

**CERTIFICATE OF MEDICAL FITNESS**

NAME: Tilak pillai

AGE/ GENDER: 45y / male

HEIGHT: 175cm

WEIGHT: 84.8 kg

IDENTIFICATION MARK: -

BLOOD PRESSURE: 130/90 mmHg

PULSE: 92 b/m

ANY OTHER DISEASE DIAGNOSED IN THE PAST: Hypertension - 5mg

ALLERGIES, IF ANY: nil

LIST OF PRESCRIBED MEDICINES: nil

I Certify that I have carefully examined Mr/Mrs. Tilak pillai son/daughter of Mr A.P.C pillai who has signed in my presence. He/ she has no physical disease and is fit for employment.

Signature of candidate

Place: Spectrum Diagnostics & health care

Date: 27/04/24

**Dr. SATISH KINI**  
MD (MEDICINE)

Consultant Physician  
REG. No. 24012 (K.M.C.)  
Signature of Medical Officer

*Disclaimer: The patient has not been checked for COVID. This certificate does not relate to the covid status of the patient examined.*

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SCAN FOR LOCATION



Dr. Ashok S  
Bsc., MBBS., D.O.M.S  
Consultant Ophthalmologist  
KMC No: 31827

DATE: 27-04-24

**EYE EXAMINATION**

NAME: *Ms. Lakshmi Pillai* AGE: *45Y* GENDER: F / M

	RIGHT EYE	LEFT EYE
Vision	<i>6/9 up to 10</i>	<i>6/9 up to 10</i>
Vision With glass	<i>6/6 up to 6</i>	<i>6/6 up to 6</i>
Color Vision	Normal	Normal
Anterior segment examination	Normal	Normal
Fundus Examination	Normal	Normal
Any other abnormality	Nil	Nil
Diagnosis/ impression	Normal	Normal

*To Carbone Spectra*

Dr. ASHOK SARODHE  
BSc., MBBS., D.O.M.S.  
Consultant (Ophthalmologist)  
KMC 31827



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TILAK PILLAI  
Male 45Years

Diagnosis Information:

Sinus Rhythm  
\*\*\*Normal ECG\*\*\*

HR	: 84	bpm
P	: 98	ms
PR	: 157	ms
QRS	: 102	ms
QT/QTc	: 368/436	ms
P/QRS/T	: 160/42	°
RV5/SV1	: 0.946/0.834	mV

Report Confirmed by:



<b>Name</b> : MR. TILAK PILLAI	<b>UHID</b> : 2704240023	<b>Bill Date</b> : 27-Apr-2024 08:36 AM
<b>Age / Gender</b> : 45 years / Male		<b>Sample Col. Date</b> : 27-Apr-2024 08:36 AM
<b>Ref. By Dr.</b> : Dr. APOLO CLINIC	2704240023	<b>Result Date</b> : 27-Apr-2024 10:04 AM
<b>Reg. No.</b> : 2704240023		<b>Report Status</b> : Final
<b>C/o</b> : Apollo Clinic		

Test Name	Result	Unit	Reference Value	Method
<b>Fasting Blood Sugar (FBS)- Plasma</b>	105	mg/dL	60.0-110.0	Hexo Kinase

**Comments:** Glucose, also called dextrose, one of a group of carbohydrates known as simple sugars (monosaccharides). Glucose has the molecular formula  $C_6H_{12}O_6$ . It is found in fruits and honey and is the major free sugar circulating in the blood of higher animals. It is the source of energy in cell function, and the regulation of its metabolism is of great importance (fermentation; gluconeogenesis). Molecules of starch, the major energy-reserve carbohydrate of plants, consist of thousands of linear glucose units. Another major compound composed of glucose is cellulose, which is also linear. Dextrose is the molecule D-glucose. Blood sugar, or glucose, is the main sugar found in the blood. It comes from the food you eat, and it is body's main source of energy. The blood carries glucose to all of the body's cells to use for energy. Diabetes is a disease in which your blood sugar levels are too high. Usage: Glucose determinations are useful in the detection and management of Diabetes mellitus.

