

Mediwheel
...Your wellness partner

Arcofemi Healthcare Pvt Ltd

(Formerly known as Arcofemi Healthcare Ltd)

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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

CERTIFICATE OF MEDICAL FITNESS

NAME: Mr. Nagaraj M.

AGE/ GENDER: 30yrs / m.

HEIGHT: 168 cm

WEIGHT: 80 kgs

IDENTIFICATION MARK: —

BLOOD PRESSURE:

110/80 mmHg

PULSE:

76 bpm

CVS:

RS:P

} Normal.

ANY OTHER DISEASE DIAGNOSED IN THE PAST:

Nil.

ALLERGIES, IF ANY:

Nil.

LIST OF PRESCRIBED MEDICINES:

Nil.

ANY OTHER REMARKS:

No

I Certify that I have carefully examined Mr/Mrs. Nagaraj M. son/daughter of Ms S/o Mallikarjun who has signed in my presence. He/ she has no physical disease and is fit for employment.

Nagaraj M.

Signature of candidate

Dr. BINDURAJ. R
MBBS, MD
Internal Medicine

Signature of Medical Officer

Place: Spectrum Diagnostics & Health Care,

Date: 9/11/24.

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

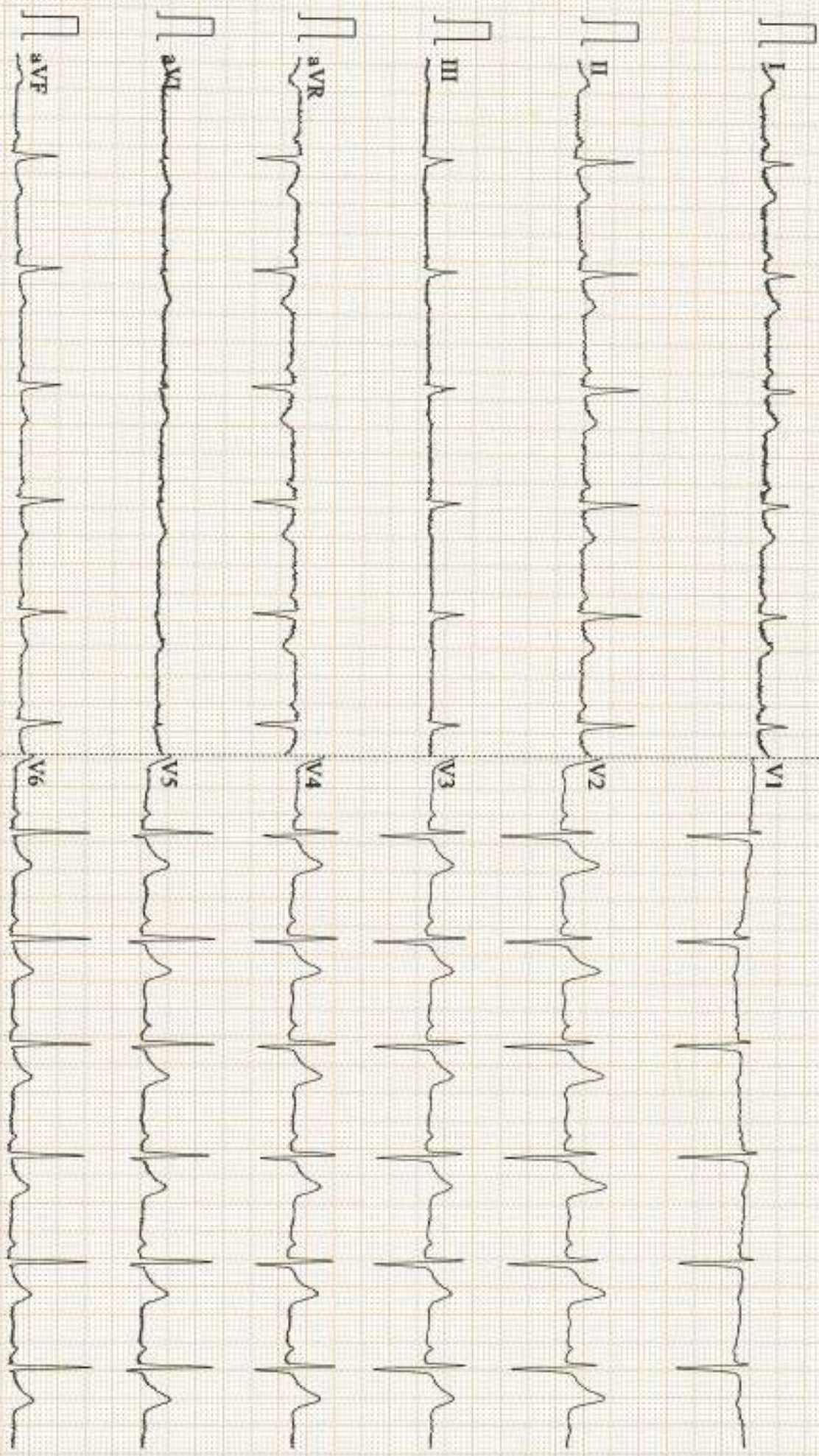


MR NAGARAJA M
Male 30Y ears

HR	: 76	bpm
P	: 87	ms
PR	: 139	ms
QRS	: 85	ms
QT/QTc	: 357/401	ms
PQRS/T	: 31/59/40	°
RV5/SV1	: 1.267/1.119	mV

Diagnosis Information:
Sinus Rhythm
Normal ECG

Report Confirmed by:



Name : MR. NAGARAJA M	UHD : 0911240036	Bill Date : 09-Nov-2024 09:05 AM
Age / Gender : 30 years / Male		Sample Col. Date : 09-Nov-2024 09:05 AM
Ref. By Dr. : C/O APOLO CLINIC		Result Date : 09-Nov-2024 12:49 PM
Reg. No. : 0911240036	0911240036	Report Status : Final
C/o : APOLLO CLINIC		

Test Name	Result	Unit	Reference Value	Method
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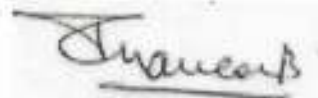
CHEST PA VIEW

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

IMPRESSION: No significant abnormality.



