



* 2 1 1 4 9 0 *

Name : Mr. ABHISHEK VISHWAKARMA Collected On : 23/10/2024 10:51 am
 Lab ID. : 211490 Received On : 23/10/2024 11:01 am
 Age/Sex : 27Years / Male Reported On : 23/10/2024 4:39 pm
 Ref By : JINKUSHAL CARDIAC CARE & SUPER SPECIALITY HOS Report Status : FINAL
 Consulting Dr. : DR. MAYUR JAIN

COMPLETE BLOOD COUNT

| TEST NAME | RESULTS | UNIT | REFERENCE RANGE |
|----------------------------------|-----------------------------|----------------------|-----------------|
| HEMOGLOBIN | 16.1 | gm/dl | 13 - 18 |
| HEMATOCRIT (PCV) | 49 | % | 42 - 52 |
| RBC COUNT | 5.15 | x10 ⁶ /uL | 4.70 - 6.50 |
| MCV | 95 | fl | 80 - 96 |
| MCH | 31.3 | pg | 27 - 33 |
| MCHC | 33 | g/dl | 33 - 36 |
| RDW-CV | 13.2 | % | 11.5 - 14.5 |
| TOTAL LEUCOCYTE COUNT | 6190 | /cumm | 4000 - 11000 |
| <u>DIFFERENTIAL COUNT</u> | | | |
| NEUTROPHILS | 38 | % | 40 - 80 |
| LYMPHOCYTES | 45 | % | 20 - 40 |
| EOSINOPHILS | 10 | % | 0 - 6 |
| MONOCYTES | 07 | % | 2 - 10 |
| BASOPHILS | 00 | % | 0 - 1 |
| PLATELET COUNT | 310000 | /cumm | 150 to 410 |
| MPV | 11.8 | fl | 6.5 - 11.5 |
| PDW | 16.1 | % | 9.0 - 17.0 |
| PCT | 0.370 | % | 0.200 - 0.500 |
| RBC MORPHOLOGY | Normocytic Normochromic | | |
| WBC MORPHOLOGY | Eosinophilia, Lymphocytosis | | |
| PLATELETS ON SMEAR | Adequate | | |

Method : EDTA Whole Blood- Tests done on Automated Six Part Cell Counter.RBC and Platelet count by Electric Impedance ,WBC by SF Cube method and Differential by flow cytometry . Hemoglobin by Cyanide free reagent for hemoglobin test (Colorimetric Method).Rest are calculated parameters.

Result relates to sample tested, Kindly correlate with clinical findings.

----- END OF REPORT -----

Checked By
 Rajashri_Dumbre

DR. SMITA RANVEER.
M.B.B.S.M.D. Pathology(Mum)
Consultant Histocytopathologist
 Regd.No.: 3401/09/2007





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HAEMATOLOGY

| TEST NAME | RESULTS | UNIT | REFERENCE RANGE |
|---|--------------------------|------|-----------------|
| <u>BLOOD GROUP</u> | | | |
| SPECIMEN | WHOLE BLOOD EDTA & SERUM | | |
| * ABO GROUP | 'A' | | |
| RH FACTOR | POSITIVE | | |
| Method: Slide Agglutination and Tube Method (Forward grouping & Reverse grouping) | | | |
| Result relates to sample tested, Kindly correlate with clinical findings. | | | |
| ----- END OF REPORT ----- | | | |

Checked By
SHAISTA Q

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*** BIOCHEMISTRY**

| TEST NAME | RESULTS | UNIT | REFERENCE RANGE |
|---------------------------------|--------------------------------|-------|-----------------|
| <u>CREATININE, SERUM</u> | | | |
| * SERUM CREATININE | 0.88 | mg/dL | 0.7 - 1.3 |
| METHOD | Enzymatic Colourimetric Method | | |

Creatinine is critically important in assessing renal function. In blood, it is a marker of glomerular filtration rate. As the kidneys become impaired for any reason, the creatinine level in the blood will rise due to poor clearance of creatinine by the kidneys. Abnormally high levels of creatinine thus warn of possible malfunction or failure of the kidneys.

Result relates to sample tested, Kindly correlate with clinical findings.

