTI SPECIALITY HOSPITAL

MIG -215 216, Gautam Nagar, Govindpura, Bhopal-462023 (M.P.)  
Phone No. : 0755-4272669, 4250134



Patient Name : MR JITESH RAMCHANDANI



CMSH24/7116

Age/Gender : 29 Yrs/Male

Registration Date : 23/03/2024 11:42 AM

Ref. Dr. : Dr. APOLLO CLINIC

Collection Date : 23/03/2024 11:43 AM

Center : CMH OPD

Report Date : 23/03/2024 03:56 PM



## HAEMATOLOGY REPORT

Test Description	Result	Unit	Biological Reference Ranges
HbA1c Glycosilated Haemoglobin	5.2	%	Non-diabetic: <= 6.0 Pre-diabetic: 6.0-7.0 Diabetic: >= 7.0
Estimated Average Glucose :	103	mg/dL	
<b>Reference Range (Average Blood Sugar):</b>			
Excellent control	: 90 - 120 mg/dl		
Good control	: 121 - 150 mg/dl		
Average control	: 151 - 180 mg/dl		
Action suggested	: 181 - 210 mg/dl		
Panic value	: > 211 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) guidelines 2017, for diagnosis of diabetes using a cut-off point 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 HbF > 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/ turbo 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 % .

Dr. Subhash Parmar  
Consultant Pathologist



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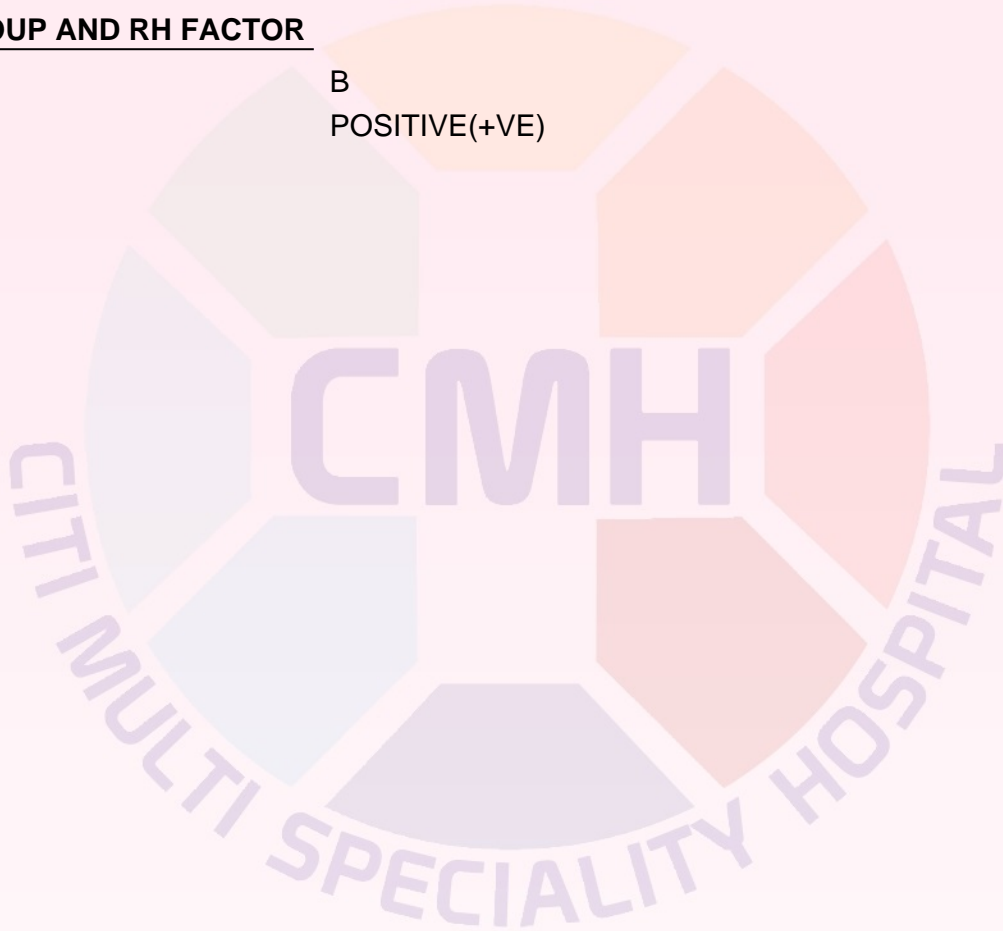
### BLOOD GROUP AND RH FACTOR

ABO Type

B

Rh Factor

POSITIVE(+VE)



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## BIOCHEMISTRY REPORT

Test Description	Result	Unit	Biological Reference Ranges
<b>RENAL FUNCTION TEST (RFT)</b>			
Blood Urea	22.0	mg/dl	15 - 50
Serum Creatinine	0.77	mg/dl	0.7 - 1.5
eGFR	123	ml/min	
Blood Urea Nitrogen-BUN	10.28	mg/dl	7 - 20
Serum Sodium	142.5	mmol/L	135 - 150
Serum Potassium	4.81	mmol/L	3.5 - 5.0
Chloride	103.0	mmol/L	94.0 - 110.0
Ionic Calcium	1.21	mmol/L	1.10 - 1.35
Uric Acid	4.8	mg/dl	3.2 - 7.0