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Printed On : 09 Nov, 2024 04:52 pm



DR. PRAVEEN B, MBBS, DMRD, DNB Consultant
Radiologist

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Tejas Arcade, #9/1, 1st Main Road, Dr. Rajkumar Road, Rajajinagar, Opp. St. Theresa Hospital, Bengaluru - 560010

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Other Branch: #466/A, Ideal Homes Township, 80 Feet Road, Kenchanahalli, Rajarajeshwari Nagar, Bengaluru-560098 +91 6361 253 097 | 080-2991 8944 | 080-48511985

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Test Name	Result	Unit	Reference Value	Method
Complete Haemogram-Whole Blood EDTA				
Haemoglobin (HB)	15.90	g/dL	Male: 14.0 - 17.0	Spectrophotometer
Red Blood Cell (RBC)	4.73	million/cumm	3.50 - 5.50	Volumetric
Packed Cell Volume (PCV)	45.60	%	Male: 42.0 - 51.0	Impedance
Mean corpuscular volume (MCV)	96.40	fL	78.0- 94.0	Electronic Pulse
Mean corpuscular hemoglobin (MCH)	33.60	pg	27.50-32.20	Calculated
Mean corpuscular hemoglobin concentration (MCHC)	34.80	%	33.00-35.50	Calculated
Red Blood Cell Distribution Width SD (RDW-SD)	47.60	fL	40.0-55.0	Volumetric
Red Blood Cell Distribution CV (RDW-CV)	15.20	%	Male: 11.80 - 14.50	Impedance
Mean Platelet Volume (MPV)	9.80	fL	8.0-15.0	Volumetric
Platelet	2.99	lakh/cumm	1.50-4.50	Impedance
Platelet Distribution Width (PDW)	9.80	%	8.30 - 56.60	Volumetric
White Blood cell Count (WBC)	9540	cells/cumm	Male: 4000.0 - 11000.0	Impedance
Neutrophils	58.50	%	40.0-75.0	Volumetric
Lymphocytes	36.70	%	20.0-45.0	Impedance
Eosinophils	1.60	%	0.0-8.0	Light
Monocytes	3.20	%	0.0-10.0	scattering/Manual
Basophils	0.00	%	0.0-1.0	Light
Absolute Neutrophil Count	5.59	10 ³ /uL	2.0- 7.0	scattering/Manual
				Calculated