----- END OF REPORT -----

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HAEMATOLOGY

| TEST NAME | RESULTS | UNIT | REFERENCE RANGE |
|------------|---------|---------|-----------------|
| ESR | | | |
| ESR | 11 | mm/1hr. | 0 - 20 |

METHOD - WESTERGREN

Result relates to sample tested, Kindly correlate with clinical findings.

----- END OF REPORT -----

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BIOCHEMISTRY

| TEST NAME | RESULTS | UNIT | REFERENCE RANGE |
|--|---------|-------|-----------------|
| <u>BLOOD GLUCOSE FASTING & PP</u> | | | |
| BLOOD GLUCOSE FASTING | 93.4 | mg/dL | 70 - 110 |
| BLOOD GLUCOSE PP | 97.4 | mg/dL | 70 - 140 |

Method (GOD-POD). DONE ON FULLY AUTOMATED ANALYSER (EM200).

1. Fasting is required (Except for water) for 8-10 hours before collection for fasting specimen. Last dinner should consist of bland diet.
2. Don't take insulin or oral hypoglycemic agent until after fasting blood sample has been drawn

INTERPRETATION

- Normal glucose tolerance : 70-110 mg/dl
- Impaired Fasting glucose (IFG) : 110-125 mg/dl
- Diabetes mellitus : ≥ 126 mg/dl

POSTPRANDIAL/POST GLUCOSE (75 grams)

- Normal glucose tolerance : 70-139 mg/dl
- Impaired glucose tolerance : 140-199 mg/dl
- Diabetes mellitus : ≥ 200 mg/dl

CRITERIA FOR DIAGNOSIS OF DIABETES MELLITUS

- Fasting plasma glucose ≥ 126 mg/dl
- Classical symptoms + Random plasma glucose ≥ 200 mg/dl
- Plasma glucose ≥ 200 mg/dl (2 hrs after 75 grams of glucose)
- Glycosylated haemoglobin $> 6.5\%$

***Any positive criteria should be tested on subsequent day with same or other criteria.

BILIRUBIN (TOTAL,DIRECT,INDIRECT)

| | | | |
|------------------------------|------|-------|-----------|
| TOTAL BILLIRUBIN | 0.69 | mg/dL | 0.1 - 1.2 |
| BILLIRUBIN (DIRECT) | 0.29 | mg/dL | 0.0 - 0.4 |
| BILLIRUBIN (INDIRECT) | 0.40 | mg/dL | 0.0 - 1.1 |

Method(Diazo)

| | | | |
|-------------------|-------------|------|--------|
| SGPT (ALT) | 97.6 | IU/L | 0 - 40 |
|-------------------|-------------|------|--------|

UV Kinetic Without PLP (P-L-P)

BLOOD UREA NITROGEN, SERUM

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Rajashri_Dumbre

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BIOCHEMISTRY

| TEST NAME | RESULTS | UNIT | REFERENCE RANGE |
|---|---------|-------|-----------------|
| * BLOOD UREA NITROGEN | 12.3 | mg/dL | 7 - 18 |
| Result relates to sample tested, Kindly correlate with clinical findings. | | | |
| ----- END OF REPORT ----- | | | |