**Note:** Additional tests available for Diabetic control are Glycated Hemoglobin (HbA1c), Fructosamine & Microalbumin urine

**Comments:** Conditions which can lead to lower postprandial glucose levels as compared to fasting glucose are excessive insulin release, rapid gastric emptying & brisk glucose absorption.

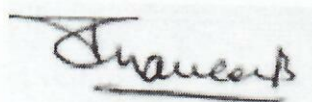
**Probable causes :** Early Type II Diabetes / Glucose intolerance, Drugs like Salicylates, Beta blockers, Pentamidine etc., Alcohol , Dietary – Intake of excessive carbohydrates and foods with high glycemic index ? Exercise in between samples ? Family history of Diabetes, Idiopathic, Partial / Total Gastrectomy.

<b>Creatinine, Serum</b>	1.10	mg/dL	Male: 0.70-1.30 Female: 0.55-1.02	Modified kinetic Jaffe
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**Comments:** Creatinine is the product of creatine metabolism. Creatinine is a chemical compound left over from energy-producing processes in your muscles. Healthy kidneys filter creatinine out of the blood. Creatinine exits your body as a waste product in urine. It is a measure of renal function and elevated levels are observed in patients typically with 50% or greater impairment of renal function.



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DR PRAVEEN B, MBBS, DMRD, DNB Consultant  
Radiologist

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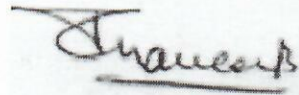


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Test Name	Result	Unit	Reference Value	Method
<b>LFT-Liver Function Test -Serum</b>				
Bilirubin Total-Serum	0.76	mg/dL	0.2-1.0	Caffeine Benzoate
Bilirubin Direct-Serum	0.10	mg/dL	0.0-0.2	Diazotised Sulphanilic Acid
Bilirubin Indirect-Serum	0.66	mg/dL	Male: 0.0 - 1.10	Direct Measure
Aspartate Aminotransferase (AST/SGOT)-Serum	29.00	U/L	Male: 15.0 - 37.0	UV with Pyridoxal - 5 - Phosphate
Alanine Aminotransferase (ALT/SGPT)-Serum	37.00	U/L	Male: 16.0 - 63.0	UV with Pyridoxal - 5 - Phosphate
Alkaline Phosphatase (ALP)-Serum	68.00	U/L	Male: 45.0 - 117.0	PNPP,AMP-Buffer
Protein, Total-Serum	7.44	g/dL	6.40-8.20	Biuret/Endpoint-With Blank
Albumin-Serum	4.44	g/dL	Male: 3.40 - 5.50	Bromocresol Purple
Globulin-Serum	3.00	g/dL	2.0-3.50	Calculated
Albumin/Globulin Ratio-Serum	1.48	Ratio	0.80-2.0	Calculated



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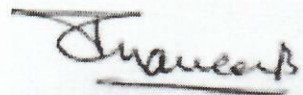


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<b>Ref. By Dr.</b> : Dr. APOLO CLINIC	2704240023	<b>Result Date</b> : 27-Apr-2024 11:33 AM
<b>Reg. No.</b> : 2704240023		<b>Report Status</b> : Final
<b>C/o</b> : Apollo Clinic		

Test Name	Result	Unit	Reference Value	Method
<b>BUN/Creatinine Ratio</b>				
<b>Blood urea nitrogen (BUN)-Serum</b>	16.70	mg/dL	7.0-18.0	
<b>Creatinine-Serum</b>	1.08	mg/dL	Male: 0.70-1.30 Female: 0.55-1.02	
<b>BUN/Creatinine Ratio</b>	15.46	Ratio	5.0-20.0	Calculated