**NOTE :** Please correlate with clinical conditions.

**Dr. Subhash Parmar**  
Consultant Pathologist



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## BIOCHEMISTRY REPORT

Test Description	Result	Unit	Biological Reference Ranges
<b>LIVER FUNCTION TEST (LFT)</b>			
TOTAL BILIRUBIN	0.51	mg/dl	0 - 1.2
DIRECT BILIRUBIN	0.13	mg/dL	0 - 0.3
INDIRECT BILIRUBIN	0.38	mg/dl	0.1 - 0.8
SGOT (AST)	29.8	U/L	0 - 35
SGPT (ALT)	42.8	U/L	0 - 45
ALKALINE PHOSPHATASE	61.0	U/L	40 - 140
GAMMA GLUTAMYL TRANSFERASE	23.0	IU/L	15 - 45
TOTAL PROTEIN	6.75	g/dl	6.4 - 8.3
SERUM ALBUMIN	3.61	g/dl	3.5 - 5.2
SERUM GLOBULIN	3.14	g/dl	1.8 - 3.6
A/G RATIO	<b>1.15</b>		1.2 - 2.2

**NOTE** : Please correlate with clinical conditions.

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## BIOCHEMISTRY REPORT

Test Description	Result	Unit	Biological Reference Ranges
<b>LIPID PROFILE</b>			
Cholesterol-Total	211.0	mg/dL	< 200 Desirable 200-239 Borderline High > 240 High
Triglycerides level	146.0	mg/dL	< 150 Normal 150-199 Borderline High 200-499 High > 500 Very High
HDL Cholesterol	52.3	mg/dL	< 40 Major Risk for Heart > 40 Normal
LDL Cholesterol	129.50	mg/dL	< 100 Optimal 100-129 Near/Above Optimal 130-159 Borderline high 160-189 High > 190 Very High
VLDL Cholesterol	29.20	mg/dL	6 - 38
CHOL/HDL RATIO	4.03		3.5 - 5.0
LDL/HDL RATIO	2.48		2.5 - 3.5

### NOTE

8-10 hours fasting sample is required

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Consultant Pathologist



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## BIOCHEMISTRY REPORT

Test Description	Result	Unit	Biological Reference Ranges
<b>Post-Prandial Blood Sugar</b>	99.7	mg/dl	70 - 140

Method : Hexokinase

### Interpretation:-

Normal: 70-140

Impaired Glucose Tolerance: 140-200

Diabetes mellitus:  $\geq 200$

(on more than one occasion)



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## CLINICAL BIOCHEMISTRY REPORT

Test Description	Result	Unit	Biological Reference Ranges
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**Fasting Blood Sugar**

81.0

mg/dl

Normal: 70-110

Method: GOD-POD

Impaired Fasting  
Glucose(IFG):

100-125

Diabetes mellitus:  $\geq 126$

**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.



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## IMMUNOASSAY REPORT

Test Description	Result	Unit	Biological Reference Ranges
TRI-iodothyronin, (T3)	1.61	ng/mL	0.69 - 2.15
THYROXIN, (T4)	95.2	ng/mL	52 - 127
Thyroid Stimulating Hormone(TSH)- Serum	2.97	µIU/mL	0.3-4.5 Pregnancy (As per American Thyroid Association)

First Trimester : 0.1-2.5  
Second Trimester : 0.2-3.0  
Third trimester : 0.3-3.0

Method: CLIA

### INTERPRETATION

TSH	T3 / FT3	T4 / FT4	Suggested Interpretation for the Thyroid Function Tests Pattern
Within Range	Decreased	Within Range	• Isolated Low T3-often seen in elderly & associated Non-Thyroidal illness. In elderly the drop in T3 level can be upto 25%.
Raised	Within Range	Within Range	• Isolated High TSH especially in the range of 4.7 to 15 mIU/ml is commonly associated with Physiological & Biological TSH Variability. • Subclinical Autoimmune Hypothyroidism • Intermittent T4 therapy for hypothyroidism • Recovery phase after Non-Thyroidal illness"
Raised	Decreased	Decreased	• Chronic Autoimmune Thyroiditis • Post thyroidectomy, Post radioiodine • Hypothyroid phase of transient thyroiditis"
Raised or within Range	Raised	Raised or within Range	• Interfering antibodies to thyroid hormones (anti-TPO antibodies) • Intermittent T4 therapy or T4 overdose • Drug interference- Amiodarone, Heparin, Beta blockers, steroids, anti-epileptics"
Decreased	Raised or within Range	Raised or within Range	• Isolated Low TSH -especially in the range of 0.1 to 0.4 often seen in elderly & associated with Non-Thyroidal illness • Subclinical Hyperthyroidism • Thyroxine ingestion"
Decreased	Decreased	Decreased	• Central Hypothyroidism • Non-Thyroidal illness • Recent treatment for Hyperthyroidism (TSH remains suppressed)"
Decreased	Raised	Raised	• Primary Hyperthyroidism (Graves' disease), Multinodular goitre, Toxic nodule • Transient thyroiditis: Postpartum, Silent (lymphocytic), Postviral (granulomatous, subacute, DeQuervain's), Gestational thyrotoxicosis with hyperemesis gravidarum"
Decreased or within Range	Raised	Within Range	• T3 toxicosis • Non-Thyroidal illness