Checked By
 Rajashri_Dumbre

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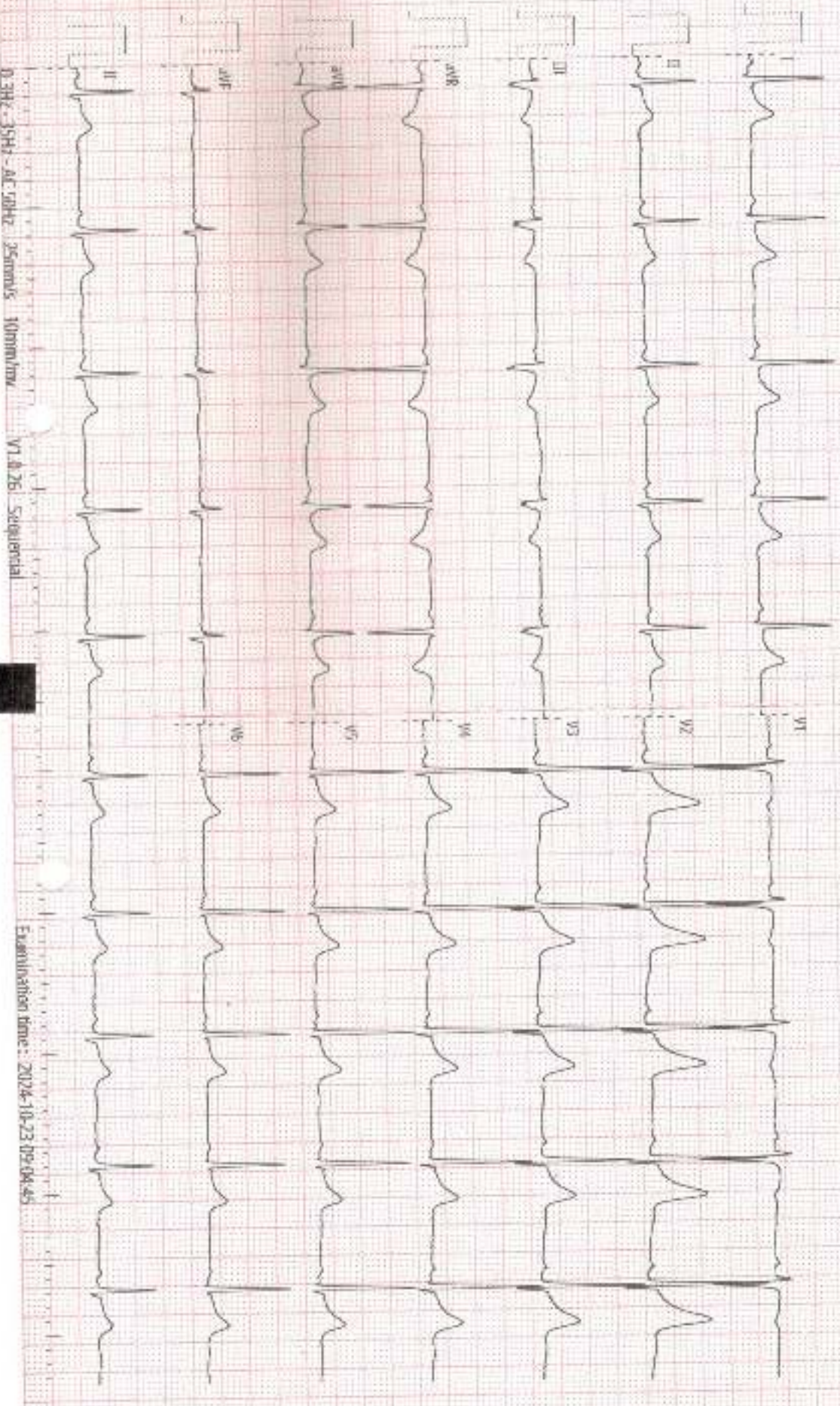
ECG report

Continued sign:

ID : 202410220000203
Name : MR ABHISHEK KUSHWAHAKARMA
Gender : M
Age : 27 Years
Dept :
Bed No.:

HR : 63 bpm
PR : 125 ms
QRS : 90 ms
QT/QTc : 394/398 ms
P/QRS/T : 47/54°
RS/SQT : 1.63/2/1.47 mV
RS/SQT : 2.7/9 mV