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Test Name	Result	Unit	Reference Value	Method
Absolute Lymphocyte Count	3.50	10 ³ /uL	1.0-3.0	Calculated
Absolute Monocyte Count	0.30	10 ³ /uL	0.20-1.00	Calculated
Absolute Eosinophil Count	150.00	cells/cumm	40-440	Calculated
Absolute Basophil Count	0.00	10 ³ /uL	0.0-0.10	Calculated
Erythrocyte Sedimentation Rate (ESR)	12	mm/hr	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
Alanine Aminotransferase (ALT/SGPT)-Serum	36.00	U/L	Male:16.0-63.0 Female:14.0-59.0	UV with Pyridoxal - 5 - Phosphate

Comments: Alanine Aminotransferase (ALT/SGPT) is an enzyme found mainly in liver tissue and to a lesser extent in heart, kidney and skeletal muscle. It's measurement is clinically useful in the diagnosis of liver and biliary disease. Normal ranges in Adult male:<45 and Adult female:<34 U/L.

Cholesterol Total-Serum	198.00	mg/dL	Desirable: 0.0-200 Borderline High: 200-239 High:>240	Cholesterol Oxidase/Peroxidase (Spectrophotometer)
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Comments: Cholesterol is a lipophilic molecule that is essential for human life. It has many roles that contribute to normally functioning cells. For example, cholesterol is an important component of the cell membrane. It contributes to the structural makeup of the membrane as well as modulates its fluidity. Cholesterol functions as a precursor molecule in the synthesis of vitamin D, steroid hormones (e.g., cortisol and aldosterone and adrenal androgens), and sex hormones (e.g., testosterone, estrogens, and progesterone). Cholesterol is also a constituent of bile salt used in digestion to facilitate absorption of fat-soluble vitamins A, D, E, and K. Since cholesterol is mostly lipophilic, it is transported through the blood, along with triglycerides, inside lipoprotein particles (HDL, IDL, LDL, VLDL, and chylomicrons). These lipoproteins can be detected in the clinical setting to estimate the amount of cholesterol in the blood. Chylomicrons are not present in non-fasting plasma. Increasing concentrations of Total cholesterol and LDL cholesterol are both correlated with increasing risk of cardiovascular disease. The levels are used to monitor response to cholesterol lowering therapy.

Creatinine, Serum	0.76	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.

Fasting Blood Sugar (FBS)-Plasma	91	mg/dL	60.0-110.0	Hexo Kinase
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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.

Urea-Serum	23.10	mg/dL	11.0 - 43.0	Urease-GLDH, UV Method
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Comments: Urea is the end product of protein metabolism. It reflects on the functioning of the kidney in the body. Elevated levels are seen in pre-renal azotemia, renal disease, post-renal disease and reduced glomerular perfusion due to shock, dehydration, diarrhea etc. Decreased levels are seen in malnutrition, overhydration, liver disease etc.



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Dr. Nithun Reddy C,MD,Consultant Pathologist

SCAN FOR LOCATION



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Test Name	Result	Unit	Reference Value	Method
Urine Routine Examination-Urine				
Physical Examination				
Colour	Pale Yellow		Pale Yellow	Visual
Appearance	Clear		Clear	Visual
Reaction (pH)	6.5		5.0-7.5	Dipstick
Specific Gravity	1.025		1.000-1.030	Dipstick
Biochemical Examination				
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
Microscopic Examination				
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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Test Name	Result	Unit	Reference Value	Method
Blood Group & Rh Typing-Whole Blood EDTA				
Blood Group	O			Slide/Tube agglutination
Rh Type	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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