Dr. Subhash Parmar  
Consultant Pathologist

Sister Concern : Citi Hospital, 115, Zone-II, M.P. Nagar, Bhopal - 462011. Ph. : 0755-4287772-73



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## URINE EXAMINATION REPORT

Test Description	Result	Unit	Biological Reference Ranges
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### 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 Protein	Absent		Absent
Urine Ketones (Acetone)	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)	Occasional	/hpf	0-5/hpf
Epithelial Cells	1-2	/hpf	0-4/hpf
Crystals	Absent		Absent
Casts	Not Seen		Not Seen
Amorphous deposits	Absent		Absent
Yeast Cells	Not seen		Not seen

**Note :** 1. Chemical examination through Dipstick includes test methods as Protein (Protein Error Principle), Glucose (Glucose oxidase-Peroxidase), Ketone (Legals Test), Bilirubin (Azo- Diazo reaction), Urobilinogen (Diazonium ion Reaction) Nitrite (Griess Method). All abnormal results of chemical examination are confirmed by manual methods. 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 vaginal, urethra, perineum, as applicable, avoid prolonged transit time & undue exposure to sunlight. 3. During interpretation, points to be considered are Negative nitrite test does not exclude the urinary tract infections, Trace proteinuria can be seen with many physiological conditions like prolonged recumbency, exercise, high protein diet. False positive reactions for bile pigments, proteins, glucose and nitrites can be caused by peroxidase like activity by disinfectants, therapeutic dyes,

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Test Description	Result	Unit	Biological Reference Ranges
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## COMPLETE BLOOD COUNT

Haemoglobin	15.0	gm/dL	12.0 - 16.0
RBC Count	5.29	mil/cu.mm	4.00 - 5.50
Hematocrit HCT	46.7	%	40.0 - 54.0
Mean Corp Volume MCV	88.3	fL	80.0 - 100.0
Mean Corp Hb MCH	28.4	pg	27.0 - 34.0
Mean Corp Hb Conc MCHC	32.1	gm/dL	32.0 - 36.0
Platelet Count	2.64	lac/cmm	1.50 - 4.50
Total WBC Count /TLC	4.60	10 <sup>3</sup> /cu.mm	4.0 - 11.0

## DIFFERENTIAL LEUCOCYTE COUNT

Neutrophils	54	%	40 - 70
Lymphocytes	40	%	20 - 40
Monocytes	04	%	02 - 10
Eosinophils	02	%	01 - 06
Basophils	00	%	00 - 01

## Absolute Differential Count

Absolute Neutrophils Count	2.5	thou/mm <sup>3</sup>	2.00 - 7.00
Absolute Lymphocyte Count	1.8	thou/mm <sup>3</sup>	1.00 - 3.00
Absolute Monocytes Count	0.2	thou/mm <sup>3</sup>	0.20 - 1.00
Absolute Eosinophils Count	0.1	thou/mm <sup>3</sup>	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.

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Test Description	Result	Unit	Biological Reference Ranges
<b>ESR - ERYTHROCYTE SEDIMENTATION RATE</b>	07	mm/hr	0 - 09

Method: Wintrobess

### 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. Subhash Parmar**  
Consultant Pathologist

MER- MEDICAL EXAMINATION REPORT

Date of Examination	23-03-2024	
NAME	MR. JITESH RAMCHANDANI	
AGE	Gender	M
HEIGHT(cm)	176	WEIGHT (kg) 77
B.P.	120/80 mmHg	
ECG	WNL.	
X Ray	NORMAL	
Vision Checkup	Color Vision : NORMAL	
	Far Vision Ratio : NORMAL	
	Near Vision Ratio : NORMAL	
Present Ailments	NO ANY ACTIVE COMPLAINTS	
Details of Past ailments (If Any)	HTN (T. Bisoprolol)	
Comments / Advice : She /He is <u>Physically Fit</u>	He is physically fit.	

Dr. SABYASACHI GUPTA  
 MBBS (Gold Medalist), MD (Med.), RCGP (U.K.)  
 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 MR. JITESH RAMCHANDANI on 23-03-24

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

	Tick
<ul style="list-style-type: none"> <li>• Medically Fit</li> </ul>	✓
<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> <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"> <li>• Currently Unfit. Review after _____ recommended</li> </ul>	✗
<ul style="list-style-type: none"> <li>• Unfit</li> </ul>	✗

**Dr. SBYASACHI GUPTA**

MBBS (Gold Medalist) MD (Med.) RCGP (U.K.)