<Interpretations >
Sinus rhythm
Normal ECG



0.3Hz 35Hz -60 70Hz 25mm/s 5mm/mV V1 & V6 Sequential

Examination time: 2024-10-23 09:04:45

MEDICAL EXAMINATION REPORT

| | | | |
|--------------------------------------|--|--|------------|
| Name Mr./Mrs./Miss | Abhishek Vishwakarma | | |
| Sex M | Male/ Female— | | |
| Age (yrs.) 27 | UHID : | | |
| Date 23/10/2024 | / | / 20 | Bill No. : |
| Marital Status | Married/ No. of Children / Unmarried/ Widow : | | |
| Present Complaints | No any fresh complaint. | | |
| Past Medical : History Surgical : | No any surgical History. | | |
| Personal History | Diet : Veg <input type="checkbox"/> / Mixed <input checked="" type="checkbox"/> Addiction : Smoking <input type="checkbox"/> / Tobacco Chewing <input type="checkbox"/> / Alcohol <input type="checkbox"/> Any Other occasional smoking. | | |
| Family History | Father = | HT / DM / IHD / Stroke / Any Other NO | |
| | Mother = | Mother = HT / <u>DM</u> / IHD / Stroke / Any Other | |
| | Siblings = | Siblings = HT / DM / IHD / Stroke / Any Other NO. | |
| History of Allergies | Drug Allergy | No any allergy. | |
| | Any Other | | |
| History of Medication | For HT / DM / IHD / Hypothyroidism | | |
| | Any Other | No any medication. | |
| On Examination (O/E) | G.E. : - Ec-fair R.S. : - clear C.V.S. : S ₁ S ₂ ⊕ C.N.S. : conscious & oriented P/A : soft Any Other Positive Findings : No any positive findings | | |

| | |
|--|--|
| Height ^{5'5"} 165 cms | Weight 76.6 Kgs |
| BMI 27.92 | |
| Pulse (per min.) 62 | Blood Pressure (mm of Hg) 120/70 mm of Hg |
| Gynaecology | |
| Examined by | Dr. |
| Complaint & Duration | |
| Other symptoms (Mict, bowels etc) | |
| Menstrual History | Menarche _____ Cycle _____ Loss _____ Pain _____ I.M.B. _____ P.C.B. _____ L.M.P. _____ Vaginal Discharge _____ Cx. Smear _____ Contraception _____ |
| Obstetric History | |
| Examination : | |
| Breast | |
| Abdomen | |
| P.S. | |
| P.V. | |
| Gynaecology Impression & Recommendation | |
| Recommendation | |
| Physician Impression | |
| Examined by : | - <u>Overweight</u> = To Reduce Weight - <u>Underweight</u> = To Increase Weight |

SEFRA DIGITAL X-RAY

JINKUSHAL HOSPITAL, Rosa Vista, Opp. Suraj Water Park, Waghill, G.B. Road, Thane (W)
Mob.: 7678031047 / 9833520607 | Time : 9 am. to 9 pm. | SUNDAY ON CALL)

PORTABLE X-RAY AVAILABLE

| | |
|---|----------------------|
| PATIENT NAME : MR. ABHISHEK VISHWAKARMA | AGE / SEX 27 YRS / M |
| REF BY DR: JINKUSHAL HOSPITAL | DATE : 23/10/2024 |

X-ray Chest PA

Bilateral lung fields appear clear. No obvious pleural/parenchymal lesion noted.

Bilateral hila are normal.

Both costo-phrenic and cardio-phrenic angles appear clear.

Cardiac silhouette is within normal limits.

Both domes of diaphragm appear normal.

Bony thoracic cage & soft tissues appear normal.

Impression: No significant abnormality detected.

Suggest Clinical correlation and further evaluation.

Thanks for referral



Dr. Devendra Patil
MD Radiology

Disclaimer: report is done by teleradiology after the images acquired by PACS (picture archiving and communication system) and this report is not meant for medico-legal purpose. Investigations have their limitations. Solitary pathological/Radiological and other investigations never confirm the final diagnosis. They only help in diagnosing the disease in correlation to clinical symptoms and other related tests. Please interpret accordingly. Patient's identification in online reporting is not established, so in no way patient identification is possible for medico-legal cases.

CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination of,

 Mr./Ms./Mrs. Abhishek Vishwakarma on 24/10/2024.

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

| Fitness Status | Mark (✓) Below, where applicable |
|--|--|
| <ul style="list-style-type: none"> Medically Fit | ✓ |
| <ul style="list-style-type: none"> Fit with restriction/recommendations Though following restriction have been revealed, in my opinion, these are not impediments to the prospective job 1. 2. 3. However the employee should follow the advice/medication that has been communicated to him/her. Review after _____ days is recommended. | No Any High Complaints. Physically Fit. |
| <ul style="list-style-type: none"> Currently Unfit Review after _____ days is recommended. | |
| <ul style="list-style-type: none"> Unfit | |