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<b>Ref. By Dr.</b> : Dr. APOLO CLINIC	2704240023	<b>Result Date</b> : 27-Apr-2024 12:21 PM
<b>Reg. No.</b> : 2704240023		<b>Report Status</b> : Final
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Test Name	Result	Unit	Reference Value	Method
<b>Complete Haemogram-Whole Blood EDTA</b>				
Haemoglobin (HB)	16.60	g/dL	Male: 14.0-17.0 Female: 12.0-15.0 Newborn: 16.50 - 19.50	Spectrophotometer
Red Blood Cell (RBC)	5.37	million/cumm	3.50 - 5.50	Volumetric Impedance
Packed Cell Volume (PCV)	49.20	%	Male: 42.0-51.0 Female: 36.0-45.0	Electronic Pulse
Mean corpuscular volume (MCV)	91.50	fL	78.0- 94.0	Calculated
Mean corpuscular hemoglobin (MCH)	30.90	pg	27.50-32.20	Calculated
Mean corpuscular hemoglobin concentration (MCHC)	33.70	%	33.00-35.50	Calculated
Red Blood Cell Distribution Width SD (RDW-SD)	42.00	fL	40.0-55.0	Volumetric Impedance
Red Blood Cell Distribution CV (RDW-CV)	13.60	%	Male: 11.80-14.50 Female: 12.20-16.10	Volumetric Impedance
Mean Platelet Volume (MPV)	9.80	fL	8.0-15.0	Volumetric Impedance
Platelet	2.96	lakh/cumm	1.50-4.50	Volumetric Impedance
Platelet Distribution Width (PDW)	9.90	%	8.30 - 56.60	Volumetric Impedance
White Blood cell Count (WBC)	7030	cells/cumm	Male: 4000-11000 Female: 4000-11000 Children: 6000-17500 Infants : 9000-30000	Volumetric Impedance
Neutrophils	56.20	%	40.0-75.0	Light scattering/Manual
Lymphocytes	35.50	%	20.0-40.0	Light scattering/Manual
Eosinophils	3.50	%	0.0-8.0	Light scattering/Manual



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Test Name	Result	Unit	Reference Value	Method
Monocytes	4.50	%	0.0-10.0	Light scattering/Manual
Basophils	0.30	%	0.0-1.0	Light scattering/Manual
Absolute Neutrophil Count	3.95	10 <sup>3</sup> /uL	2.0- 7.0	Calculated
Absolute Lymphocyte Count	2.50	10 <sup>3</sup> /uL	1.0-3.0	Calculated
Absolute Monocyte Count	0.32	10 <sup>3</sup> /uL	0.20-1.00	Calculated
Absolute Eosinophil Count	240.00	cells/cumm	40-440	Calculated
Absolute Basophil Count	0.02	10 <sup>3</sup> /uL	0.0-0.10	Calculated
Erythrocyte Sedimentation Rate (ESR)	4.0	mm/hr	Female : 0.0-20.0 Male : 0.0-10.0	Westergren

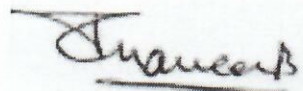
### Peripheral Smear Examination-Whole Blood EDTA

Method: (Microscopy-Manual)

RBC'S : Normocytic Normochromic.  
WBC'S : Are normal in total number, morphology and distribution.  
Platelets : Adequate in number and normal in morphology.  
No abnormal cells or hemoparasites are present.  
Impression : Normocytic Normochromic Blood picture.



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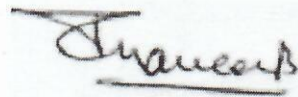
Test Name	Result	Unit	Reference Value	Method
<b>Blood Group &amp; Rh Typing-Whole Blood EDTA</b>				
<b>Blood Group</b>	A			Slide/Tube agglutination
<b>Rh Type</b>	Positive			Slide/Tube agglutination

Note: Confirm by tube or gel method.

Comments: ABO blood group system, the classification of human blood based on the inherited properties of red blood cells (erythrocytes) as determined by the presence or absence of the antigens A and B, which are carried on the surface of the red cells. Persons may thus have type A, type B, type O, or type AB blood.