Dr.                      Reg. No. 11671

**Medical Officer**

**The Apollo Clinic, (Location)**

*This certificate is not meant for medico-legal purposes*





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Phone No. : 0755 - 4250134  
Mobile No. : 7771008660, 8319214664, 9303135719



Patient- Name:	MR. JITESH RAMCHANDANI	Age/Sex:	29 Y/M
Referred. By:	INS	Date:	23.03.2024

## 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.

Dr. SANJAY..  
CONSULTANT RADIOLOGIST

Empanelled with : State Government, M.P.Police, ESIC, HPCL, Punjab National Bank, Indian Bank  
Food Corporation of India, Ayushman Bharat



R1

PA

Male: MR. JITESH RAMCHANDANI 29 Y/M

23.03.2024



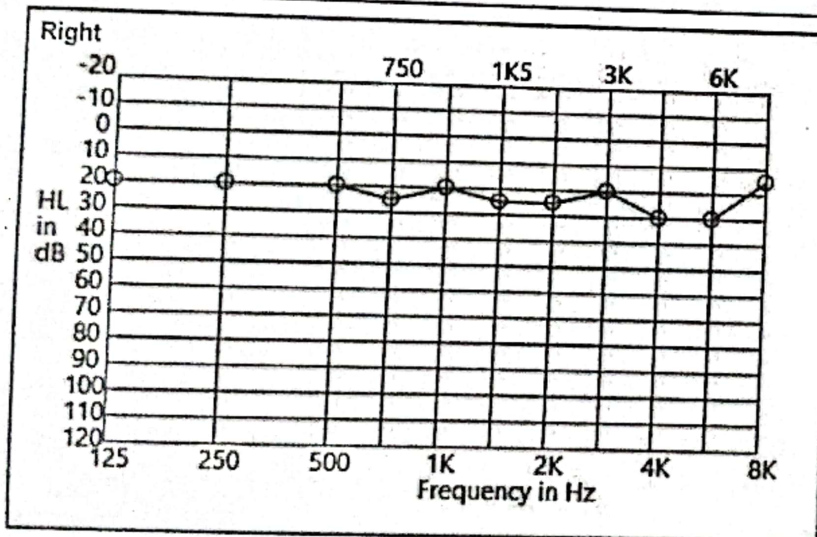
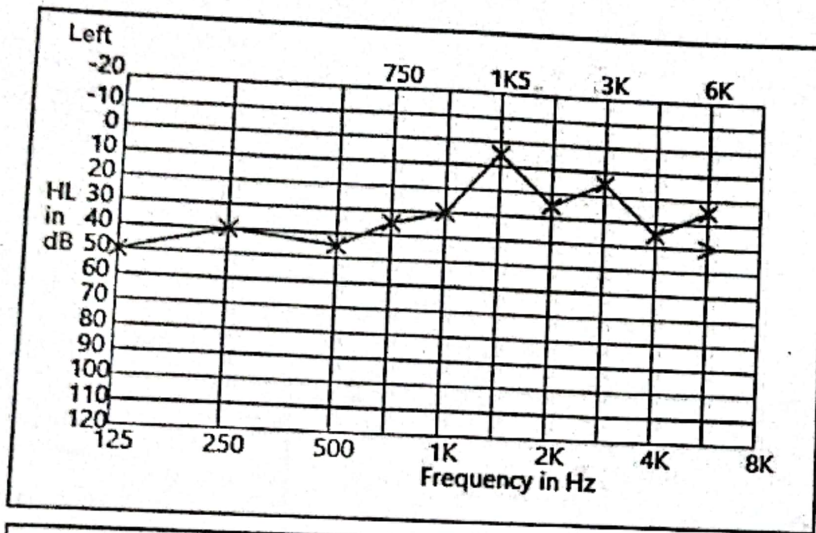
# CITI MULTISPECIALITY HOSPITAL

MIG 216, Gautam Nagar

BHOPAL

462023

Name	Case No.	Age	Sex	Phone No.
MR JITESH RAMCHANDANI	734	29	Male	
Address	Referred By	Date & Time		
BAIRAGARH BHOPAL	APOLLO CLINIC	23/3/24		



Interpretation

NORMAL HEARING STUDY

Doctor/Audiologist  
DR S S GUPTA (MD)

Dr. SBYASACHI GUPTA  
MBBS (Gold Medalist), MD (Med.), RCGP (U.K.)  
Reg. No. 11671



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Irish. Ramchhari  
29/11

23/3/2024

CI

NO COMPLAINT  
in R.E. & L.E.  
vision



CI

VA  
R.E. →  
L.E. →

- NO, ANY - FRESH COMPLAINT IN BOTH - EYE
- NO, WATER - DISCHARGE IN EYE
- CLEAR - VISION IN BOTH - EYE

Empanelled with : State Government, M.P. Police, ESIC, HPCL, Punjab National Bank, Indian Bank  
Food Corporation of India, Ayushman Bharat



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NAME – MR.JITESH RAMCHANDANI

AGE – 29Y/M

REF: BY.- HEALTH INSURANCE

DATE- 23/03/2024

## 2D- ECHO COLOUR DOPPLER EVALUATION:-

- ❖ Normal great vessel relationship
- ❖ ALL cardiac valve are Normal
- ❖ Normal Four chambered heart
- ❖ Normal LV Size with Normal LV function LVEF- 73%
- ❖ No intracardiac shunt
- ❖ No Pericardium effusion
- ❖ FINAL IMPRESSION
- ❖ Normal LV Size with Normal LV function LVEF-73%

  
DR. S. S. GUPTA (M.D.)