Signature

Dr. Mayur Jain

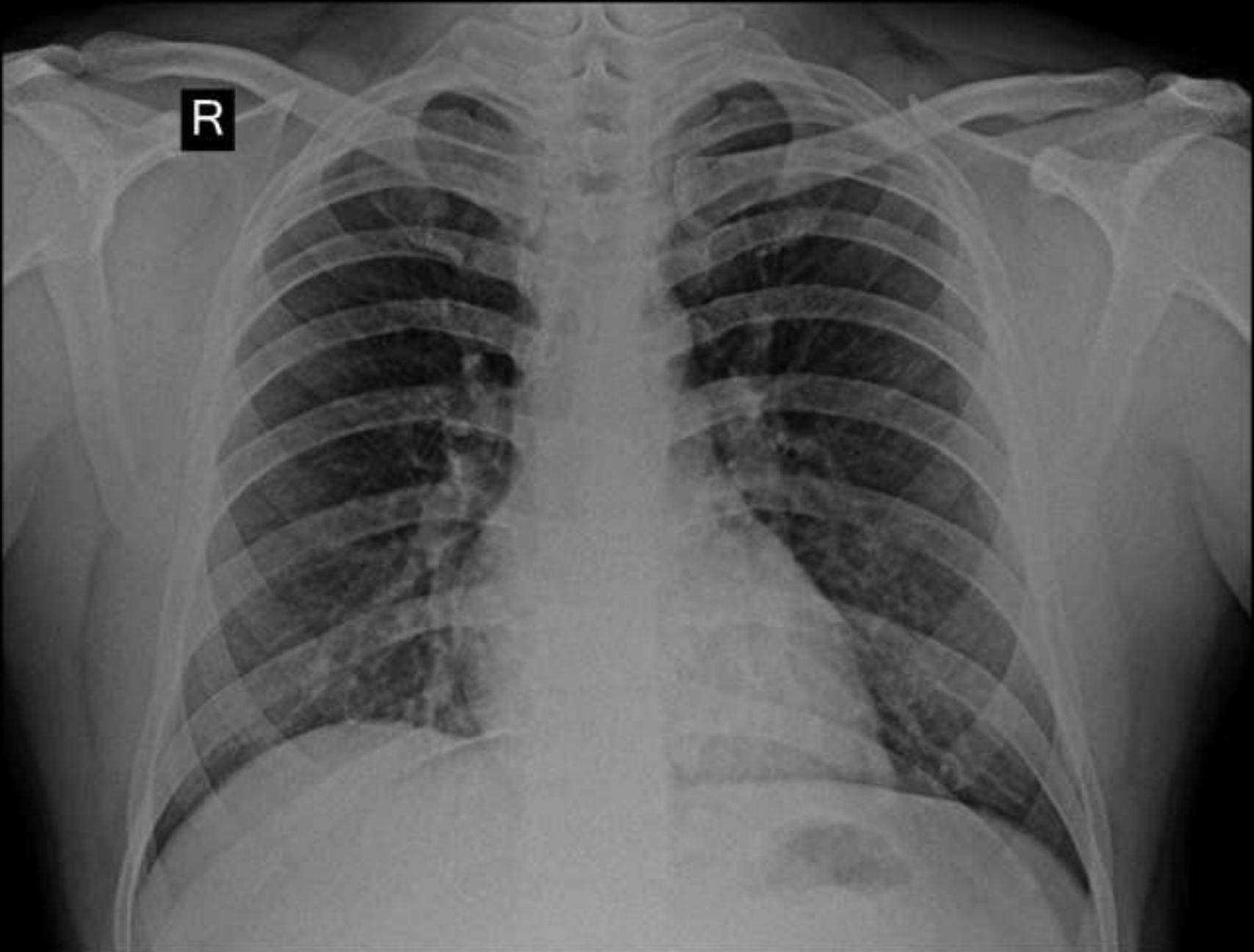
Medical Officer

Jinkushal Cardiac Care and Super specialty Hospital

Second floor, Rosa Vista, Opp. Suraj Water Park,

Kavesar, Ghodbunder Road, Thane(W) - 400607.

DR. MAYUR JAIN
DM CARDIOLOGY
2007/04/0818
This certificate is not meant for medico-legal purposes.



MR ABHISHEK VISHWAKARMA AGE 27 YRS 23OCT24R1 M CHEST,PA 23-Oct-24
SEFRA DIGITAL X-RAY. JINKUSHAL CARDIAC CARE HOSPITAL, THANE