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<b>Ref. By Dr.</b> : Dr. APOLO CLINIC	2704240023	<b>Result Date</b> : 27-Apr-2024 01:28 PM
<b>Reg. No.</b> : 2704240023		<b>Report Status</b> : Final
<b>C/o</b> : Apollo Clinic		

Test Name	Result	Unit	Reference Value	Method
Post prandial Blood Glucose (PPBS)-Plasma	109	mg/dL	70-140	Hexo Kinase

**Comments:** Glucose, also called dextrose, one of a group of carbohydrates known as simple sugars (monosaccharides). Glucose has the molecular formula  $C_6H_{12}O_6$ . It is found in fruits and honey and is the major free sugar circulating in the blood of higher animals. It is the source of energy in cell function, and the regulation of its metabolism is of great importance (fermentation; gluconeogenesis). Molecules of starch, the major energy-reserve carbohydrate of plants, consist of thousands of linear glucose units. Another major compound composed of glucose is cellulose, which is also linear. Dextrose is the molecule D-glucose. Blood sugar, or glucose, is the main sugar found in the blood. It comes from the food you eat, and it is body's main source of energy. The blood carries glucose to all of the body's cells to use for energy. Diabetes is a disease in which your blood sugar levels are too high. Usage: Glucose determinations are useful in the detection and management of Diabetes mellitus.

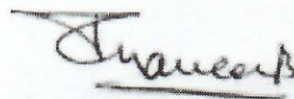
**Note:** Additional tests available for Diabetic control are Glycated Hemoglobin (HbA1c), Fructosamine & Microalbumin urine

**Comments:** Conditions which can lead to lower postprandial glucose levels as compared to fasting glucose are excessive insulin release, rapid gastric emptying & brisk glucose absorption.

**Probable causes :** Early Type II Diabetes / Glucose intolerance, Drugs like Salicylates, Beta blockers, Pentamidine etc., Alcohol ,Dietary – Intake of excessive carbohydrates and foods with high glycemic index ? Exercise in between samples ? Family history of Diabetes, Idiopathic, Partial / Total Gastrectomy.



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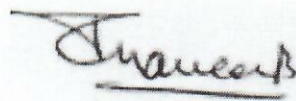
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Test Name	Result	Unit	Reference Value	Method
<b>Urine Routine Examination-Urine</b>				
<b>Physical Examination</b>				
Colour	Pale Yellow		Pale Yellow	Visual
Appearance	Clear		Clear	Visual
Reaction (pH)	6.0		5.0-7.5	Dipstick
Specific Gravity	1.025		1.000-1.030	Dipstick
<b>Biochemical Examination</b>				
Albumin	Negative		Negative	Dipstick/Precipitation
Glucose	Negative		Negative	Dipstick/Benedicts
Bilirubin	Negative		Negative	Dipstick/Fouchets
Ketone Bodies	Negative		Negative	Dipstick/Rotheras
Urobilinogen	Normal		Normal	Dipstick/Ehrlichs
Nitrite	Negative		Negative	Dipstick
<b>Microscopic Examination</b>				
Pus Cells	1-2	hpf	0.0-5.0	Microscopy
Epithelial Cells	1-2	hpf	0.0-10.0	Microscopy
RBCs	Absent	hpf	Absent	Microscopy
Casts	Absent		Absent	Microscopy
Crystals	Absent		Absent	Microscopy
Others	Absent		Absent	Microscopy

**Comments:** The kidneys help infiltration of the blood by eliminating waste out of the body through urine. They also regulate water in the body by conserving electrolytes, proteins, and other compounds. But due to some conditions and abnormalities in kidney function, the urine may encompass some abnormal constituents, which are not normally present. A complete urine examination helps in detecting such abnormal constituents in urine. Several disorders can be detected by identifying and measuring the levels of such substances. Blood cells, bilirubin, bacteria, pus cells, epithelial cells may be present in urine due to kidney disease or infection. Routine urine examination helps to diagnose kidney diseases, urinary tract infections, diabetes and other metabolic disorders.



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<b>Ref. By Dr.</b> : Dr. APOLO CLINIC		<b>Result Date</b> : 27-Apr-2024 04:05 PM
<b>Reg. No.</b> : 2704240023		<b>Report Status</b> : Final
<b>C/o</b> : Apollo Clinic		

Test Name	Result	Unit	Reference Value	Method
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## CHEST PA VIEW

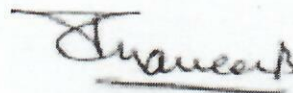
- Visualised lungs are clear .
- Bilateral hila appears normal .
- Cardia is normal in size
- No pleural effusion

**IMPRESSION:** No significant abnormality

MEDICAL EXAMINATION 1  
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