CONSULTANT ECHOCARDIOLOGIST

**Disclaimer:-**The science of radiology is based upon interpretation of shadows of normal and abnormal tissue. This is neither complete nor accurate, hence, findings should always be interpreted in to the light of clinic-pathological correlation. This is a professional opinion, not a diagnosis. In case of any discrepancy a review can be asked.

For Emergency Contact: 7771008660

Empanelled with : State Government, M.P. Police, ESIC, HPCL, Punjab National Bank, Indian Bank  
Sister Concern: Citi Hospital, 115 Zone II MP Nagar, Bhopal 462011, Ph: 0755-487772, 73  
Food Corporation of India, Ayushman Bharat



**CITI MULTI SPECIALITY HOSPITAL**  
**MIG-215-216 GAUTAM NAGAR GOVINDPURA, BHOPAL**  
**MOB-7987913713**

Name: MR JITESH RAM CHANDANI 29 Patient Id: 230324-113256

Date: 23/03/2024

Birthdate:

Sex: Male

Accession #:

Perf.Physician:

Ref.Physician:

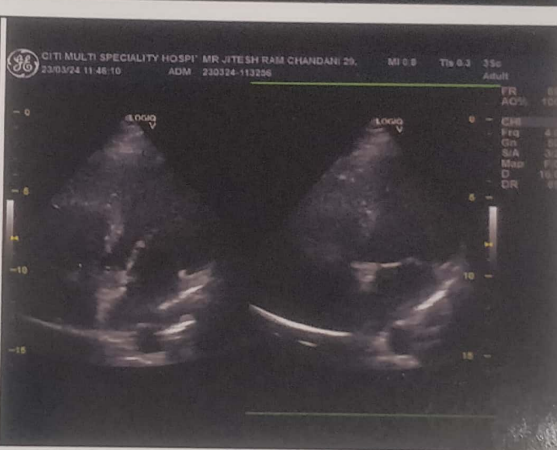
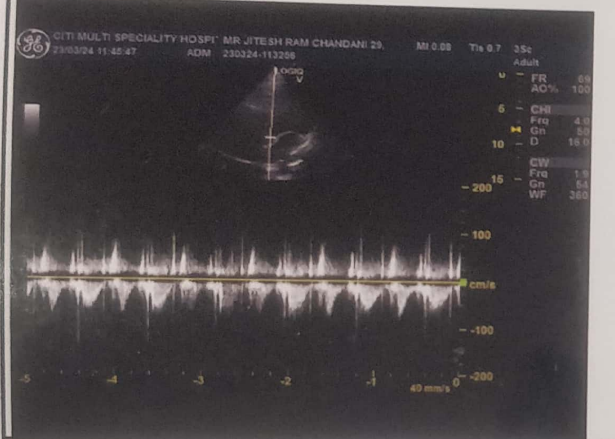
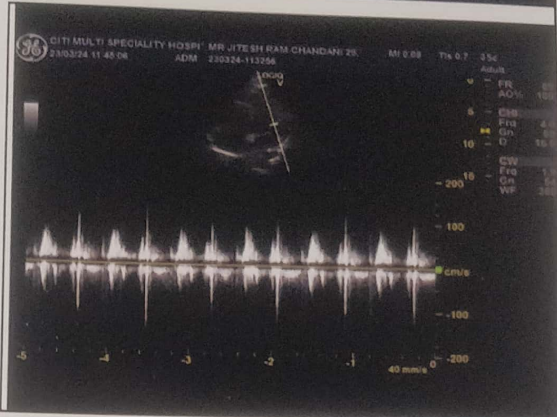
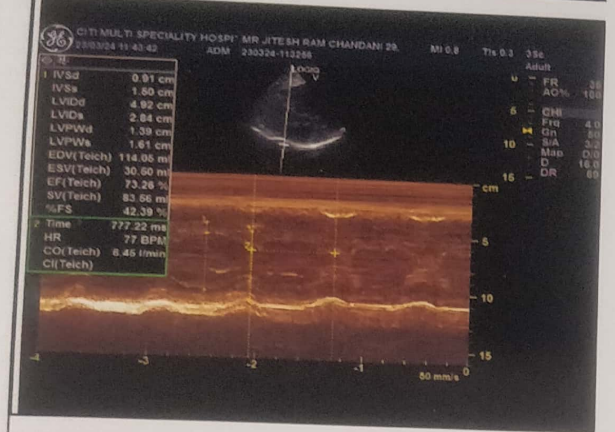
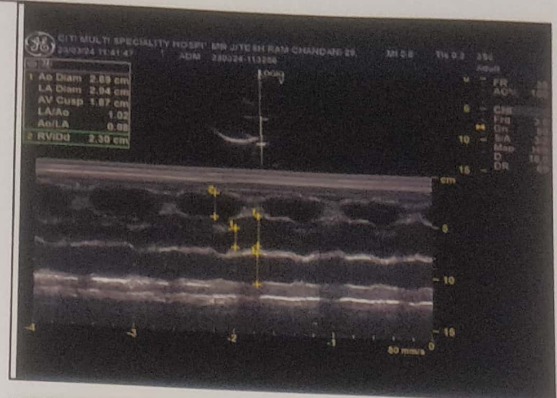
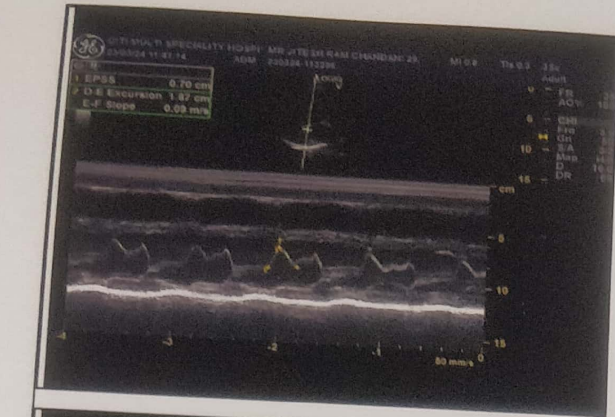
Operator: ADM

**M-MODE & PW**

D-E Excursion	1.87 cm
E-F Slope	0.09 m/s
EPSS	0.70 cm
Ao Diam	2.89 cm
LA Diam	2.94 cm
AV Cusp	1.87 cm
LA/Ao	1.02
Ao/LA	0.98
RVIDd	2.30 cm
IVSd	0.91 cm
LVIDd	4.92 cm
LVPWd	1.39 cm
IVSs	1.50 cm
LVIDs	2.84 cm
LVPWs	1.61 cm
EDV(Teich)	114.05 ml
ESV(Teich)	30.50 ml
EF(Teich)	73.26 %
%FS	42.39 %
SV(Teich)	83.56 ml
Time	777.22 ms
HR	77 BPM
CO(Teich)	0.00 l/min

Print Date: 3/23/2024







# CITI MULTI SPECIALITY HOSPITAL

MIG -215 216, Gautam Nagar, Govindpura, Bhopal-462023 (M.P.)  
Phone No. : 0755 - 4250134  
Mobile No. : 7771008660, 8315214664, 9303135719



Name of Patient : MR. JITESH RAMCHANDANI  
AGE/SEX : 29Y/M  
Date : 23/03/2024

## USG ABDOMEN & PELVIS

Liver : The liver is normal in size, shape, and normal in echogenecity. No intra hepatic biliary radical dilation seen.

Gall Bladder : :: Gall bladder Normal in size shape and echotexture

Spleen : Normal in size, shape and echotexture.

Pancreas : Normal in size, shape and echotexture.

Kidneys : \ Both the kidneys are normal in size, shape, axis and position. Cortico medullary differentiation are both kidney fine concretion .

Prostate : . Normal in size, shape and echotexture [14.58cc]

Retroperitoneum: No lymphadenopathy seen. No free fluid or ascites seen.

IVC & ABDOMINAL AORTA:-IVC and abdominal aorta are normal.

IMPRESSION :  
:: NORMAL STUDY.

CONSULTANT RADIOLOGIST

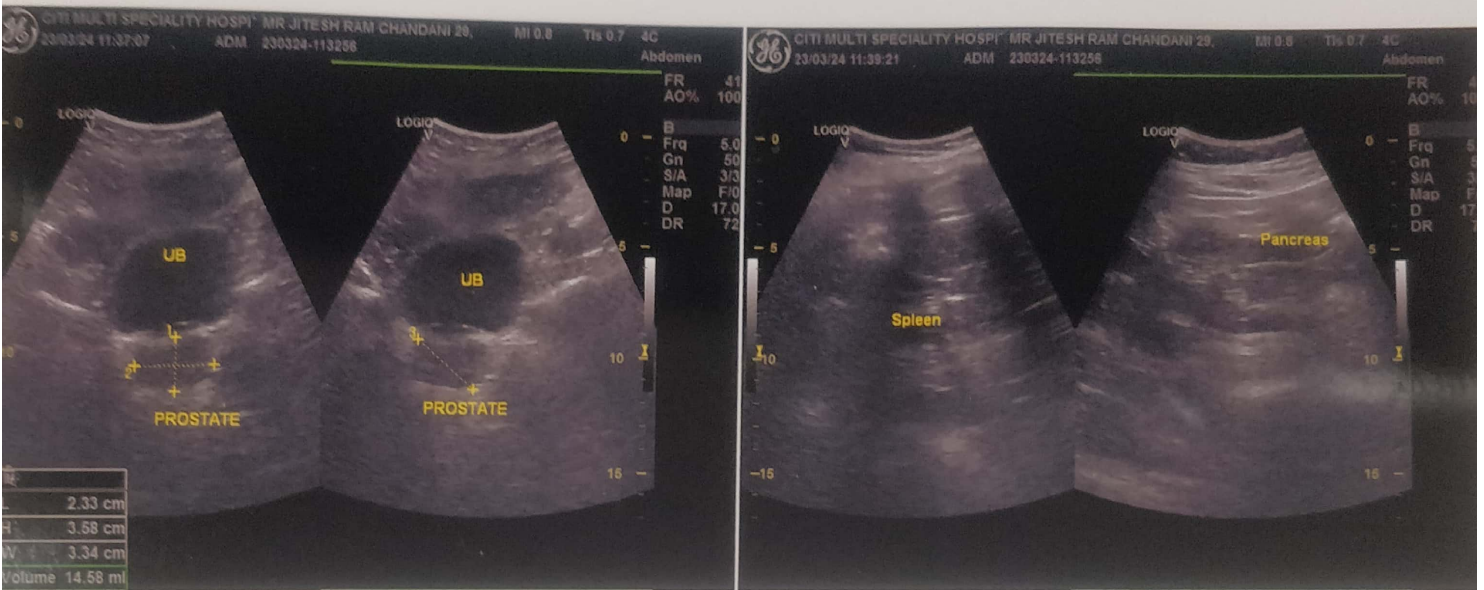
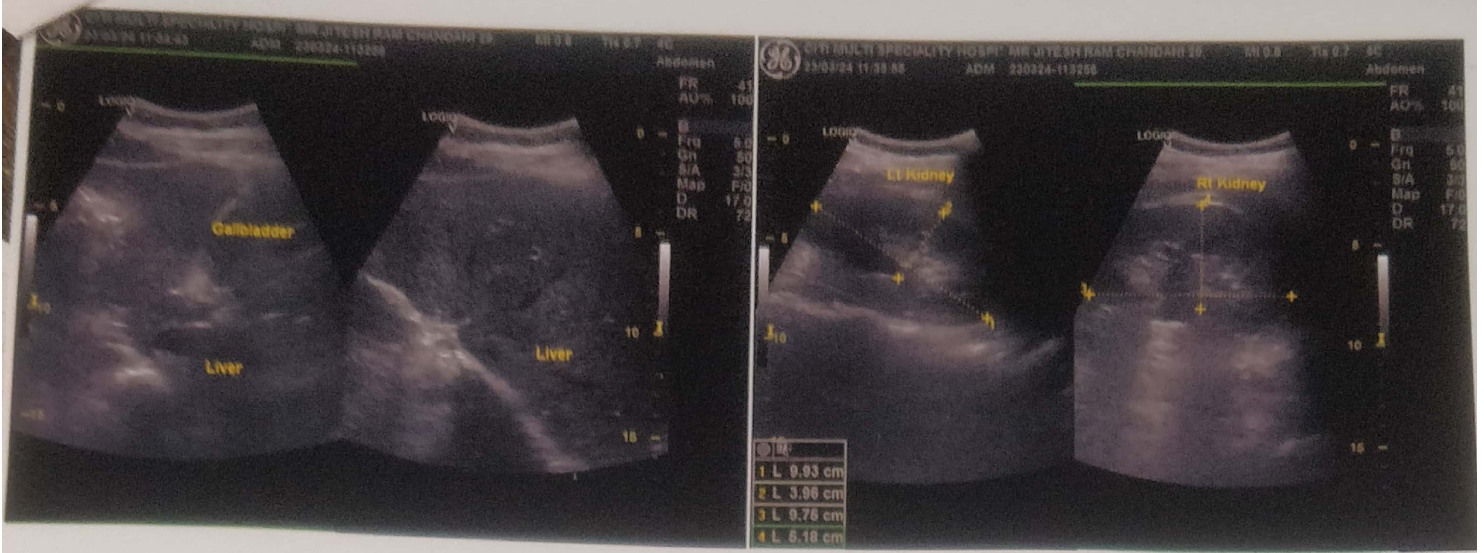
Disclaimer:-The science of radiology is based upon interpretation of shadows of normal and abnormal tissue. This is neither complete nor accurate, hence, findings should always be interpreted in to the light of clinic-pathological correlation. This is a professional opinion, not a diagnosis. In case of any discrepancy a review can be asked

For Emergency Contact: 7771008660

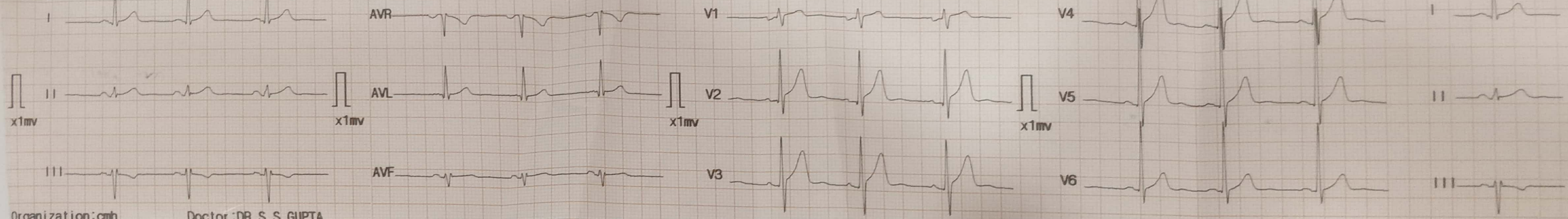
Sister Concern: Citi Hospital, 115 Zone II MP Nagar, Bhopal 462011, Ph: 0755-487772- 73

Empanelled with : State Government, M.P.Police, ESIC, HPCL, Punjab National Bank, Indian Bank  
Food Corporation of India, Ayushman Bharat



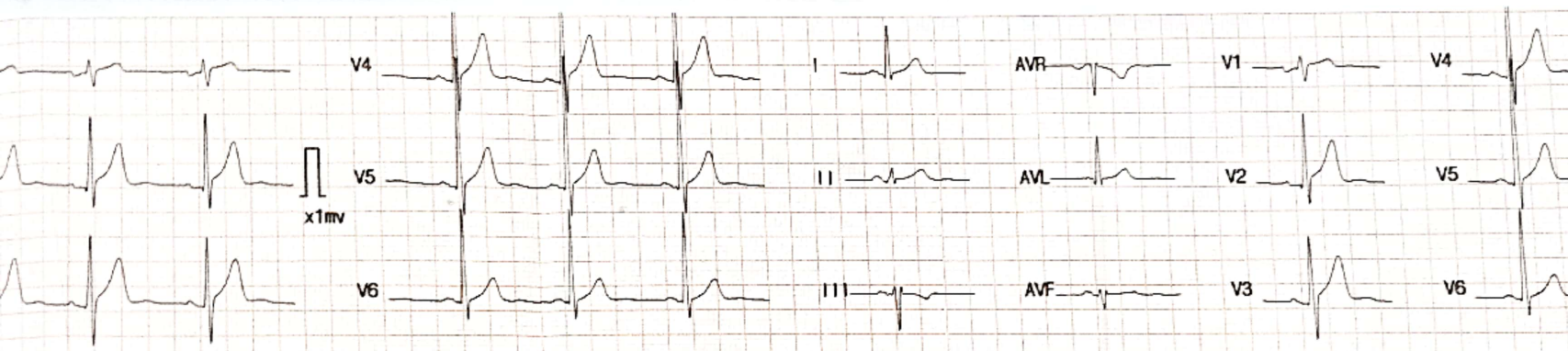


ID: 20240323153944 Name: mr. jitesh 25mm/s 0.5-35Hz AC: off 10mm/mv



Organization: cmh Doctor: DR S S GUPTA





ID : 20240323153944  
 Name : mr. jitesh  
 Sex : Male  
 Age : 29  
 HR : 68 bpm  
 R-R : 884 ms  
 P-R : 129 ms  
 QRS : 89 ms  
 QT/QTc : 347/371 ms  
 P/QRS/T : 50/ -5/ 25  
 RV5/SV1 : 2.388/-0.238 mV  
 RV5+SV1 : 2.150 mV  
 QTcF : 0.392

001: Sinus Rhythm  
 171: Normal ECG  
 Dr. SABIYASACHI GUPTA  
 MBBS (Gold Medalist), MD (Med), DCCP (UK)  
 Reg. No. 71671  
 Reference Report Co  
 03-23-2024 15:40:00  
 03/03/24



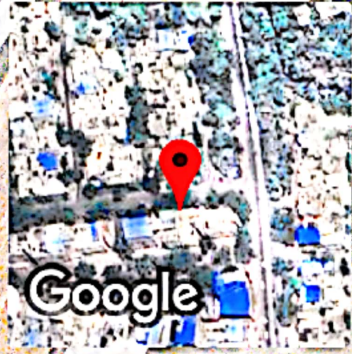
# Blood Borne Pathogen Exposure Program

## Emergency Colors Code

(Emergency Contact Number - 911)

CODE	SITUATION	RESPONSE TEAM	MESSAGE
CODE BLUE	CPR	DUTY DOCTOR / ANESTHETIST / MS / ADMINISTRATOR / STAFF NURSE / OT INCHARGE / ICU NURSING STAFF / OPERATION MANAGER / GUARD	CODE BLUE AT "<LOCATION>". RESPOND IMMEDIATELY
CODE RED	FIRE	MS / OPERATION MANAGER / ADMINISTRATOR / GUARD / FLOOR INCHARGE / MAINTENANCE	CODE RED - FIRE DETECTED AT "<LOCATION>". PLEASE ACTIVATE EMERGENCY RESPONSE TEAM
CODE YELLOW	DISASTER	MS / ADMINISTRATOR / NURSE / OPERATION MANAGER / GUARD / MAINTENANCE	CODE YELLOW ACTIVATE CENTRAL COMMAND CENTRE
CODE PURPLE	GRIEVANCE / DISCIPLINARY ACTION	MS / ADMINISTRATOR / HR MANAGER / DNS	CODE PURPLE - ACTIVATE IMMEDIATE
CODE PINK	CHILD ABDUCTION	ADMINISTRATOR / NURSE / OPERATION MANAGER / GUARD / MAINTENANCE	CODE PINK - ACTIVATE IMMEDIATE
CODE BLACK	BOMB THREAT	MS / ADMINISTRATOR / NURSE / OPERATION MANAGER / GUARD / MAINTENANCE	CODE BLACK - ACTIVATE COMMAND

1. Clean it up. Do not touch yourself from needle stick.
2. Report it. Follow the handling and disposal of needles.
3. Call for help. If blood borne pathogen is detected at "<LOCATION>". PLEASE ACTIVATE EMERGENCY RESPONSE TEAM.
4. Get treated. Get Hepatitis B vaccines.



Bhopal, Madhya Pradesh, भारत  
 w/ 216 Janara Quarter Internal Rd, Gautam Nagar Housing Board Colony,  
 Maharana Pratap Nagar, Bhopal, Madhya Pradesh 462016, भारत  
 Lat 23.235052°  
 Long 77.441054°  
 03/24 09:50 AM GMT +05:30